

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, under health-related topic/issue write "tobacco control and prevention", and the date.
- You can leave the following sections blank; organizational subunit, and IDPH-Affiliated bureau/division/office.
- Under "IDPH Program Name" write "TUPC".

| IDPH IDWA Department of PUBLIC HEALTH | | | |
|---|--|---|---|
| IDPH Partnership Collection Form | | | |
| Revised January 2020 | | | |
| Name | | | |
| Enter your name | | | |
| Organization | | | |
| Enter the name of your organization | | | |
| Organizational Subunit | | | |
| Enter a program/bureau/other subunit (if applicable) | | | |
| Health-related Topic/Issue: | | | |
| Type a health-related topic/issue for which you are assessing partnerships | | | |
| IDPH-Affiliated Bureau/Division/Office | | IDPH Program Name | |
| Not applicable | × | | |
| If applicable, from the dropdown list choose the IDPH bureau/division/office you're working with to | o use this assessment. | If applicable, type the program name for the bureau/division/office you chose. | |
| Date Updated: | | | |
| a | | | |
| Existing Partners | | | |
| S Partner 1 | | | |
| Organization | Partner Sector | Partner Category | Notes |
| Enter the name of the group/organization the partner is representing | × | · · · | 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 |
| | Choose the partner sector that best describes the perspective the partner is representing. | Use the Partner Categories tables to choose a partner category that best fits this partner. | from the organization name or sector. |
| | | | |
| | | | |
| + Add Partner | | | |
| | | | |
| Submit | | | Save |



• 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

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button to add each additional partner.

- Partner Sectors refer to the Partner Sector List on the CP Portal under "Contract Requirements" and "Coalition Development".
- The following table will help you select the **Partner Category** that best describes your partner, make sure that you can accurately describe the activities and outcomes for each partner:

| Partnership Category | Interest | Communication | Activities & Outcomes |
|--|--|---|---|
| Category 1: Building Relationships | Partner has been introduced to tobacco control. Interest level in addressing tobacco control 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: |
| Category 2: Common Goal | Partner has shown interest in tobacco control 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 tobacco control. | 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: 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). |



Partnership Assessment Tool

| Partnership Category | Interest | Communication | Activities & Outcomes |
|--|---|--|--|
| Category 3: Supportive Roles | Partner has shown ongoing support in addressing tobacco control. A common goal has been defined and the partner provides a supportive role in addressing tobacco control. | Ongoing communication takes place between partners. Communication may be variable, increasing as projects or activities that support tobacco control approach and decreasing in periods of inactivity. | This partnership provides ongoing input to support to tobacco control and partnership initiative. Outcomes include but are not limited to: providing funding or in-kind support for tobacco control recruiting and/or connecting new partners providing and/or distributing information that supports tobacco control advocate for funding or for tobacco control |
| Category 4: Strategic Implementation | Partner has shown ongoing leadership in addressing tobacco control. 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 tobacco control. | This partnership is fundamental in addressing tobacco control and the initiative's success. The partner actively participates in key actions that lead to system or policy change around tobacco control. Outcomes include but are not limited to: 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

Save

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.

The next screen above "Name" there are clear instructions on how to download your results as well as saving the file link (see image below). It is VERY IMPORTANT that you save the file link where you can access it in the future. This will allow you to edit your form.

IDPH Partnership Collection Form

Thank you for filling out the IDPH Partnership Collection Form. Your response has been saved.

Click on the Word file below to download an analysis of your partnerships.

Click on the PDF file to download a copy of your form responses with no analysis.

Save this link to <u>edit your Partnership Collection Form</u> at any time (even after submission). Editing this way v clicking on the generic link in the IDPH Partnership Assessment Tool.



Two sets of results will be generated, scroll to the bottom and click on the files on the left hand side:

1. A PDF version of the list of 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 Scott County PH | Partner Sector State, Tribal, Local or National Government/Agency | Partner Category Category 1: Building Relationships | Notes LPHA |
| Partner 2 | | | |
| Organization United Way | Partner Sector Community, Non-Profit or Faith- Based Organization | Partner Category Category 2: Common Goal | Notes John Doe |
| Partner 3 | | | |
| Organization WIC | Partner Sector IDPH program/staff | Partner Category Category 2: Common Goal | Notes 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 |
| lowa 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.

| Category 1: Building Relationships | Category 2: Common Goal | Category 3: Supportive Roles | Category 4: Strategic Implementation |
|---------------------------------------|--|---|---|
| Scott County PH | United Way WIC Well Kids of Central Iowa IDPH, Goal 3 Strategy team IDPH, Iowa Nutrition Network | 5-2-1-0 State Executive Branch Iowa Department of Education Wellmark Healthy Hometowns Local COGs Local Boards of Health HyVee | 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.

| Partner Sector | | |
|--|--|--|
| IDPH program/staff | 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 | 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 | HyVee, Category 3: Supportive Roles, John Smith | |
| Health Care System, Insurer or Clinician | 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 | 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: Evaluation

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. In FY22 Quarter 3 each CP will meet with their CHC to discuss the following questions as well as the results of your assessment.

- 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

- <u>Community Tool Box</u>, Center for Community Health and Development at the University of Kansas. Practical, step-by-step guidance in communitybuilding 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 <u>Practical Playbook (PPB)</u> 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.
- <u>Take Action to Improve Health Work Together</u>: 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.