

Service & Resource Sharing: A Tip Sheet for Cross-Sector Partnerships

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Introduction

As organizations that contribute to health – public health departments, hospitals and health systems, schools, community-based organizations, faith-based organizations, social services, and others – face pressures to improve outcomes, address social drivers, meet value-based goals, respond to emergencies, and address ongoing challenges, collaboration beyond individual projects is essential. As these organizations coalesce around a shared goal, service and resource sharing strategies can be used to expand capacity, enhance effectiveness, and reduce duplication.

Service and Resource Sharing (SRS) is a practical partnership and alignment strategy that allows public health departments, health care, social services, and community partners to jointly deploy staff, align resources, data, infrastructure, and expertise to address shared community health priorities more efficiently and effectively than any one organization could alone. Service and resource sharing refers to when insights, expertise, techniques, and tools are shared across organizational boundaries. Sharing can be as basic as informal assistance or as structured as a formal agreement. It can be referrals or ad-hoc coordination, to more intentional, shared use of assets. It can be a shared accountability model, a way to extend capacity without duplicating infrastructure, and a way to align across sectors.

This tip sheet provides guidance on how partners can align around a shared goal, define expectations, and determine the level of formality needed for their collaboration.

Considering a Sharing Arrangement

Partners should begin by identifying the purpose of working together. Consider the following questions:

- What issue or problem are we trying to address? How does it affect outcomes, indicators, or utilization?
- What are each partner's goals and expected benefits, including operational efficiencies or avoided costs?
- Can the solutions to the issue be found through internal management activities, reallocation of existing resources within a single agency, process improvements, or other mechanisms? Or would shared capacity reduce duplication or burden?
- Would sharing resources or service delivery across organizations meaningfully address the issue?
- How would sharing staff, space, expertise, data, and/or funding help meet public health outcome goals, quality measures, regulatory needs, or value-based expectations?
- Will sharing improve reach, quality, efficiency, equity, and/or patient and/or community experience?

Clear alignment on why you are partnering establishes the foundation for trust, accountability, and shared commitment.



Defining the Scope of Sharing

Before embarking on a service and/or resource sharing arrangement, partners should agree on what resources or services will be shared and why. Conversations may include:

<p>Who is doing what?</p> <ul style="list-style-type: none"> • Partner leadership for each activity • Shared versus organization-specific responsibilities • Decision-making processes • Defined scope of work 	<p>What outcomes are expected?</p> <ul style="list-style-type: none"> • Definitions of success for each partner • Performance measurement methods • Progress monitoring and adjustment processes
<p>How will communication happen?</p> <ul style="list-style-type: none"> • Preferred communication methods • Primary points of contact for each entity • Orientation processes for new partners and staff 	<p>How will community needs be supported?</p> <ul style="list-style-type: none"> • Service accessibility across communities • Representation of served populations among shared staff • Staff preparedness to effectively serve diverse groups

Levels of Partnership Formality

Service and resource sharing exists across a range of arrangements – from flexible, informal relationships to structured, legally binding agreements. Choose the level that best fits your goals, risks, and context:

Informal/Handshake Agreements: Typically best for quick, small scale-collaboration.

- Examples: One-time health education support, equipment lending, sharing outreach materials.
- Benefits: Fast, flexible, low administrative burden.
- Consider when: Risk is low, scope is narrow, trust is already established.

Semi-Formal Agreements (E-mails, Shared Work Plans, MOUs): Useful when roles or expectations need definition.

- Examples: Shared staff time, joint training, coordinated referral processes.
- Benefits: Clarifies scope and adds formality without too much complexity.
- Consider when: Activities are ongoing; partner accountability is important.

Formal Agreements (Contracts, Interlocal Agreements, Data Use Agreements): Appropriate when sharing involves resources, funding, data, or legal responsibility.

- Examples: Joint programs, cost sharing, shared epidemiology capacity, integrated data systems.
- Benefits: Protects partners, defines authority, ensures sustainability.
- Consider when: Services affect operations, funding, liability, or reporting.



Steps to Formalizing the Arrangement

- **Align on goals and scope:** Confirm what will be shared, for what purpose, and how it supports each partner's mission.
- **Engage leadership early:** Executive and governing-body support is essential for successful implementation.
- **Draft the agreement (at the appropriate level):** Consider including purpose, roles, decision-making, communication plans, timeline, resource commitments, and conflict resolution.
- **Address fiscal and legal considerations:** Clarify cost-sharing, liability, data use, and reporting requirements.
- **Plan for implementation and monitoring:** Define how progress will be tracked, how feedback will be collected, and how revisions will occur.

Conclusion

Service and resource sharing is a flexible, powerful strategy for cross-sector partnership. By clearly defining goals, choosing the appropriate agreement level, and establishing shared expectations, public health departments and partner agencies can work together to achieve outcomes neither could accomplish alone.

PHAB Support

PHAB is home to national SRS efforts, leveraging expertise to help organizations explore, design, and implement shared solutions that drive efficiency, effectiveness, and impact. From SRS feasibility studies, developing care coordination and other hub and spoke approaches, designing governance and communication structures, to hands-on trainings, PHAB aims to identify meaningful opportunities to move missions forward.

Reach out to PHABTA@phaboard.org for more information.

