



Oregon Local Health Department Cross-Jurisdictional Sharing

Mini Case Study: Health Officer Sharing

Cross-jurisdictional sharing (CJS) is helping to expand Oregon's public health system. Through utilizing CJS, local public health agencies are able to provide better public health services to more of their community members. This series of mini case studies highlights the design and implementation of cross-jurisdictional sharing between some of Oregon's local public health agencies. Local public health agencies can use these mini case studies, along with other tools provided in the AIMHI Modernization roadmap, to increase capacity and efficiency in their public health services.

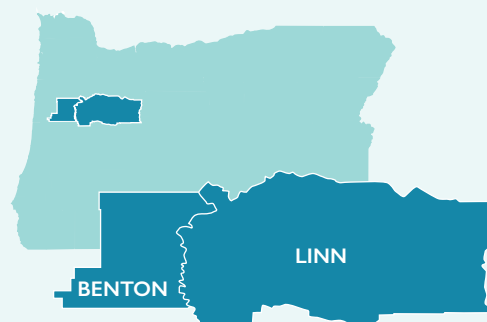
Project Overview

Linn and Benton Counties utilize an arrangement to provide back up health officer capacity. In the event that one of the counties' health officers is unavailable, a county can borrow the health officer services from the neighboring county. This arrangement ensures access to a local health officer during times of emergency, such as a communicable disease outbreak.

While each county employs their own health officer to respond to issues relating to communicable disease in their counties, in 2012, Linn and Benton Counties entered into a contract that would allow the sharing of health officers across counties in the case that a counties' health officer was unavailable during a communicable disease outbreak or emergency. This arrangement addresses the challenge of maintaining local control as communicable disease issues arise, even when a county health officer is unavailable.

When one of the county health officers is not available to do the work for their county, due to illness, vacation, or work time, the health officer for the other county covers both counties for the duration of that time. This ensures that both counties always have a health officer available who knows the public health system and who is local to these communities.

Health Officer Sharing



Agreement type: Service-related
Type of contract: Formal Contract
Modernization Foundational Program/
Capability: Communicable Disease Control

Funding structure:

- + A reimbursement schedule is in place for each county to pay by the hour for any services rendered from the neighboring health officer

Population served:*

- + Benton: 89,385
- + Linn: 122,849
- + Total: 212,234

*United States Census Bureau / American FactFinder.
"Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2016". 2016 Population Estimates Program. Web. March 2017. <http://factfinder2.census.gov>.

Both counties have contracts with their health officers to reimburse them for every partial or full hour spent working in their neighboring county. The county health departments have an Intergovernmental Agreement (IGA) that lays out the reimbursing method for health officer sharing. The IGA was written by contract specialists from both counties in consultation with each county's legal counsel.

Motivation for Sharing

Both counties identified multiple motivations for implementing this sharing arrangement, including:

- + the sharing arrangement is a solution for local public health agencies to utilize local health officers in times of need, such as a disease outbreak, instead of having to default to the state when a county's health officer is unavailable;
- + the sharing arrangement allows both health departments to keep responsibility over communicable disease related issues under local control;
- + a preexisting relationship between the counties developed through past collaboration on past projects secured trust; and
- + sharing resources is beneficial to both counties.

Challenges & Solutions to Sharing

Neither county identified challenges within this sharing arrangement. Since this is an on-call and intermittent sharing arrangement and because communicable disease events are often routine and are dealt with through standard investigative guidelines, very few events require immediate or direct health officer intervention.

Benefits of Sharing

This sharing arrangement provides continuous support for both Linn and Benton public health directors in knowing that there is always coverage from a local health officer that is familiar with local hospitals and public health policies and requirements in case anything were to arise. Many benefits to sharing were identified, including:

- + community trust in both health officers allows for easier access to resources and therefore quicker response in emergency situations;
- + local control and response ensures smooth transitions and continuous support for the public in both counties; and
- + the arrangement creates an environment of data and information sharing around communicable disease outbreaks that adds a layer of protection to the communities.

Essential Elements for Sharing

For other counties interested in this sharing arrangement, some important elements for sharing that were identified include:

- + communication between counties and with the health officers; and
- + adaptability as different counties may need to design their health officer contract differently to accommodate this sharing arrangement.

Lessons Learned

Counties identified lessons that they learned while carrying out this sharing arrangement, including:

- + local-level sharing allows for less dependence on the state and builds trust within the community; and
- + contracts may need to be restructured to account for the loaned health officer's time when they are on-call.

Moving Forward

Both counties foresee this sharing arrangement continuing indefinitely due to the profound benefits it brings to the communities at little to no cost, and believe the ease of this CJS arrangement makes it easily replicable for other counties. The close proximity of the two counties and established relationship make sharing beneficial to both communities.