

2015-2016 Accreditation Support Initiative (ASI) for Local Health Departments

FINAL REPORT

1. **Community Description:** Briefly characterize the community(ies) served by your agency (location, population served, jurisdiction type, organization structure, etc.). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

LBPHD serves approximately 30,000 people in 9 counties in the center of rural Nebraska. It is a very large area geographically, but made up of about 24 different small towns within the 9 counties. The health department has 7 full time employees including 3 public health nurses, 2 program coordinators, an administrative assistant, and a director. We offer a variety of services such as immunizations and a wellness program. LBPHD is currently working towards accreditation.

2. **Project Overview:** Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period and the key activities engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others.

Using the NACCHO funding LBPHD accomplished PHAB measure 1.1.1 T/L Required Documentation 1,2, & 3. LBPHD began attending the Custer County Health Coalition on a monthly basis. Participation in this coalition created a basis for LBPHD to begin the MAPP process. The coalition members were also MAPP committee members. LBPHD utilized the funding to distribute help make a distribute surveys in the community. Also funding paid for the salary for employees that conducted the 4 assessments for MAPP. This led to a completed MAPP process and an updated Community Health Needs Assessment.

3. **Challenges:** Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please **do** include them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

The only challenge presented to LBPHD is that the 2 people who make up the Accreditation Team at LBPHD will both be gone for Maternity leave during the time frame of this grant. All deliverables will still be met.

4. **Facilitators of Success:** Describe factors or strategies that helped to facilitate completion of your agency’s work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. **Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.**

Utilizing the already existing Custer County Health Coalition was a factor of success for LBPHD. The already existing coalition provided a significant platform for LBPHD to utilize through the MAPP process. Coalition had representatives from every aspect of the local public health system and provided services from all of the 10 essential services.

5. **Impact of ASI:** To what extent do you feel your health department was more prepared for accreditation at the end of the ASI5 project as compared to the beginning? What specifically changed during that time that made your agency more prepared for accreditation? How did the ASI5 contribute to your health department’s progress?

LBPHD is more prepared for accreditation now compared to the beginning of the grant, because there is now an updated Community Health Needs Assessment and PHAB Measure 1.1.1 T/L Required Documentation 1, 2, & 3 is now complete. ASI contributed to success because funding allowed LBPHD to travel to more coalition meetings and allowed more staff salary/time to be focused on accreditation progress.

6. **Lessons Learned:** Please describe your agency’s overall lessons learned from participating in the ASI. These can be things you might do differently if you could repeat the process and/or the kinds of advice you might give to other health departments who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

Lesson learned is to really utilize the tools that ASI provides. Such as your contact person for the grant and your peer mentor.

7. **Funding Impact:** Describe the impact that this funding has had on your agency. How has this funding advanced your agency’s accreditation readiness or quality improvement efforts?

The ASI funding advanced LBPHD’s accreditation readiness, because we now have an updated Community Health Needs Assessment and the required documentation for PHAB measure 1.1.1 T/L.

8. **Next Steps and Sustainability:** What are your agency's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?

LBPHD's general plans for the next 12 months are to develop a Community Health Improvement Plan utilizing the data found during the MAPP process.