

Evaluation Workgroup Report

**Robert Wood Johnson Foundation Sharing Public Health Services Project
Building Public Health Capacities through Collaboration: Accelerating Progress in
Northeast Ohio**

Kent State University

Center for Public Policy and Health

12/19/2014

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Introduction and Background

Portage County's Robert Wood Johnson Foundation Sharing Public Health Services Project is organized around a series of three workgroups: The Strategy and Action (SAP) Workgroup, Evaluation Workgroup, and Education Workgroup. Each workgroup is made up of a mix of health department staff members, board of health members, and other related public health stakeholders. This report is concerned with presenting the activities of the Evaluation Workgroup related to evaluating collaborative arrangements among the three health departments in Portage County.

The Evaluation Workgroup was formed in early 2013 and began meeting regularly starting in May of that year. Early on in the process, the workgroup developed and eventually finalized a workgroup charter. The mission of the workgroup according to its charter is to inventory existing collaborations among the Portage County Health Departments (Portage County, Kent, and Ravenna), assess their current implementation, and devise means by which collaborative efforts among departments in the County may be improved (see Appendix 1).

The charter also highlights the workgroup's tasks. The Evaluation Workgroup is charged with inventorying collaborative endeavors among health departments in Portage County, developing criteria for assessing the current collaborative endeavors, and providing recommendations for improvement in this area. According to the charter, these recommendations are meant to provide insights to support the use of partnerships in Portage County's public health strategy development.

Project background

In March of 2011, a group of concerned Portage County citizens and stakeholders – at the request of Ravenna Mayor Joseph Bica – formed a *Task Force for Improving Public Health in Portage County*. The group met over the course of the following year and issued a report suggesting that the current fragmentation of public health services in Portage County should be addressed and – generally -- that public health services in Portage County should be improved through more collaborative county-wide efforts. The Kent State University (KSU) - College of Public Health (CPH) facilitated the work of this Task Force and aided in preparing the report. After issuance of the report, the three Portage County Health Departments – Portage County, City of Kent, and City of Ravenna commissioned the CPH to carry out a performance review of the public health system, prepare a preliminary county-wide needs assessment using existing data, and develop grant applications to solicit funding to support further facilitation and research work enabling more coordination for, and progress of, this collaborative effort. The KSU-CPH conducted the performance assessment of the public health system, created a preliminary needs assessment using existing data, and prepared two grant applications – one to the Local Government Innovation Fund (LGIF) and one to the Robert Wood Johnson Foundation (RWJF).

Both grant proposals were successful and have yielded funding to support continued efforts to improve collaborative public health efforts in Portage County.

Since the completion of that work in January 2013, the KSU-CPH's Center for Public Policy and Health (CPPH) has administered the RWJF grant with input from the Task Force, which is intended to "develop an informed and shared approach to assuring effective and efficient delivery of essential public health services in Portage County." KSU-CPPH is facilitating three separate workgroups made up of health department representatives and community stakeholders that are working towards completing the project's deliverables.

The SAP workgroup is tasked with developing a report that lays out the strategies and actions necessary to move the local health departments toward Public Health Accreditation Board (PHAB) accreditation by completing the prerequisite Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) processes. The Evaluation Workgroup is tasked with evaluating existing and potential collaborations between the three health departments and providing recommendation on ways to improve the collaborative relationships between the three jurisdictions. The Education Workgroup is concerned with reaching out to and educating key stakeholders on the process underway to improve public health in the county and to solicit their involvement where appropriate.

The SAP and Evaluation Workgroups have been meeting since May of 2013, and developed work products and recommendations that are being reviewed by the health department leadership in the county and the Task Force. The Education Workgroup began meeting in Fall of 2013. A description of the Evaluation Workgroup's efforts to evaluate the collaborative activities of the three health departments in Portage County is provided below along with recommendations to local public health officials on ways to improve those efforts.

Evaluation Methods

As noted above, the Evaluation Workgroup was tasked with evaluating collaborations among the three health districts in the county, and with providing recommendations to local health officials on ways to improve those collaborative relationships. To develop the recommendations, workgroup members engaged in a series of activities with assistance from KSU-CPPH staff. This section describes the workgroup's methods for evaluating the collaborative public health services being provided in Portage County.

Inventory of Services

The workgroup began the process by developing an inventory of the existing public health services – including services provided collaboratively and non-collaboratively – offered by the health departments in Portage County. Workgroup members decided to use a document that was created by Kent State's College of Public Health in 2011 for the Task Force for Improving

Public Health in Portage County as the basis for this inventory. This document was a comparison of the three health departments' services/programs set up in a spreadsheet form. The workgroup thought it made sense to update this document for their needs rather than start from scratch. The spreadsheet's columns were adjusted and workgroup members associated with the three jurisdictions worked with KSU-CPPH staff to update the programs and services listed in the spreadsheet to reflect any changes in services that occurred between 2011 and 2013 for each jurisdiction. The final product was an inventory of all of the environmental health, administrative, and nursing services provided in the three health districts in Portage County. The inventory can be found in Appendix 2. A total of 54 separate health department services were identified as of summer 2013, and included in the inventory.

After identifying services provided by and in each of the three jurisdictions, workgroup members began identifying which services were provided collaboratively and which were being provided by and for individual health jurisdictions. The definition of collaboration used by the workgroup is quite broad and can be found in Appendix 3. For services that are provided collaboratively, the workgroup members identified which entity or entities were the providers of the services and which jurisdictions were the recipients. The Workgroup also identified the purpose of the collaboration and information related to grants and contracts associated with the service.

Evaluating the Collaborations

Once the inventory of services was completed, the workgroup moved on to the process of evaluating the existing public health collaborations in Portage County. An important step in this process was to establish criteria by which the collaborations would be evaluated. After brainstorming a range of potential criteria, the workgroup agreed on the following criteria:

- A. Does the collaboration improve or expand public health services in Portage County (in ways that are likely to enhance public health over time)?
 - 1. A yes answer would argue for continuation.
- B. Does the collaboration save money and/or improve the efficiency of public health services in Portage County?
 - 1. A yes answer would argue for continuation.
- C. Is the collaboration sustainable or replicable – can it be continued over time in Portage County?
 - a. A yes answer would argue for continuation.
- D. Does the collaboration support PHAB accreditation (and/or one or more of the ten essential services) for one or more Portage County Health Departments?
 - a. A yes answer would argue for continuation.

While all four of these criteria were deemed valuable, the Workgroup did not assert that all criteria needed to be met in order for a particular collaborative effort to be deemed useful and worth continuing. Rather, an affirmative assessment regarding just one of the criteria may very well be sufficient to establish that a collaborative public health service is worth continuing¹. The Workgroup also noted that some health department collaborations may be driven by grant requirements and/or other external mandates, which may result in operating collaborations that do not conform to the criteria above.

KSU-CPPH then set up interviews with the three health commissioners in the county to review the inventory of collaborative services and evaluate them using the criteria above. For each of the criteria, KSU-CPPH asked the commissioners to answer yes, the criterion was met by the collaboration, or no, the criterion was not met by the collaboration. The commissioners were asked to explain each response they provided. They were also asked if there were any actions that could be taken to improve the collaboration. This exercise was performed for all 25 collaborations identified by the workgroup; however, the commissioners were only asked about collaborations for which their agency was either a provider or recipient. The results of the evaluation are discussed below.

Evaluation Results

The group found that 46% (25/54) of total public health services in the county were provided collaboratively, as of 2013. Of the 31 environmental health services identified, 10 (32%) were being provided collaboratively at the time of the workgroup's analysis. All ten of these environmental health collaborations involved the Portage County Health Department (PCHD) and the Ravenna Health District (RHD) because the PCHD assists the City of Ravenna by providing environmental health services for Ravenna residents. The Kent Health Department (KHD) delivers its own environmental health services, largely independent of the other health departments. All (100%) of the nursing services provided by public health departments in the county were being provided collaboratively because the PCHD provides nursing services to residents in both city jurisdictions. Administrative services had the smallest proportion of services provided collaboratively, as only 11% were being provided collaboratively (1 out of 9). The one service that was provided collaboratively was vital statistics reporting services, and it was provided by both the KHD and the RHD. A detailed set of three tables that lists each of the 54 public health service provided by the three public health departments, and identifies whether it is provided collaboratively can be found in Appendix 4.

The results of KSU-CPPH's interviews with the three health commissioners in the county are shown in the three tables below. Table 1 shows the results of applying the criteria approved by the Workgroup to collaborations relating to publicly provided environmental health services in

¹ It should be noted, however, that the sustainability or replicability of a collaboration may be determined to be valuable only when accompanied by positive assessment regarding at least one of the other three criteria.

the county. As with all three of these tables, the collaborative programs are found along the vertical y-axis and the criteria are listed horizontally along the x-axis. The information in Table 1 shows that, according to the Health Commissioners interviewed, each collaborative environmental health service is evaluated positively based on more than one of the criteria. However, based on the responses provided, there seems to be some uncertainty as to whether or not the PCHD-RHD collaboration on environmental health services saves money or enhances efficiency. However, the commissioners were unanimous in their agreement that all of the collaborations in this area were sustainable and that the partnerships fostered progress towards PHAB Accreditation. There were also no negative responses related to whether or not the provision of collaborative services in this area improved upon or expanded publicly provided environmental health services in the county (all were “yes” or “I don’t know”).

Table 1²

Application of Evaluative Criteria to Existing Environmental Health Collaborations in Portage County*				
Public Health Services**	Evaluative Criteria			
	Improves or expand Public Health Services	Saves Money or Enhances Efficiency	Sustainable or Replicable?	Fosters Progress Toward PHAB Accreditation
Inspection of Food Operations	Y***	IDK	Y	Y
	Y	N	Y	Y
Inspection of Public Pools	IDK	IDK	Y	Y
	Y	N	Y	Y
Nuisance Complaint Response	Y	IDK	Y	Y
	Y	N	Y	Y
Animal Bite Response	Y	Y	Y	Y
	Y	IDK	Y	Y
Household Sewage Inspection & Permitting	Y	N	Y	Y
	Y	Y	Y	Y
Inspect Public & Private Schools	IDK	IDK	Y	Y
	Y	N	Y	Y

*The collaborations and responses provided here are from Ravenna and Portage County, as they are the only LHD environmental health service collaborators in Portage County.

**This table summarizes responses from leaders in Portage County and Ravenna regarding existing collaborations in public health. The following program areas are omitted because at least one of the two leaders interviewed suggested that the collaboration was not immediately applicable, important, or subject to conscious influence: 1) Tattoo Parlors (currently none in Ravenna); 2) Smoking complaint response (handled by Cuyahoga County for PCHD and Ravenna); 3) Public Beach Inspections (no public beaches in Ravenna), and; 4) Private Water Inspection (Ravenna supplies public water, so not currently relevant).

*** Y=Yes, N=No, IDK= “I don’t know”

² For this table, as well as those that follow, we list the responses received from the commissioners anonymously in the hope that this practice will enable a free flow of discussion regarding the issues and questions involved.

During the interviews we held with the Health Commissioners, they suggested a number of areas where they thought current environmental health department collaboration efforts could be improved. The comments we received included the following:

1. Consider adopting county-wide food inspection criteria.
2. Consider centralizing pool inspections county-wide, and perhaps hiring one “pools” specialist to handle these inspections. There may be economies of scale for this service.
3. Extend nuisance services provided by PCHD to all municipalities – not only Ravenna.
4. Centralize reporting and follow up on animal bites.
5. There is a need to dialogue and educate with Ravenna vets regarding PCHD animal bite services.
6. Clarify further how school inspection services will be carried out in Ravenna.
7. For inspection, licensure, and permit services in Ravenna, there is a need to transfer these functions to the county. Currently, the county is providing services based on Ravenna’s issuances in these areas.
8. Consider whether anti-smoking enforcement might be done by local LHDs, rather than by Cuyahoga County Health Department. Kent currently carries out this function, and could perhaps play a leadership role county-wide.

Table 2 shows the results from the evaluation of administrative service collaborations between the health departments in Portage County. The only collaboration in this area relates to vital statistics services. At the time of the evaluation in Fall of 2013, both Kent and Ravenna were providing these services, and any resident of Portage County (including residents of these two cities) could go to either agency for services. As shown in in Table 2, all three Health Commissioners believe that this collaboration improves or expands public health services and that it is a sustainable collaboration. Two out of the three felt the collaboration enhanced efficiency or saved money. However, there was some uncertainty with how much this service moved the departments toward PHAB Accreditation.

Table 2

Application of Evaluative Criteria to Administrative Service Collaborations in Portage County*				
Public Health Program Areas	Evaluative Criteria			
	Improves or expand Public Health Services	Saves Money or Enhances Efficiency	Sustainable or Replicable?	Fosters Progress Toward PHAB Accreditation
Vital Statistics Services	Y**	N	Y	Y/IDK
	Y	Y	Y	Y
	Y	Y	Y	IDK

*The responses here were provided by leaders in Portage County, Ravenna, and Kent.

** Y=Yes, N=No, IDK=”I don’t know”

Areas for suggested improvements in administrative collaborations include:

1. Expand birth and death certificate availability and hours – perhaps particularly in Ravenna.
2. Consider one vital statistics administrator in the county to enhance efficiency.

A majority of the collaborative public health services provided by local health departments in Portage County are in the area of nursing services. All three health departments are involved, as the county health department provides nursing services to the two city jurisdictions. Table 3 highlights the results of the evaluation of collaborative nursing services. As shown below, the Health Commissioners believed that the vast majority of collaborative nursing services met the criteria adopted by the Evaluation Workgroup. There were a few cases where a commissioner perceived that a collaborative effort did not meet one of the four criteria. One Health Commissioner suggested that current health screening services, including blood pressure, newborn, and other screenings, may not improve or expand health services. Also, one Health Commissioner felt that the emergency preparedness collaboration was not sustainable because it was grant funded. Another Health Commissioner answered yes it was sustainable, but only if it was adequately funded. The remaining responses were either positive, indicating the Health Commissioners felt the collaborations met the criteria, or “I don’t know” responses indicating that more information may be needed to understand if a collaboration meets the criteria.

Table 3

Application of Evaluative Criteria to Nursing Services Collaborations in Portage County*				
	Evaluative Criteria			
Public Health Program Areas	Improves or expand Public Health Services	Saves Money or Enhances Efficiency	Sustainable or Replicable?	Fosters Progress Toward PHAB Accreditation
Childhood Vaccinations	Y**	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
Adult Immunizations	Y	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
International Travel Immunizations	Y	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
Monitoring, reporting, & tracking of Communicable Diseases	Y	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
Health Screening	Y	Y	Y	Y
	Y	IDK	Y	Y
	N	IDK	Y, ? on newborns	Y

Manage & Control Tuberculosis	Y	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
BCMH – services for handicapped children	Y	Y	Y	Y
	Y	Y	Y	Y
	IDK	IDK	IDK	IDK
Emergency Preparedness & Planning	Y	Y	IDK	Y
	Y	Y	N	Y
	Y	Y	Y, if funded	Y
Monitor Disease Developments – EPI Ctr/NRDM	Y	Y	Y	Y
	Y	Y	Y, if funded	Y
	Y	Y	Y	Y
Health Education & Promotion	Y	Y	Y	Y
	Y	Y	Y	Y
	IDK	IDK	IDK	IDK
Rabies Treatment	Y	Y	Y	Y
	Y	Y	Y	Y
Immunization Assessments – Schools & Docs	Y	Y	Y	Y
	Y	Y	Y	Y
	Y	Y	Y	Y
Maternal & Child Health Assessment	Y	Y	Y	Y
	Y	Y	IDK	Y
	Y	Y	Y	Y
Nutrition Education	Y	Y	Y	Y
	Y	Y	Y	Y
	IDK	IDK	IDK	IDK

*This table includes responses from leaders of the Portage County, Ravenna, and Kent Health Departments.

** Y=Yes, N=No, IDK="I don't know"

The Health Commissioners also suggested a number of areas for potential improvements in nursing program collaborations. The areas suggested include:

1. Evaluate clinic hours and availabilities in the county, including for immunization services.
2. Expand education on international travel and the need for immunizations.
3. Consider establishing one central number for communicable disease reporting.
4. Increase marketing for health screenings.
5. Tuberculosis – coordinate with medical practitioners, and perhaps with SCPH due to their expertise in this area.
6. Expand availability of Bureau for Children with Medical Handicaps (BCMH) services to all Obstetrics/Gynecology physicians.
7. Strategize regarding emergency planning funding, and research other models for this service. Some perception that this function needs renewed attention.
8. Expand Maternal and Child Health (MCH) assessment to include indicators beyond MCH.

9. Market newborn screenings.
10. Expand vendors supporting childhood vaccinations, adult vaccinations, and travel vaccinations.
11. Consolidate communicable disease monitoring, reporting, and tracking functions to reduce transaction costs.
12. Expand health screenings along with health education and promotion, including for Tuberculosis.
13. Centralize health education function, perhaps through consolidation.
14. Consolidate rabies treatment functions – include Kent in this discussion.
15. Mandate immunization tracking system by doctors.
16. Address funding uncertainties for MCH, to the extent possible.
17. Identify additional funding for nutrition education.
18. Expand Epi Center Anomalies (EpiCenter) and National Retail Data Monitoring use – engage Robinson Memorial Hospital here.
19. Assess current programs and expand health education and promotion role.
20. Expand immunization assessment outreach.
21. Newborn screening – need to know more about extent to which this is being accomplished.

At the end of the interviews, KSU-CPPH staff asked the three commissioners if there were other potential collaborations that could advance the four criteria developed by the Evaluation Workgroup in the future. A summary of their responses follows below:

- All of the health departments can expand nursing services being provided in the county.
- More times available for accessing nursing services. More locations to receive services.
- Health education = opportunity. Should market public health 24/7, educate on the prevalence of disease in the county and educate about health behaviors.
- More needed related to preparedness: no drills, only quarterly meetings (need more).
- Potential opportunities with health departments outside of the county - Summit, Stark, Mahoning, etc.
- Also going to need to have greater collaborations with community partners (Robinson Memorial Hospital, Red Cross, Religious orgs, etc).
- Going to need to increase health department collaboration (PCHD/KHD/Ravenna) as a result of financial incentives. For example, Ohio Department of Health (ODH) has announced that it would be regionalizing some grant funds which will incentivize collaboration.
- Also continue to build collaborations with academic community (Kent State University, Northeast Ohio Medical University (NEOMED), etc.)
- Administrative collaborations: Core functions (as outlined in the Public Health Future Reports)
 - No collaboration in this area except vital statistics.
- More dedicated funding to epidemiology and needs assessment work (even if it is not mandated).
 - Need more strategic action/direction in this area.
- Performance measures and quality assurance
 - Requires citizen engagement

- Need baselines and to measure outcomes
- Essential for decision making and planning
- Workforce development
 - PH workforce needs to understand what "public health" is and their role within the PH system.
 - Education on the 10 Essential Services, best practices, and PHAB.
 - Broader training than job specific.
- Citizen Engagement
 - Need to make sure the health departments are meeting the public's needs.
 - Need to understand the demand for services in terms of location/timing services are available.
 - Can use multiple methods (online surveys, exit/customer surveys etc)
 - How do you improve if you don't ask?
 - This is tied to health education/promotion.
- Linking PH stakeholders to the PH system
 - Education
 - Relationship building

Workgroup Recommendations

The Evaluation Workgroup identified substantial collaboration efforts already underway among the Portage County health departments, and most of these collaborations relate to nursing and environmental health services. The Workgroup has also taken note of the specific suggestions for improvements in particular collaborative efforts identified by one or more of the Health Commissioners. Despite the numerous existing collaborative efforts and ideas for how they might be improved in the future, the Workgroup is suggesting now that there are opportunities for further managerial and administrative collaborations that are worthy of further attention at this point in time. Toward this end, the Evaluation Workgroup recommends that the Portage County Health Commissioners and their Boards of Health seriously consider implementing the recommendations below.

If these recommendations were adopted by the three jurisdictions, the Workgroup believes that their implementation would be likely to contribute to continuing improvements in public health service provision in Portage County, while also strengthening the county's efforts to achieve progress toward PHAB accreditation.

The Evaluation Workgroup recommends that the Boards of Health and Health Commissioners of Portage County adopt consistent policies across jurisdictions to the extent possible through implementation of the following points:

- 1) developing a single mission and associated statement for all three health districts/departments that supports a unified vision for promoting and improving public health in Portage County;
- 2) creating and implementing a joint planning process that seeks to align current and future policies across public health jurisdictions in Portage County. The group envisions that this process would require ongoing and regular (eg. quarterly) meetings of the leadership of the relevant districts/departments that would identify additional opportunities for collaboration and collaborative improvements among the county's health departments as well as common policies and practices to guide their implementation, and;
- 3) working collaboratively to identify and engage other entities and organizations within the county with whom the departments can work to enhance and expand public health services.

Conclusion

The Evaluation Workgroup's recommendations were reviewed by the health department leaderships, including the Health Commissioners, relevant city officials, and the three boards of health during the early months of 2014. The Task Force for Improving Public Health in Portage County was also asked to review and provide comments on the recommendations.

Overall, the responses received focused on the need to work collaboratively on a Community Health Assessment, as was recommended by the SAP Workgroup. They also suggested that, in so doing, the health departments would start the process of engaging in collaborative planning and in engaging other public health stakeholders, as is suggested by Evaluation Workgroup recommendations 2 and 3 (see above). The Health Department responses suggested that they believed a joint mission statement was not necessary at that point in time.

By the end of 2014, the health departments – with help from the RWJF Workgroups and KSU-CPPH -- had followed up on a number of recommendations emanating from the RWJF workgroups and this report. They had completed the process of developing a draft CHA report for consideration in the community in cooperation with public health stakeholders in the community, expanded collaborative activities in the areas of mosquito abatement and vital statistics services, and enhanced PCHD services in the City of Ravenna through expanded contract service arrangements in the two jurisdictions. Through these efforts, the health departments have made progress in implementing key recommendations of the SAP Workgroup, the Evaluation Workgroup and the RWJF process more generally.

Appendix 1: Evaluation Workgroup Charter

MISSION: To inventory existing collaborations among the Portage County Health Departments (Portage County, Kent, and Ravenna), assess their current implementation, and devise means by which collaborative efforts (existing and possible future) among departments in the County may be improved.	
BACKGROUND: The goal of this project is to assess existing collaborative endeavors across health departments and develop means for their improvement. In pursuing this goal, we hope to take advantage of models and lessons from the Kansas Health Institute's new Center for Sharing Public Health Services and others, and to contribute what we learn to the larger National Learning Community.	
WORKGROUP TASKS <ol style="list-style-type: none">1. The Workgroup will inventory existing and past collaborative endeavors among health departments in Portage County, producing a list of collaborations for further investigations.2. The Workgroup will develop criteria for assessing current collaborative endeavors, and a strategy for evaluating them – including determining their benefits and ways in which they might be improved in the future.3. Complete a report which provides a description and presents results of the evaluation processes used, and makes recommendations for improvement of at least one collaborative initiative (involving multiple health departments in Portage County).4. Make other recommendations regarding changes in collaborative approaches as the workgroup may determine is necessary and/or desirable.5. Provide insights to support use of partnerships in Portage County public health strategy development to SAP and/or workgroups, as appropriate.	
ESTIMATED DATE FOR COMPLETION: January 14, 2015	
MEETING FREQUENCIES & DURATION:	1.5 – 2 hours each. 3-5 meetings between April – November 2013 and 2-4 meetings between January and June 2014; as needed thereafter.
MEMBERS: Confirmed (by the three health departments): Rob Palmer (PCHD), Karen Towne/Kevin Watson (PCHD), Justin Smith (KHD), Heather Beaird (KSU/SCPH), Iris Meltzer (consultant), Amy Lee (NEOMED), Doug Wagener (KHD), and Pam Freeman (KSU and mental health experience).	
FACILITATOR: John Hoornbeek + Josh Filla	
NOTES: 1) in carrying out the tasks above, take steps to learn from past mistakes and successes. 2) Where possible, take into account the role of external (non-health department) groups in collaborations and in the success and failures of collaborations. 3) The workgroup will work to ensure that its efforts support work of the health departments and the pursuit of essential public health services and PHAB accreditation. Collaborations assessed should also be viewed in the context of these standards.	

Appendix 2: Portage County Public Health Department Services Inventory

Inventory of Health Department Services in Portage County as of 10/25/13

Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
ENVIRONMENTAL HEALTH	Inspection and Licensing of food service operations, retail food establishments, and vending.	Enforce public health laws	Y	P	PR	Y (7/13-12/13)	N	To provide full food service inspection program to the City of Ravenna; Cost savings to the City. Ravenna replacing contract they had with environmental contractor	Ravenna contracts with Registered Sanitarian for their EH work
			N	K	K				
ENVIRONMENTAL HEALTH	License and Inspect Public Pools and Spas	Enforce public health laws	Y	P	PR	Y (7/13-12/13)	N	To provide full public swimming pool inspection program to the City of Ravenna; Cost savings to the City. Ravenna replacing contract they had with environmental contractor	
			N	K	K				
ENVIRONMENTAL HEALTH	Ensure safety compliance and water testing at public swimming beaches	Enforce public health laws	Y	P	PR		N		
			N	R	R				No public beaches in R or K
			N	K (O)	K				Kent currently does not have and public bathing beaches.
ENVIRONMENTAL HEALTH	Inspect, abate, and take enforcement actions in response to nuisance Complaints	Enforce public health laws	Y	P	PR	Y (7/1/13 - 12/31/13)	N	Ravenna replacing contract they had with environmental contractor	Discussions ongoing regarding applications to housing
			N	K	K				
ENVIRONMENTAL HEALTH	Respond to, investigate, and quarantine animals in response to animal bites	Enforce public health laws and Conduct and disseminate assessments	Y	P	PR	Y (7/1/13 - 12/31/13)	N	Ravenna replacing contract they had with environmental contractor	
			N	K	K				
	Inspect, permit, and sample New Private Water Systems	Enforce public health laws	Y	P	PR	No contract; Just agreement between LHDs	N	To assist RHD which has no experience with private water systems	Kent and Ravenna have Municipal Water Supply

Inventory of Health Department Services in Portage County as of 10/25/13

Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
ENVIRONMENTAL HEALTH			N	K (O)	K				The property owner will have to apply for a variance with City Council. KHD collects the water samples. Samples are tested at the Kent Water Labs - Service Department.
ENVIRONMENTAL HEALTH	Inspect & License Water Haulers	Enforce public health laws	N	P	P				
ENVIRONMENTAL HEALTH	Inspect and report on compliance of Semi-Public Sewage Disposal System Inspection Contracts to OEPA (House Bill 110 Program)	Enforce public health laws	N	P	P				EPA has enforcement authority
ENVIRONMENTAL HEALTH	Operate National Industrial Pretreatment Program	Enforce public health laws	N?	K	K		N		Kent City Service Department contracts with Kent City Health Department for administration and laboratory services.
			N	R	O (service dept)				
ENVIRONMENTAL HEALTH	Manage and Deliver Community Water Supply	Enforce public health laws	N	K	O (service dept)		N		For both Kent and Ravenna Cities their Service Departments take care of the community water supply
			N	R	O (service dept)				
			NA (P)	NA (P)	NA (P)				The Portage County Water Resources Department (Sanitary Engineers) is responsible, except where within one of the city or village municipalities. EPA has regulatory authority.
ENVIRONMENTAL HEALTH	Provision of Laboratory Services		N	P	O (county lab services)		N		Kent City has a support lab for central waste water and river water testing.
			N	R	O				
			N	K	O (Service Dept)				

Inventory of Health Department Services in Portage County as of 10/25/13

Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
ENVIRONMENTAL HEALTH	Inspect and License Tattoo Parlors	Enforce public health laws	Y	P	PR	7/1/13 - 12/31/13	N	Ravenna replacing contract they'd had with environmental contractor	Currently ((10-13), there are no Tattoo Parlors operating in the City of Ravenna.
			N	K	K				
ENVIRONMENTAL HEALTH	Inspect and Permit Household Sewage Treatment Systems	Enforce public health laws	Y	P	PR	7/1/13 - 12/31/13	N	To assist RCHD which has no experience with home sewage systems	
			N	K	K				
ENVIRONMENTAL HEALTH	Public Waste Water Treatment Inspection	Enforce public health laws	N	O (Service Dept)	K		N		EPA enforces the public health laws. Kent City Service Dept. runs with waste water treatment plant.
			N	R	O (Service Dept)				
			NA (P)	NA (P)	NA (P)				
ENVIRONMENTAL HEALTH	Inspect Home Aeration Systems	Enforce public health laws	N	P	P		N		What happens if these are in Kent or Ravenna? The property owner will have to apply for a variance with City Council. Operational Inspections are completed the KHD
			N	K	K				
ENVIRONMENTAL HEALTH	License and Inspect Camp Grounds	Enforce public health laws	N	P	P		N		Only provided by county, no campgrounds in Kent or Ravenna?
ENVIRONMENTAL HEALTH	License and Inspect Hotel / Motel	Enforce public health laws	N	P	P		N		KHD has two hotels with in the city. Multi unit housing code covers hotels.
			N	K	K				
ENVIRONMENTAL HEALTH	Inspect all public and private schools	Enforce public health laws	Y	P	PR	7/1/13 - 12/31/13	N	Ravenna replacing contract they'd had with environmental contractor	KHD is conducting two inspections in each Public and Private schools a year.
			N	K	K				

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Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
ENVIRONMENTAL HEALTH	Inspect and Evaluate home water and sewage systems upon request		N	P	P		N		Water wells and septs inspected with home sales in county. Municipal water and sewage in Kent and Ravenna, not applicable.
			N	K	K				
ENVIRONMENTAL HEALTH	Manage Phase II Stormwater Program or parts thereof (PCHD manages only elicit discharges)	Enforce public health laws	N	P	P		N		Kent and Ravenna Municipalities do their own Storm water not under PH;
			N	R	O (service dept)				
			N	K	O (servicedept)				
ENVIRONMENTAL HEALTH	Inspect and enforce multi-unit housing structures	Enforce public health laws	N	K	K		N		Housing Inspections are done by KHD only. KHD enforces the City Enviromental Health and Housing Maintenance Code.
			N	R	O (Service Dept)				
			NA (P)	NA (P)	NA (P)				
ENVIRONMENTAL HEALTH	Inspect dwellings to determine if they need to be demolished for health reasons	Enforce public health laws	N	P	P		N		Kent Health Commissioner has authority to demolish buildings
			N	K	K				
			N	R	R				
ENVIRONMENTAL HEALTH	Inspect jails for sanitary conditions	Enforce public health laws	N	K	K		N		KHD inspects the city jail once a year.
			N	R	R				
			N	P	P				
ENVIRONMENTAL HEALTH	Mosquito Program		N	K	K		N	Kent is open for collaboration with other communities for the Programs services	KHD has developed multiple programs including surveillance, larvaciding, and adultciding.

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ENVIRONMENTAL HEALTH	Inspect and/or license Solid Waste facilities(?)	Enforce public health laws	N	P	P		N		
			N	R	R/O (RPD)				
			N	K	K				
ENVIRONMENTAL HEALTH	Air Quality monitoring permitting, and response to complaints		N	P	O (ARAQMD)	Sept 2010 - ongoing	N		Summit and Akron Regional Air Authority
			N	R	O (ARAQMD)	2012-ongoing			
			N	K (O)	O (ARAQMD)				Contract with ARAQMD
ENVIRONMENTAL HEALTH	License and Inspect Mass gatherings	Enforce public health laws	N	P	P		N		
			N	R	R				
			N	K (O)	K				Kent City Ordinance requires permit for mass gatherings
ENVIRONMENTAL HEALTH	Lead Prevention - Inspection upon request due to elevated blood levels in individuals.	Enforce public health laws	N	P	O (ODH)		N		PCHD environmental health division works with nursing division to refer individual cases with high lead levels
			N	R	O (ODH)				
			N	K	O (ODH)				
ENVIRONMENTAL HEALTH	Monitor and enforce Clean Indoor Air Act		N	P	O (ARAQMD)		N		Akron Regional Air Authority provides services to towns, townships and cities in Portage County
			N	R	O (ARAQMD)				
			N	K	O (ARAQMD)				
ENVIRONMENTAL HEALTH	Monitor and enforce smoking regulations and law	Enforce public health laws	Y?	O (Cuyahoga Co.)	PR	ODH contract with Cuyahoga County Health District covers P/R	N		
			Y?	O (Cuyahoga Co)	R	ODH contract with Cuyahoga County Health District covers P/R			

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			N	K	K	41487			KHD has signed a contract to investigate all smoking reports and enforces the public health laws with in the City of Kent.
ENVIRONMENTAL HEALTH	Plumbing Inspections	Enforce public health laws	N	P	P		N		City of Ravenna done through Building Dept.
			N	R	R				
			N	K (O)	K				Kent City Plumbing Inspections are done through Kent City Building Department
ADMINISTRATION	Record and Issue Vital Records (births and deaths)		Y	R/K	PRK (see note)		N		Birth Records only are available through universal statewide access system. Ravenna does death records for deaths in Ravenna
ADMINISTRATION	Permit Issuance for Sewage and Private Water Systems	Maintain administrative and management	N	P	P		N		PCHD will likely issue permits for Ravenna in 2014
			N	R	R				
			N	K	K				
ADMINISTRATION	Permit Issuance for food service operations, retail food establishments, and vending.	Maintain administrative and management capacity	N	P	P		N		PCHD will likely issue permits for Ravenna in 2014
			N	R	R				
			N	K	K				
ADMINISTRATION	Maintain Records	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				
ADMINISTRATION	Issue Required Reports to the State of Ohio	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				
ADMINISTRATION	Prepare and monitor budget/expenses	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				
ADMINISTRATION	Manage Finances	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				
ADMINISTRATION	Human Resource Management	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				
ADMINISTRATION	Grants Management	Maintain administrative and management	N	P	P		N		
			N	R	R				
			N	K	K				

Inventory of Health Department Services in Portage County as of 10/25/13

Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
NURSING	Administer Childhood Immunizations using VFC vaccine and private purchase vaccine		Y	P	PRK	Kent & Ravenna with PCHD (ends 12/31/13)	Partial IAP	Cities do not have internal nursing divisions	
NURSING	Administer Adult Immunizations private purchase vaccines and state vaccines		Y	P	PRK	Kent & Ravenna with PCHD (ends 12/31/13)	N	Cities do not have internal nursing divisions	
NURSING	Administer International Travel Immunizations and provide Travel Education		Y	P	PRK	Kent & Ravenna with PCHD (ends 12/31/13)	N	Cities do not have internal nursing divisions	
NURSING	Monitoring, Reporting and tracking of Communicable Diseases (and others)		Y	P/O (SCPH)	PRK	Kent & Ravenna with PCHD (Contract ends 12/31/13) (PCHD subcontract w/ SCPH ends 12-31-13)	Partial PHEP	Cities do not have internal nursing divisions	
NURSING	Providing Health Screening Services (ODH - new born screening, TB, fairs (BP, Sugar), farmers markets)		Y	P	PRK		N	Cities do not have internal nursing divisions	Ravenna offers in Community PCHD offers at health dept. Screenings based on Comm. Disease, TB, New Born
NURSING	Manage and control of Tuberculosis		Y	P	PRK	PCHD is the TB Registry for the County	Y - Epi only (Partial) PHEP	Cities do not have internal nursing divisions	
	Coordinate care and services for children who qualify for Bureau		Y	P/O (ODH, see note)	PRK	Contract with ODH to PCHD	N	Cities do not have internal nursing divisions	ORC requires ODH to do this ODH Contracts with LHD

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Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
NURSING	for Children with Medical Handicaps (BCMH)								
NURSING	Administer and coordinate Emergency Preparedness and Planning		Y	P	PRK	Kent & Ravenna with PCHD	PHEP	Cross-jurisdictional grant	
NURSING	Monitor Disease events through Epi Center Anolomys (Epi Center) and National Retail Data Monitoring (NRDM)		Y	P	PRK		PHEP	Cities do not have internal nursing divisions	
NURSING	Provides Health Education and Health Promotion		Y	P	PRK		Partial IAP, CFHS, PHEP, General Fund	Cross-jurisdictional grants	Provides services such as car seat distribute, prevent blindness program, immunization education, safe sleep for SIDS education, nutrition education, promote health departments, enabling services
NURSING	Manage Rabies treatment, prophylaxis and post exposure		Y	P	PR	Contract with Ravenna (ends 12/31/13)	N	Cities do not have internal nursing divisions	
			Y	KP	K				KHD handles dog bites, exposure
NURSING	Provide and monitor Immunization Assessment		Y	P	PRK	Nursing Contract with Kent and Ravenna City (12/2013)	IAP	Cross-jurisdictional grants	
NURSING	Provided a Maternal Child assessment based on the health indicators by ODH		Y	P/O (SCPH)	PRK	PCHD subcontract for Epi components with SCPH (2013)	CFHS	Cross-jurisdictional grant	

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Division	Programs	Public Health Accreditation Board Domain(s)	Collaboration (Y/N)	Providers	Recipients	Contract (start/end date)	Grant (Y/N)	Collaboration Purpose	Comments and Notes
NURSING	Nutrition Education		Y	P/O (SCPH)	PRK	PCHD subcontract with KSU Nutrit Outreach (2013)	CFHS	Cross-jurisdictional grant	
References:				www.kentohio.org/dep/health-programs.asp	www.ci.ravenna.oh.us				

Appendix 3: Evaluation Workgroup’s Definition of Collaboration

Background: Below is the definition of collaboration/shared services recommended by the Evaluation Workgroup. KSU-CPPH had provided a series of potential definitions, and after some discussion, the workgroup selected the language below.

Definition of Shared Services in Public Health- (*Center for Sharing Public Health Services. 2013. “Health Department Survey”*)

SHARING OF RESOURCES (SUCH AS STAFFING OR EQUIPMENT OR FUNDS) AMONG PUBLIC HEALTH DEPARTMENTS ON AN ONGOING BASIS (or, in the case of mutual aid agreements, on an as-needed basis).

In some cases one or more partners may provide resources to support other partners. In other cases, partners may contribute jointly to assure the resources necessary for a shared service. The resources could be shared to support:

Programs (like a joint WIC or environmental health program)

Capacity (e.g., a shared epidemiologist in support of several programs), or

Organizational Functions (such as human resources or information technology).

Combined effort across organizations

Shared responsibility

A mutual goal

Benefits for a community³

The BASIS FOR RESOURCE SHARING AS DEFINED HERE CAN BE FORMAL (a contract or other written agreement) OR INFORMAL (a mutual understanding or “handshake” agreement). Another way to look at this is that each employee, project, resource, service, etc. that spans more than one public health agency jurisdiction is considered a shared resource. What is not included in this definition? District agencies are, by their nature, cross-jurisdictional agencies and their programs will not be considered as shared services. However, if a district agency is providing (or receiving) services in a neighboring jurisdiction that is not within their district, those services would be considered shared. Resources shared among programs in the same jurisdiction, i.e., partnerships among departments in the same jurisdiction, are not considered shared services for the purpose of this survey.

³ Lifted from the following definition of collaboration: *Warm, David. 2011. “Local Government Collaboration for A New Decade: Risk, Trust, and Effectiveness.” State and Local Government Review.*)

Appendix 4: Health Department Collaborations in Environmental Health, Administrative, and Nursing Programs and Services, respectively.

Health Department Collaboration in <i>Environmental Health</i> Programs in Portage County					
Program	Collaboration?	# of Collaborators	Collaborating Jurisdictions	Non-Collaborating Jurisdictions	Comments
Food License & Inspection	Y	2	PCHD & RHD	KHD	
Pool Inspection	Y	2	PCHD & RHD	KHD	
Public Beach Inspection	Y	2	PCHD & RHD	KHD	No beaches in Kent or Ravenna
Response to Nuisance	Y	2	PCHD & RHD	KHD	
Animal Bite response	Y	2	PCHD & RHD	KHD	
Private Water inspection	Y	2	PCHD & RHD	KHD	Municipal water in Kent & Ravenna
Water Haulers	N	0	None	All	PCHD only service
HB 110	N	0	None	All	PCHD only service
Pre-treatment	N	0	None	All	Cities only– Kent & Ravenna
Community Water Supply	N	0	None	All	
Lab Services	N	0	None	All	
Tattoo Parlors	Y	2	PCHD & RHD	KHD	No Tattoo Parlors in Ravenna
Household Sewage	Y	2	PCHD & RHD	KHD	
WW Treatment	N	0	None	All	No centralized WW treatment in “county”
Home Aeration	N	0	None	All	County only – sewers in the cities
Campgrounds	N	0	None	All	Only in county
Hotel/Motel	N	0	None	All	
Schools	Y	2	PCHD & RHD	KHD	
Water/sewer responses	N	0	None	All	Only in county, for the most part.????
Storm-water	N	0	None	All	
Multi-unit Housing	N	0	None	All	
Dwelling Inspections	N	0	None	All	
Jails	N	0	None	All	
Mosquitos	N	0	None	All	
Solid Waste	N	0	None	All	
Air Quality	N	0	None	All	
Mass Gatherings	N	0	None	All	Is this in Ravenna contract?
Lead Prevention	N	0	None	All	
Clean Indoor Air	N	0	None	All	
Anti-Smoking	Y	2	PCHD & RHD	KHD	Cuyahoga County does Portage & Ravenna. Kent does its own.
Plumbing	N	0	None	All	
	10/31	2 of 3, all cases	PCHD & RHD		

Health Department Collaboration in <i>Administrative Services</i> for Public Health in Portage County					
Program	Collaboration?	# of Collaborators	Collaborating Jurisdictions	Non-Collaborating Jurisdictions	Comments
Vital Statistics	Y	3	All	None	RHD & KHD provide for all
Permit Issuance - food	N	0	None	All	Soon, PCHD may issue permits for food services, etc. in Ravenna
Permit Issuance – Sewage/Water	N	0	None	All	Soon, PCHD may issue permits for Ravenna.
Maintain Records	N	0	None	All	
Reports to State	N	0	None	All	
Budget & Expenditures	N	0	None	All	
Manage finances	N	0	None	All	
Human Resources	N	0	None	All	
Grants Management	N	0	None	All	However, grants may benefit across jurisdictions
	1 of 9				

Health Department Collaboration in <i>Nursing Services</i> for Public Health in Portage County					
Program	Collaboration?	# of Collaborators	Collaborating Jurisdictions	Non-Collaborating Jurisdictions	Comments
Childhood Immunization	Y	3	All	None	
Adult Immunization	Y	3	All	None	
International Travel Immunization	Y	3	All	None	
Communicable Disease Reporting & Tracking	Y	3	All	None	SCPH assists here.
Health Screening	Y	3	All	None	
TB Control	Y	3	All	None	
BCMH	Y	3	All	None	ODH contract to PCHD, but serves all jurisdictions in Portage County.
Emergency Preparedness & Planning	Y	3	All	None	
Monitor Disease Events – EPI & NRDM	Y	3	All	None	
Health Education & Promotion	Y	3	All	None	
Manage Rabies Treatment	Y	3	All	None	KHD has its own processes here.
Immunization Assessment – Schools & Dr.'s	Y	3	All	None	
Maternal & Child Health	Y	3	All	None	
Nutrition Education	Y	3	All	None	KSU-SCPH are engaged here.
	14/14	Unified effort here	PCHD, RHD, KHD	KHD has some of its own procedures for bites.	