

SECTION 1 — GENERAL INFORMATION

Introduction — The purpose of this survey is to gain a more complete understanding of existing public health services offered by a public health agency. Having a complete list of services may provide helpful information to assess gaps or redundancies and to plan sharing initiatives. This survey should take about 20 minutes.

The survey should be completed by each public health agency interested in exploring opportunities for cross-jurisdictional sharing (CJS) activities. For example, if a group of 12 health departments wish to explore shared services options, each of them will complete a survey.

The survey contains a list of functions and services that should be applicable to most public health departments, but given the wide variations in the scope of services and their names offered by public health agencies across the country it may be necessary to modify some questions to reflect local situations.

For assistance in setting up an electronic version of the survey or for any other questions, please contact Gianfranco Pezzino at phsharing@khi.org.

Additional Resources — The Center for Sharing Public Health Services has other assessment tools for public health available on its website. See the complete list of available tools in the last section of this survey.

SECTION 2 — YOUR HEALTH DEPARTMENT

Note: Q2.1 will ask you to choose a project name for your group. **All public health jurisdictions in your group that complete the survey should use EXACTLY the same project name.**

Q2.1: Your project name:

Q2.2: Your name:

Q2.3: Your job title:

Q2.4: Health department:

Q2.5: Address:

Q2.6: City/town:

Q2.7: State:

Q2.8: ZIP code:

Q2.9: Your email address:

Q2.10: Phone number:

Q2.11: Please indicate the jurisdiction type that your health department serves:

- Town or township (1)
- City (2)
- County (3)
- Tribe/tribal clinic (4)
- Multi-jurisdictional district (including combined city/county) (5)

Q2.12: How many people live in this jurisdiction?

Q2.13: What is the geographic size of this jurisdiction (in square miles)?

Q2.14: What is the number of FTEs in the health department (including independent contractors if they support the department on an ongoing basis as "staff extensions")?

SECTION 3 — CURRENT SERVICES

This section focuses on the functions and services currently existing in your health department.

Q3.1: Which of the following functions and services currently exist in your health department? Check all that apply.

- Emergency Preparedness (1): If checked, complete *Sub-Section 3.1 — Emergency Preparedness* (page 3)
- Epidemiology or Surveillance (2): If checked, complete *Sub-Section 3.2 — Epidemiology or Surveillance* (page 4)
- Physician and Nursing Services (3): If checked, complete *Sub-Section 3.3 — Physician and Nursing Services* (page 5)
- Communicable Disease Screening or Treatment (4): If checked, complete *Sub-Section 3.4 Communicable Disease Screening or Treatment* (page 7)
- Chronic Disease Screening or Treatment (5): If checked, complete *Sub-Section 3.5 — Chronic Disease Screening or Treatment* (page 8)
- Maternal and Child Health Services (6): If checked, complete *Sub-Section 3.6 — Maternal and Child Health Services* (page 10)
- Population-Based Primary Prevention Programs (7): If checked, complete *Sub-Section 3.7 — Prevention* (page 11)
- Inspection, Permit or Licensing (8): If checked, complete *Sub-Section 3.8 — Inspection, Permit or Licensing* (page 12)
- Environmental Health Programs other than inspection, permit or licensing (9): If checked, complete *Sub-Section 3.9 — Environmental Health Programs* (page 14)
- Community Health Assessment (10): If checked, complete *Sub-Section 3.10 — Community Health Assessment* (page 15)
- Administrative, planning and support services (11): If checked, complete *Sub-Section 3.11 — Administration* (page 16)
- Laboratory services (12): If checked, complete *Sub-Section 3.12 — Laboratory Services* (page 18)
- Other (please specify) (page 19):

Sub-Section 3.1 — Emergency Preparedness

Q3.1.1: What functions and services of emergency preparedness are present in your health department? (Check all that apply.)

- Medical Reserve Corps (1)
- Citizens Corps (2)
- General emergency preparedness and planning (3)
- Others (please specify) (4)

Q3.1.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.1.2 is selected

Q3.1.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.1.3 Are any components of the emergency preparedness functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.1.3 is selected

Q3.1.3.A: Briefly describe the functions and services shared:

Q3.1.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.2 — Epidemiology or Surveillance

Q3.2.1: What functions and services of epidemiology or surveillance are present in your health department? (Check all that apply.)

- Epidemiologic services for outbreak and trend analysis (1)
- Local disease investigation (2)
- Laboratory services (3)
- Others (please specify) (4)

Q3.2.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.2.2 is selected

Q3.2.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.2.3 Are any components of the epidemiology or surveillance functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.2.3 is selected

Q3.2.3.A: Briefly describe the functions and services shared:

Q3.2.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.3 — Physician and Nursing Services

Q3.3.1: What functions and services of physician and nursing services are present in your health department? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Childhood immunizations (1) | <input type="checkbox"/> Breast/cervical cancer screening (10) |
| <input type="checkbox"/> Travel immunizations (2) | <input type="checkbox"/> Infant home visiting (11) |
| <input type="checkbox"/> Local disease investigation (3) | <input type="checkbox"/> Blood pressure screening (12) |
| <input type="checkbox"/> STD testing and treatment (4) | <input type="checkbox"/> Lead screening (13) |
| <input type="checkbox"/> HIV testing (5) | <input type="checkbox"/> Primary medical care (14) |
| <input type="checkbox"/> Tuberculosis screening and treatment (6) | <input type="checkbox"/> School nursing (15) |
| <input type="checkbox"/> Vision/hearing (7) | <input type="checkbox"/> Laboratory services (16) |
| <input type="checkbox"/> Prenatal care (8) | <input type="checkbox"/> Others (please specify) (17) |
| <input type="checkbox"/> Family planning (9) | |

Q3.3.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.3.2 is selected

Q3.3.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.3.3 Are any components of the physician and nursing services functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.3.3 is selected

Q3.3.3.A: Briefly describe the functions and services shared:

Q3.3.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.4 — Communicable Disease Screening or Treatment

Q3.4.1: What functions and services of communicable disease screening or treatment are present in your health department? (Check all that apply.)

- Local disease investigation (1)
- STD testing and treatment (2)
- HIV testing (3)
- Tuberculosis screening and treatment (4)
- Laboratory services (5)
- Epidemiologic services for outbreaks and trend analysis (6)
- Others (please specify) (7)

Q3.4.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.4.2 is selected

Q3.4.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.4.3 Are any components of the communicable disease screening or treatment functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.4.3 is selected

Q3.4.3.A: Briefly describe the functions and services shared:

Q3.4.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.5 — Chronic Disease Screening or Treatment

Q3.5.1: What functions and services of chronic disease screening or treatment are present in your health department? (Check all that apply.)

- Chronic disease reduction (1)
- Corporate wellness program (2)
- General health education (3)
- Breast/cervical cancer screening (4)
- Blood pressure screening (5)
- Lead screening (6)
- Diabetes prevention and treatment (7)
- Cardiovascular disease prevention and treatment (8)
- Others (please specify) (9)

Q3.5.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.5.2 is selected

Q3.5.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.5.3 Are any components of the chronic disease screening or treatment functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.5.3 is selected

Q3.5.3.A: Briefly describe the functions and services shared:

Q3.5.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.6 — Maternal and Child Health Services

Q3.6.1: What functions and services of maternal and child health services are present in your health department? (Check all that apply.)

- Childhood immunizations (1)
- Prenatal care (2)
- Family planning (3)
- Infant home visiting (4)
- WIC (5)
- Lead screening (6)
- Others (please specify) (7)

Q3.6.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.6.2 is selected

Q3.6.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.6.3 Are any components of the maternal and child health services functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.6.3 is selected

Q3.6.3.A: Briefly describe the functions and services shared:

Q3.6.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.7 — Prevention

Q3.7.1: What functions and services of population-based primary prevention programs are present in your health department? (Check all that apply.)

- Chronic disease reduction (1)
- General health education (2)
- Blood pressure screening (3)
- Diabetes prevention and treatment (4)
- Cardiovascular disease prevention and treatment (5)
- Injury prevention (6)
- Car seats (7)
- Traffic safety (8)
- Others (please specify) (9)

Q3.7.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.7.2 is selected

Q3.7.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.7.3 Are any components of the population-based primary prevention programs functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.7.3 is selected

Q3.7.3.A: Briefly describe the functions and services shared:

Q3.7.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.8 — Licensing

Q3.8.1: What functions and services of inspection, permit and licensing are present in your health department? (Check all that apply.)

- Inspections of food services operations (1)
- Inspections of retail food establishments (2)
- Commercial plumbing (3)
- Building codes (4)
- Smoke-free enforcement (5)
- Others (please specify) (6)

Q3.8.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.8.2 is selected

Q3.8.2.A: Briefly describe how you evaluate or review these functions and services.

Q3.8.3 Are any components of the inspection, permit and licensing functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.8.3 is selected

Q3.8.3.A: Briefly describe the functions and services shared:

Q3.8.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.9 — Environmental Health Programs

Q3.9.1: What functions and services of environmental health programs other than inspection, permit or licensing are present in your health department? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Lead assessment (1) | <input type="checkbox"/> Vector control (7) |
| <input type="checkbox"/> Lead abatement (2) | <input type="checkbox"/> Parks and camping sites (8) |
| <input type="checkbox"/> Radon (3) | <input type="checkbox"/> Recycling/litter prevention (9) |
| <input type="checkbox"/> Water (4) | <input type="checkbox"/> Others (please specify) (10) |
| <input type="checkbox"/> Sewage (5) | |
| <input type="checkbox"/> Solid waste (6) | |

Q3.9.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.9.2 is selected

Q3.9.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.9.3 Are any components of the environmental health programs other than inspection, permit or licensing functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.9.3 is selected

Q3.9.3.A: Briefly describe the functions and services shared:

Q3.9.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.10 — Community Health Assessment

Q3.10.1: What functions and services of community health assessment are present in your health department? (Check all that apply.)

- Community Health Assessment services (1)
- Community Health Improvement planning (2)
- Others (please specify) (3)

Q3.10.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.10.2 is selected

Q3.10.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.10.3 Are any components of the community health assessment functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.10.3 is selected

Q3.10.3.A: Briefly describe the functions and services shared:

Q3.10.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.11— Administration

Q3.11.1: What functions and services of administrative, planning and support services are present in your health department? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Legal services (1) | <input type="checkbox"/> Public relations/public information officer (8) |
| <input type="checkbox"/> Human resources (2) | <input type="checkbox"/> Laboratory (9) |
| <input type="checkbox"/> Financial and fiscal management (3) | <input type="checkbox"/> Insurance (10) |
| <input type="checkbox"/> Purchasing (4) | <input type="checkbox"/> Accreditation guidance (11) |
| <input type="checkbox"/> Information technology (5) | <input type="checkbox"/> Policy development (12) |
| <input type="checkbox"/> Communications or public information (6) | <input type="checkbox"/> Evaluation/quality improvement (13) |
| <input type="checkbox"/> Marketing (7) | <input type="checkbox"/> Subject matter experts (14) |
| | <input type="checkbox"/> Others (please specify) (15) |

Q3.11.2: Does your department have any process in place for reviewing or evaluating these functions and services?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.11.2 is selected

Q3.11.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.11.3 Are any components of the administrative, planning and support services functions and services currently implemented through sharing agreements with other health departments?

- Yes (1)
- No (2)
- Do not know (3)

If “Yes” to Q3.11.3 is selected

Q3.11.3.A: Briefly describe the functions and services shared:

Q3.11.3.B: Name of health departments that functions and services are shared with:

Sub-Section 3.12 — Laboratory Services

Q3.12.1: What functions and services of laboratory services are present in your health department?
(Check all that apply.)

Laboratory services (1)

Q3.12.2: Does your department have any process in place for reviewing or evaluating these functions and services?

Yes (1)

No (2)

Do not know (3)

If “Yes” to Q3.12.2 is selected

Q3.12.2.A: Briefly describe how you evaluate or review these functions and services.

Q.3.12.3 Are any components of the laboratory services functions and services currently implemented through sharing agreements with other health departments?

Yes (1)

No (2)

Do not know (3)

If “Yes” to Q3.12.3 is selected

Q3.12.3.A: Briefly describe the functions and services shared:

Q3.12.3.B: Name of health departments that functions and services are shared with:

SECTION 4 — CLOSING

Q4.1: Do you have any other comments regarding service sharing among health departments?

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SECTION 5 — ADDITIONAL RESOURCES

[Assessment Tools for Public Health](#) — The Center for Sharing Public Health Services has these other assessment tools for public health available on its website.

Existing CJS Arrangements: Abbreviated Survey — A self-administered survey designed to allow potential CJS partners with an overview of existing shared service arrangements among potential partners. (Publication Number: CSPHS/07-V1)

Existing CJS Arrangements: Detailed Survey — A self-administered survey designed to allow potential CJS partners a detailed and specific understanding of existing shared service arrangements among potential partners. (Publication Number: CSPHS/08-V1)

One Existing CJS Arrangement — A self-administered survey designed to help current or potential CJS partners (public health agency jurisdictions) gain a clear definition, and better understanding of one current or planned shared service arrangement. (Publication Number: CSPHS/09-V1)