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Collaboration between schools of public health and public health agencies is essential to innovation and improvement in public health practice. Schools need agency professionals to assure that education is professionally relevant and that research results are applied in the field.[1] Agency-based workers need schools to educate professionals and to provide updated knowledge and skills for employees.[2] Collaboration to meet these needs and to sustain them over time requires long-term, systematic commitments.

There are examples of school-agency collaborations of a formal kind. Health departments have, for example, had employment relationships with public health faculty,[3] and schools have used agency relationships as the foundation for teaching.[4] Typically, however, school-agency collaborations have been temporary and opportunistic, with quality and strategic emphasis waxing and waning over time. In these "ad hoc" collaborations, faculty members and agency staff pursue their mutual interests in applied research, teaching, and program evaluation depending on project opportunities or on special personal relationships. Such collaborations tend to be temporary, in part because of organizational barriers to long-term commitment. These include the different missions, reward systems, functional incentives and priorities, and organizational structures that characterize schools and agencies.[5]

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Among agencies and schools whose relationship had been ad hoc were the Allegheny County (Pennsylvania) Health Department (ACHD) and the Graduate School of Public Health, University of Pittsburgh (GSPH). Over the 50 years during which they both served the area surrounding the city of Pittsburgh, they had often collaborated in various research, teaching, and service activities. These activities had been more or less intense at times, depending upon programmatic needs and the initiatives of various administrators, faculty members, and agency professionals. But the two institutions had never attempted to align their mutual priorities systematically in order to enhance the effectiveness of both until the summer of 1999. That is when they committed themselves to create a formal collaboration.

COLLABORATION STRUCTURE AND MISSION

The foundation of the new, formalized collaboration was a Memorandum of Understanding signed by the school's dean and the agency's director. Its stated mission was to improve health and prevent disease in the county population through the pursuit of excellence in public health practice. The Memorandum broadly stated that this mission would be carried out under the direction of a Collaboration Steering Committee, comprised of agency program chiefs and academic department chairs. Staffing of the collaboration was assigned to the school's Center for Public Health Practice and to a senior agency administrator.

PROGRAMMATIC ACTIVITIES

In its first year, the Steering Committee met three times to consider how best to institutionalize the collaboration. Consensus arose that the way to overcome the organizational barriers to a long-term, systematic collaboration was to foster mutual recognition, understanding, and collegiality among faculty members and staff professionals. Thus, joint projects with immediate impact on these goals took priority over what would have been a strategic planning process.

Three projects began in the first year, each of which contributed to acquainting ACHD staff and GSPH faculty with each other's responsibilities, work methods, and areas of expertise. As shown in Figure 1, teaching and learning were emphasized as mutually ongoing processes between agency staff and school faculty in each of these three projects.

First, the Public Health Roundtable Case Series was instituted. ACHD staff presented a public health practice case to an audience of faculty and students. During the case discussion, faculty and students learned how necessary it was for the various disciplines (environmental, infectious disease, epidemiology, and health

administration) to interact in the investigation and intervention. ACHD staff learned from faculty discussants about new diagnostic technologies and conceptual approaches to improving infectious disease surveillance and intervention. Later, students' participation in these sessions became a required course in the school's core curriculum.

Next, ACHD hosted a Faculty-Agency Partnering Program in which GSPH faculty participated in "job shadowing" throughout the agency. This program was intended to give faculty opportunities to observe firsthand the practice of public health in the field. The program began with a two-hour group orientation in which ACHD division chiefs described their organizational structure, responsibilities, and daily activities. Faculty members then chose a division or programmatic activity and signed up for a day or more of job shadowing. Afterward, another group session was held for faculty and agency participants. They recommended repeating the program annually and developing a reciprocal experience for agency staff to experience working with a faculty member.

The third first-year project was a Strategic Workforce Training Program.[6] GSPH faculty members joined the ACHD's Training Committee to assess the agency's workforce development needs and to design a training program linked to its ongoing strategic planning and evaluation processes. Recognizing that all employees needed a grounding in the history, values, legal foundation, methods, and systems of public health, the Training Committee and faculty developed and pilot tested an orientation workshop. Later, all members of the ACHD staff attended an offering of this workshop. Next, the Training Committee selected high-priority competencies that formed the basis for a comprehensive training curriculum to be implemented incrementally over the next three years.

IMPACT

Indicators of how well the first year's collaboration projects affected mutual recognition and respect among faculty and agency staff were necessarily indirect and subjective but nevertheless positive. Attendance and participation by faculty in the case presentation and job shadowing projects were excellent from all of GSPH's departments and at all levels of faculty seniority. Agency participants evaluated the pilot training program highly, and the Training Committee remained fully committed to the long-term strategic training goal. The Collaboration Steering Committee continued to meet on a regular basis and plans to use the first-year experience to develop a long-term strategic plan for the collaboration's future. GSPH and the University of Pittsburgh approved a new Practice Track, which would facilitate the appointment and promotion of agency staff to the faculty.

The agency's performance in, and the school's relevance to, public health practice are the ultimate outcome measures of success. In this early stage of implementation, process indicators—such as excellent participation among faculty and staff—are encouraging. The future prospect of improved community health remains the collaborators' working incentive and ultimate focus.

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1. Association of Schools of Public Health Council of Public Health Practice Coordinators, "Demonstrating Excellence in Academic Public Health Practice," *Journal of Public Health Management and Practice* January 2000, 6 (1): 10-24.
2. U.S. Department of Health and Human Services, Public Health Service, *The Public Health Workforce: An Agenda for the 21st Century*. A Report of the Public Health Functions Project. Office of Disease Prevention and Health Promotion, Washington, DC (1997).
3. An example is the appointment of individuals as both faculty at the SUNY Albany School of Public Health and as staff at the New York Department of Health.
4. C.W. Keck, "Lessons Learned from an Academic Health Department," *Journal of Public Health Management and Practice* January 2000, 6 (1): 47-52.
5. M. Flake, M. Bechamps, C.W. Keck, "Bridging the Waters: Understanding Linkages as Cross-Cultural Partnerships," *The Link* February 1998, 12 (1): 1. Accessed July 27, 2000 at *www.phf.org.Link/link12-1.htm#Bridging the Water*.
6. A pilot training project was funded by a cooperative agreement of the U.S. Health Resources & Services Administration and the Association of Schools of Public Health. Project documents are posted at *www.cphp.pitt.edu/training*.

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