

JSI PARTNER Use Brief

JSI has applied PARTNER since 2008 for a variety of purposes: to support assessment, strategic planning and evaluation of regional and state level networks serving several populations and public health issues.

Early work included supporting and evaluating SAMHSA funded state efforts to develop substance misuse prevention networks through the Strategic Prevention Framework. The use of PARTNER enabled the state to demonstrate increases in regional level leadership engagement and data-driven decision-making, expansion of multi-sectoral engagement and contributions, and increased response rates, trust levels and partner engagement in collaborative activities. Subsequent efforts included the development of broader regional public health networks in which substance misuse prevention was a sector.

In addition, JSI has provided technical assistance to support the use of findings, and supported other users of PARTNER through consultation regarding network bounding, interpretation, and application of findings for [developing systems of services and support for families with young children in Northern Vermont](#).

Other focus areas include addressing food security and implementation of a statewide cancer plan, evaluation of the Franklin, NH Mayor's Drug Task Force, and providing technical support for a survey related to suicide prevention. JSI currently supports the development and evaluation of a HRSA-funded rural opioid response consortium in rural New Hampshire.

Funders of our work have included Substance Abuse and Mental Health Services Administration, the CDC Partnerships to Improve Community Health Initiative, the Health Resources and Services Administration, and the New Hampshire and Vermont Department of Health.

"We have invested in using PARTNER as an objective measure of what we are trying to build in terms of collaborating to improve public health in our region."

Our region has used PARTNER multiple times over the past few years to assess partner collaborations within our regional public health network. It has helped us to ask: 'Do we go deeper to develop the partnerships we have, or do we engage more partners? It has caused us to prioritize in what direction we need to go.' I had made some assumptions; there were things I found in reviewing the results that surprised me. For example, I thought there were more partners working on a particular public health issue than actually were. Working with people with technical expertise in planning, administering, analyzing, and communicating PARTNER findings has been extremely valuable.

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About Us:

Lea Ayers LaFave, PhD, RN, a senior consultant at Community Health Institute/John Snow Research and Training, Inc., provides consultation in the areas of quality improvement and action learning, and evaluation with a particular focus on community capacity building and systems change in regional, national and international arenas.

Anna Ghosh, MPH, a consultant with JSI Research & Training Institute, Inc., has worked with state level agencies, substance use treatment systems, community-based organizations and local stakeholders using a participatory approach to develop tailored resource materials, measurement tools and learning opportunities for diverse stakeholders in order to improve access to care and care delivery systems.

Naomi Clemmons, MPH, is a senior consultant with JSI Research & Training Institute, Inc. She works in the field of maternal and child health, focusing on strengthening systems of care to reduce health disparities through capacity building assistance and quality improvement.