

Introduction and Purpose

The overall purpose of this tool is to assist users in the reflection of their current partnerships as they relate to health-related topics/issues affecting Iowans. A number of different terms are used to describe a partnership, such as collaboration, alliances, cooperation, and coalition. This tool uses the following simple definition for partnerships: “When two or more people or organizations work together toward a common goal.” Partnership development is a powerful tool for tackling the complexity of health-related topics/issues. Because of this complexity and span across multiple sectors, partnership development is critical for ensuring the biggest impact in addressing health-related topics/issues and the most efficient and effective use of scarce resources.

Partners can participate in addressing health-related topics/issues in a variety of ways. Each partner can have different levels of influence in identifying needs, generating solutions, and planning new initiatives to address the health-related topic/issue. Consider how those partners contribute to the aims of the health-related topic/issue and in what category your partner(s) best fit.

The purpose of this tool is to ensure that you have well-rounded partnerships with the skills and expertise needed to accomplish the planned tasks and goals. Completing this Partnership Assessment Tool will help you to highlight the levels of engagement within your partnerships and give you ideas for how to assess, evaluate, and enhance partnerships.

Before you get started with the tool, create a list of your current partnerships and print pages 3 & 4 for reference as you complete the tool.

Then, complete the following steps. Detailed instructions for each step are on pages 2-9.

- **Step One** (pages 2-4): Complete the online IDPH Partnership Collection Form. Determine in what partnership category (Building Relationships, Common Goal, Supportive Roles, Strategic Implementation) the partner best fits.
- **Step Two** (pages 5-8): Submit the completed Partnership Collection Form to generate your results.
- **Step Three** (page 9): Using the results, reflect on the questions in the Partnership Evaluation. Analyze results and share with others.
- **Step Four** (page 9): After reflecting on current partnerships, consider opportunities for partnership development. Links have been provided under Partnership Resources for your convenience.

How to use this tool: Step-by-step

Step 1: Complete the IDPH Partnership Collection Form

<https://www.cognitoforms.com/IowaDepartmentOfPublicHealth1/idphpartnershipcollectionform>

- Enter your name, your organization’s name, your program/bureau/other subunit name, the health-related topic/issue for which you are assessing partnerships, and the date. If you are completing the tool as part of your work with an IDPH program, select the appropriate bureau/division/office from the dropdown list and type the program name in the “IDPH Program Name” field.



IDPH Partnership Collection Form
Revised January 2020

Name

Organization

Organizational Subunit

Health-related Topic/Issue:

IDPH-Affiliated Bureau/Division/Office
Not applicable
If applicable, from the dropdown list choose the IDPH bureau/division/office you're working with to use this assessment.

IDPH Program Name

Date Updated:


Existing Partners

Organization	Partner Sector	Partner Category	Notes
<p>Partner 1</p> <input type="text" value="Enter the name of the group/organization the partner is representing"/>	<input type="text" value="Choose the partner sector that best describes the perspective the partner is representing"/>	<input type="text" value="Use the Partner Categories tables to choose a partner category that best fits this partner."/>	<input type="text" value="Enter additional key information about the partner, e.g., primary contact's name or position title, topic or interest served by the organization if not clear from the organization name or sector."/>

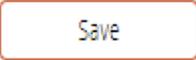
Partnership Assessment Tool

- For each partner, enter the partner’s organization, the sector that best describes the type of organization the partner represents, the partner category, and additional key information about the partner such as a name or position title for the primary contact person or the topic or interest served by the organization if not clear from the organization name or sector.
- Click on the  button to add each additional partner.
- Partner Sectors** include IDPH program/staff; State, Tribal, Local or National Government/Agency; Business or Employer; Health Care System, Insurer or Clinician; Early Learning Center, School, College or University; Community, Non-Profit or Faith-Based Organization; Community/Group representing communities that experience health inequities; Individual or Family; Legislator/Policy maker; and Media. Choose the one that best describes the perspective the partner is representing.
- The following table will help you select the **Partner Category** that best describes your partner:

Partnership Category	Interest	Communication	Activities & Outcomes
Category 1: Building Relationships	Partner has been introduced to the identified health-related topic/issue. Interest level in addressing the health issue may be unknown at this point in relationship.	Communication has been initiated.	No partnership activities have been scheduled or taken place. Possibilities for future meetings may be discussed. Outcomes include but are not limited to: <ul style="list-style-type: none"> introductions presentations meetings that introduce common goals and/or the initiative’s mission.
Category 2: Common Goal	Partner has shown interest in the health-related topic/issue by response or action.	The partner reciprocates communication, agreeing to discuss partnership development. Discussions include opportunities for activities that can be accomplished together or ways each partner can benefit one another, working toward the health-related topic/issue.	An initiative or common goal is being defined between partners. The partnership is learning about each other’s mission and working to identify an activity that will benefit both partners. The partner is willing to work on short-term or easily implemented activities. Outcomes include but are not limited to: <ul style="list-style-type: none"> agreed on the goal but working on own initiatives that are likely not coordinated reporting out information and/or updates to interested partners through various methods, (electronically, on the phone, or in person).

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Partnership Category	Interest	Communication	Activities & Outcomes
Category 3: Supportive Roles	Partner has shown ongoing support in addressing the identified health- related topic/issue. A common goal has been defined and the partner provides a supportive role in addressing the health-related topic/issue.	Ongoing communication takes place between partners. Communication may be variable, increasing as projects or activities that support the health-related topic/issue approach and decreasing in periods of inactivity.	This partnership provides ongoing input to support the identified health-related topic/issue and partnership initiative. Outcomes include but are not limited to: <ul style="list-style-type: none"> • providing funding or in-kind support for the health-related topic/issue • recruiting and/or connecting new partners • providing and/or distributing information that supports the health-related topic/issue • advocate for funding or for the health-related topic/issue
Category 4: Strategic Implementation	Partner has shown ongoing leadership in addressing the identified health- related topic/ issue. This partner views the partnership initiative as benefiting their organization’s vision.	Coordinated, scheduled communication takes place between partners. Routine communication is reciprocated between partners to accomplish activities or goals that meet/address the health-related topic/issue.	This partnership is fundamental in addressing the health-related topic/issue and the initiative’s success. The partner actively participates in key actions that lead to system or policy change around the health-related topic/issue. Outcomes include but are not limited to: <ul style="list-style-type: none"> • providing leadership (coalition chair/president, health topic expert, program consultant, advisory board) • conducting strategic planning • implementing the project or program • evaluating the project • engaging the community • facilitating discussion for the health-related topic/issue

HINT: Use the  button to save your progress and get a link to finish filling out the tool later.

Step 2: Once you have finished entering all of your existing partners into the IDPH Partnership Collection Form, click on the  button to generate your results.

Two sets of results will be generated:

1. A list of the partners exactly how you entered them.

Name			
Firstname Lastname			
Organization			
IDPH			
Organizational Subunit			
5-2-1-0 Program			
Health-related Topic/Issue:			
Obesity			
Date Updated:			
10/5/2018			
Existing Partners			
Partner 1			
Organization	Partner Sector	Partner Category	Notes
Scott County PH	State, Tribal, Local or National Government/Agency	Category 1: Building Relationships	LPHA
Partner 2			
Organization	Partner Sector	Partner Category	Notes
United Way	Community, Non-Profit or Faith-Based Organization	Category 2: Common Goal	John Doe
Partner 3			
Organization	Partner Sector	Partner Category	Notes
WIC	IDPH program/staff	Category 2: Common Goal	Jane Doe

2. A link to a Word document  Partnership Assessment - with additional analyses of your entries. What you'll see in the Word document:
- Page 1 summarizes your health-related topic/issue and organization along with your key partners (Categories 3 & 4).

Obesity

Partnerships for IDPH, 5-2-1-0 Program

10/5/2018

Key Partners

Organization	Partner Sector	Partner Category	Notes
5-2-1-0 State Executive Branch	State, Tribal, Local or National Government/Agency	Category 3: Supportive Roles	Jane Smith
Iowa Department of Education	State, Tribal, Local or National Government/Agency	Category 3: Supportive Roles	
Wellmark Healthy Hometowns	Health Care System, Insurer or Clinician	Category 3: Supportive Roles	Varies
Local COGs	State, Tribal, Local or National Government/Agency	Category 3: Supportive Roles	Varies
Local Boards of Health	State, Tribal, Local or National Government/Agency	Category 3: Supportive Roles	John and Jane Doe
HyVee	Business or Employer	Category 3: Supportive Roles	John Smith
Healthiest State Initiative	Community, Non-Profit or Faith-Based Organization	Category 4: Strategic Implementation	
Iowa Medical Society	Health Care System, Insurer or Clinician	Category 4: Strategic Implementation	Director
ICOG	Community, Non-Profit or Faith-Based Organization	Category 4: Strategic Implementation	Director
United Way of Central Iowa	Community, Non-Profit or Faith-Based Organization	Category 4: Strategic Implementation	Program Lead
Wellmark Healthy Hometowns	Health Care System, Insurer or Clinician	Category 4: Strategic Implementation	Varies

- Page 2 shows your partners according to category.

Existing Partners by Category			
Category 1: Building Relationships	Category 2: Common Goal	Category 3: Supportive Roles	Category 4: Strategic Implementation
<ul style="list-style-type: none"> • Scott County PH 	<ul style="list-style-type: none"> • United Way • WIC • Well Kids of Central Iowa • IDPH, Goal 3 Strategy team • IDPH, Iowa Nutrition Network 	<ul style="list-style-type: none"> • 5-2-1-0 State Executive Branch • Iowa Department of Education • Wellmark Healthy Hometowns • Local COGs • Local Boards of Health • HyVee 	<ul style="list-style-type: none"> • Healthiest State Initiative • Iowa Medical Society • ICOG • United Way of Central Iowa • Wellmark Healthy Hometowns
Count = 1	Count = 5	Count = 6	Count = 5



- The final pages show your partners according to sector.

Existing Partners by Sector

Partner Sector	
IDPH program/staff	<ul style="list-style-type: none"> WIC, Category 2: Common Goal, Jane Doe IDPH, Goal 3 Strategy team, Category 2: Common Goal IDPH, Iowa Nutrition Network, Category 2: Common Goal
State, Tribal, Local or National Government/Agency	<ul style="list-style-type: none"> Scott County PH, Category 1: Building Relationships, LPHA 5-2-1-0 State Executive Branch, Category 3: Supportive Roles, Jane Smith Iowa Department of Education, Category 3: Supportive Roles Local COGs, Category 3: Supportive Roles, Varies Local Boards of Health, Category 3: Supportive Roles, John and Jane Doe
Business or Employer	<ul style="list-style-type: none"> HyVee, Category 3: Supportive Roles, John Smith
Health Care System, Insurer or Clinician	<ul style="list-style-type: none"> Wellmark Healthy Hometowns, Category 3: Supportive Roles, Varies Iowa Medical Society, Category 4: Strategic Implementation, Director Wellmark Healthy Hometowns, Category 4: Strategic Implementation, Varies
Early Learning Center, School, College or University	
Community, Non-Profit or Faith-Based Organization	<ul style="list-style-type: none"> United Way, Category 2: Common Goal, John Doe Well Kids of Central Iowa, Category 2: Common Goal, John Smith Healthiest State Initiative, Category 4: Strategic Implementation ICOG, Category 4: Strategic Implementation, Director United Way of Central Iowa, Category 4: Strategic Implementation, Program Lead
Community/Group representing communities that experience health inequities	
Individual or Family	
Legislator/Policymaker	
Media	

Step 3: Partnership Evaluation

An important part of assessing partnerships is evaluating how your partnerships work together to address health-related topics/issues. Below is a list of example questions that can be used to reflect on benefits and barriers within current and past partnerships. Identifying gaps or weaknesses in current partnerships can assist in planning for strategies and partners.

1. Does your partnership assessment show balance? Are there proportionate partnerships in each category and sector?
2. Considering strategies for your health-related topic/issue, are there any potential partnerships that could be valuable that are not listed in any category or sector?
3. Have you included partners representing topics that might not normally be considered for your health issue, e.g., social determinants like housing, economics, transportation, or other cultural, physical or social infrastructure-related topics?
4. Are there specific partnerships that may be more beneficial to the health-related topic/issue if they were in a higher category of partnership/engagement?
5. Are there specific skill sets that would benefit the overall health-related topic/issue if they were in a certain level of partnership (e.g. funding, facilitation, program expertise, public perspective)?
6. Do current partners address disparate populations?
7. How does this partnership assessment compare to previous assessments? Have partnerships changed that reflect a need for new partnerships?
8. What else did you learn from this assessment?

Step 4: Resources to Further Partnership Development

- [Community Tool Box](#), Center for Community Health and Development at the University of Kansas. Practical, step-by-step guidance in community-building skills including creating and maintaining partnerships, increasing participation and membership as well as over 40 other topics related to guiding, supporting and evaluating the work of community and system change.
- The [Practical Playbook \(PPB\)](#) is devoted to establishing meaningful partnerships across public health, primary care, and other diverse organizations and individuals. The PPB organization, led by Duke Community and Family Medicine, the de Beaumont Foundation, CDC, and Health Resources and Services Administration (HRSA), has developed relationships with over 30 like-minded organizations working to improve collaborations and population health.
- [Take Action to Improve Health - Work Together](#): County Health Rankings & Roadmaps program resource that includes key activities and a variety of tools to build and sustain partnerships that reflect community diversity to implement strategies that result in meaningful change. Developed as part of a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.