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Missed Opportunities: Describing Collaboration between LHDs & Hospitals around Community Health Assessments

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Practice Gap

Historically there have been infrastructure or long standing practices that create a barrier to collaboration between LHDs and local hospitals

The current levels of collaboration between LHDs and hospitals Community Health Assessments are unknown



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Accreditation efforts

- **Missouri Voluntary Accreditation Program**
 - MO began exploring accreditation of LHDs in the 1990s.
 - 2003, the first LHD was accredited.
- **Nationally, Public Health Accreditation Board (PHAB)**
 - In 2007, CDC, NACCHO, ASTHO, NALBOH, APHA, and RWJF, formed PHAB.
 - The national voluntary accreditation program was launched in 2011.

Accreditation



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- Prerequisites
 - Community Health Assessment – CHA
 - Community Health Implementation Plan – CHIP
 - Agency-Wide Strategic Plan



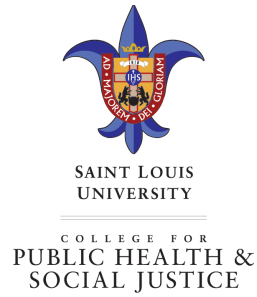
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ACA Requirements

- Community Health Needs Assessment – CHNA
 - Tax exempt hospitals
 - Every 3 years
- Potential to collaborate in addressing community needs

MO DHSS Infrastructure Survey



- LHDs asked about collaboration with local hospital

Does your agency have plans to collaborate with your local hospital to do a collaborative CHA for your jurisdiction?

- NACCHO for clarity on levels of collaboration and joint action



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Levels of Joint Action

- **Networking:** exchange information.
- **Coordination:** exchange information and link existing activities for mutual benefit.
- **Cooperation:** share resources for mutual benefit and to create something new.
- **Collaboration:** work jointly to accomplish shared vision and mission using joint resources.





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Research Question

- How do LHDs classify their relationship with local hospitals?
 - Do LHDs that collaborate with local hospitals differ from those that are unsure about collaborating?
 - What does the level of joint action look like between LHDs and their local hospitals?



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Data Sources

- MDHSS Infrastructure Survey of Local Health Departments, 2012 (N=115)
 - Those collaborating n= 26
 - Those unsure about collaboration n= 29
- Combined with NACCHO 2010 data

Excluded: LHDs that stated (1) future desire to collaborate, (2) no desire to collaborate, or (3) no local hospital in jurisdiction

Key Informant Survey

- Surveys sent to LHD administrators using Qualtrics
- Two distinct and brief surveys sent to those LHDs collaborating and those unsure about collaboration

Analytic Approach

- Final sample size $n=44$ (80%)
- Bivariate analysis:
 - Mann Whitney-U
 - Kruskal-Wallis
 - Fisher Exact test
 - Spearman rank

Analytical Approach

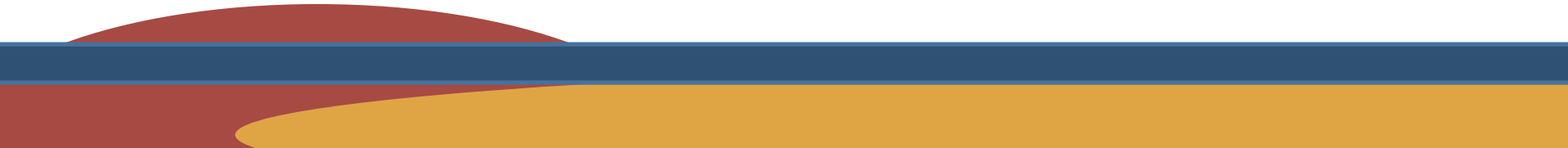
- Collaboration Continuum scale:
 - Contact: “1” for every 6 months to a “7” contact 3 to 5 days a week.
 - Joint action: “1” networking, “2” coordination, “3” cooperation, and “4” collaboration
 - Calculated: contact x level of joint action
 - Range 0 to 28



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FINDINGS





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Findings

Variable	Collaborating (n=22)	Unsure (n=22)
Population > 65	15.2%	17.3%
Household income	\$42,500	\$37,926
Total Expenditures	\$6,539,957	\$1,078,888
Interested in PHAB	54%	13.6%
Administer with Bachelors Degree +	81.8%	36.4%
Refer to CHA 5+ times a year	31.8%	9.1%



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Reasons LHDs Unsure about Collaboration (n=22)

Not sure if local hospital wants to collaborate on CHA	22.7%
We have not been contacted by any local hospitals	22.7%
We are collaborating with a local hospital on a CHA	22.7%
Not aware of local hospital's not for profit status	13.6%
Do not have a good working relationship with local hospital	13.6%
We have different goals that our local hospital	13.6%
We lack the resources for a successful partnership	13.6%
We lack the leadership for a successful partnership	4.5%
The local hospital is for profit	4.5%



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Findings

Unsure LHDs – Level of Satisfaction with their working relationship with local hospital (n=22)

Very Satisfied	30%
Satisfied	50%
Neutral	20%
Unsatisfied	0%
Very unsatisfied	0%



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Findings

Currently Collaborating – Current working relationship with local hospitals around the CHA (n=22)

Networking	Exchanging information	27.2%
Coordination	Exchanging info and linking existing activities for mutual benefit	27.2%
Cooperation	Sharing resources for mutual benefit and to create something new	0%
Collaboration	Working jointly to accomplish shared vision and mission using joint resources	45.5%



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Findings

Currently Collaborating –Reasons for working with local hospitals on their CHA (n=22)	
Bring more stakeholders to the table	59.1%
Maximize resources	54.5%
Bring more credibility in the community	50.0%
Share costs, resources	36.4%
Extend population/ demographic reach	31.8%
Share information	9.1%
Part of the MAPP process	9.1%
Accreditation	9.1%
Hospital runs LHD	4.5%



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Findings

Currently Collaborating –How often in contact with local hospital around CHA (n=22)

3-5 days a week	0%
1-2 days a week	9.1%
Few times a month	18.2%
Once a month	27.3%
Less than once a month	9.1%
Quarterly	9.1%
Every 6 months	18.2%
Missing	9.1%



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Collaboration Continuum	
Admin Highest Degree	.43
Revenue per person	-.07
Expenditure per person	.23
MICH accredited	.09
Interested in PHAB accreditation	.25
No interest in collaboration	-.11
Has a CHA	.46**
How often do you use CHA	.59*
Satisfaction with hospital relationship	.57*
Length of relationship with hospital	.30
Total no of FTEs	.40

*Significant at the $\alpha = .01$ level

** Significant at the $\alpha = .05$ level

Conclusion

- Those currently collaborating are more interested in accreditation in PHAB
- CHA a living document for those collaborating
- Collaborations can help LHDs allocate resources
- LHDs losing out on collaborative opportunities by waiting for hospitals to contact them



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Conclusions

- Scoring higher on the collaboration continuum is positively correlated with
 - a) Having a CHA
 - b) Using the CHA
 - c) Satisfaction with relationship with hospital
- Historically challenging to integrate public health and health care
- Gradual shift towards increased integration

Limitations and Final remarks

- Small sample size
- Questions only posed to LHDs, not hospitals
- Room for future research and exploration

Contact information



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