

# Why How & When to Apply for Accreditation an Introduction to Accreditation for Indiana's Local Health Departments & Boards of Health



**PRESENTED BY THE  
INDIANA PUBLIC HEALTH  
ASSOCIATION  
MAY 23, 2013**

# Accreditation Support Initiative



Funded through the National Association of County & City Health Officials (NACCHO) by the Office for State, Tribal, Local & Territorial Support at the U.S. Centers for Disease Control & Prevention.

# Participation Instructions



## PLEASE MUTE

During the presentation, please ensure your phone and/or computer microphone remains muted. To mute, click the green microphone icon - the word "MUTED" should appear when you have successfully muted your speaker.

## DON'T SHARE YOUR WEBCAM

In the same vicinity, find the icon that says "Share my webcam." Please don't click that icon on.

## ASKING QUESTIONS

We'll try to respond to most questions as we go along. Near the bottom of the tool box is a "chat box" where you can type and send questions. In a drop down box, click on "Jerry King - organizer presenter" so that only those at the IPHA office will see your question.

# Thanks to PHAB



Much of the information in this presentation has been created by the Public Health Accreditation Board for use in sessions like today's.

Special thanks to David Stone, PHAB Accreditation Education Specialist.

# Today's Presenters



IPHA is grateful to 3 students at the IU School of Public Health-Bloomington for their contributions in Content & logistics for this presentation. They are:

Clemesia Beverly, MPH

Adam Drake

Coco Lukas, MPH

# IPHA's Accreditation Support Initiative includes:



1. This orientation for Local Health Departments & Boards of Health
2. Technical assistance to 3 pilot LHDs for early stage accreditation preparation
3. Archiving of training modules to support continuation of the project

# Objectives for today's presentation:



- Gain information for your LHD and board to share with key partners about the reasons to seek accreditation
- Review activity to prepare to apply & how to think about costs
- Get a general idea of a timeline to prepare for accreditation

# First, some history



- Several states have had state-based accreditation programs
- Prior to 2011, no nationwide, uniform framework for accreditation of health departments existed.

# Exploring Accreditation 2005-2007



Funded by Robert Wood Johnson & CDC in collaboration with national partners, primarily:

- National Association of County & City Health Officials
- Association of State & Territorial Health Officers
- National Association of Local Boards of Health
- American Public Health Association

Result: Consensus to create a nationwide, voluntary accreditation program for state, local & tribal health departments

# Public Health Accreditation Board



Incorporated in May, 2007, with these partners

- Association of State & Territorial Health Officials
- National Association of County & City Health Officials
- National Association of Local Boards of Health
- American Public Health Association
- National Indian Health Board
- Public Health Foundation
- National Network of Public Health Institutes
- RWJ Foundation & the CDC

# PHAB's Planning Workgroups:



- Standards Development
- Assessment Process
- Research & Evaluation
- Equivalency Recognition
- Fees & Incentives
- Marketing & Communication

# PHAB Development (cont)



- Beta Test 2009-10 – 30 State, Local & Tribal Health Departments
- September 13, 2011, PHAB started accepting applications for accreditation
- First site visits began in fall, 2012
- First 11 PHAB accredited health departments announced March 2013

# Goal of Accreditation



The goal of the national public health department accreditation program is to improve and protect the health of the public by advancing the quality and performance of Tribal, state, local, and territorial public health departments.

# Why Seek Accreditation



Some wonder if the substantial investment in time & resources will be worth it.

Benefits to accreditation...

# Performance Improvement & Workforce



- Identifies successes & opportunities for improvement
- Provides a platform for quality improvement to enhance health department performance
- Identifies opportunities where policies and protocols can be developed or improved (& overall documentation in general)
- Improves management, develops leadership
- Energizes the staff as they gain greater understanding about the level of service provided in their jurisdiction

# Accountability to the Community



- Documents the capacity of the LHD to deliver the 3 core functions & 10 Essential Services
- Declares that the health department has & will continue to accomplish an appropriate mission & purpose
- Presents a means for accountability & recognition of the value of public health services

# Community Partnerships



- Improves service, value & accountability to stakeholders
- Improves relationships with the community
- Educates & raises expectations of community & policy makers
- Increases the understanding of public health roles, functions & programs among the staff & the public
- Initiates new partnerships, community involvement & collaborative efforts

# Impact on Financial Resources



- Assures policy-makers & communities that scarce public health dollars are being spent effectively
- Aligns the resources of the health department with identified strategic objectives
- Helps LHDs prioritize services & track how well they're doing, resulting in more effective programs & less waste.
- Potentially facilitates access to new funds

# From a National Perspective



- Better defines public health service & professions
- Raises the floor with consistent standards
- Strengthens performance & the public health workforce
- Fosters a learning community

# For Boards of Health, Accreditation...



- Supports long-term vision & strategic priorities
- Raises LHD leadership & credibility in the community
- Improves the health of the community
- Strengthens LHD leadership, operations, collaboration & accountability
- Identifies opportunities for improvement

# How to Apply – An Overview

# The General Framework



Domains

Standards

Measures (Purpose & Significance)

Documentation

Guidance

# 12 Domains



- 10 Reflect the 10 Essential Services
- 1 on agency management
- 1 on relationship to the governing body

# Two Examples



- Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community
- Standard 1.1 Participate in or conduct a collaborative process resulting in a comprehensive community health assessment

**Measure 1.1.1** Participate in or conduct a Tribal/local partnership for the development of a comprehensive community health assessment of the population served by the health department



### **Purpose (abbreviated)**

- The purpose is to assess the health department's collaborative process for sharing and analyzing data concerning health status... and community resources to develop a community health assessment of the population.

### **Significance (abbreviated)**

- The development community health assessment requires partnerships with members of the community to access data, provide various perspectives in the data analysis, present data and findings, and share a commitment for using the data.

# Required Documentation



Participation of representatives of various sectors of the Tribal or local community

- Regular meetings
- Description of the process used to identify health issues and assets

## **Guidance**

- Helps the health department know how to meaningfully meet the documentation requirements

# Domain 6 Enforce Public Health Laws



## **Standard 6.1**

**Review existing laws and work with governing entities and elected/appointed officials to update as needed.**

## Measure 6.1.1 Review laws to determine the need for revisions



### **Purpose (abbreviated)**

- To assess the health department's analysis of public health laws... to ensure that they are consistent with evidence-based public health and newly emerging public health issues and information. The assessment ... should consider individual or community cost, inconvenience, and regulatory alternatives and sanctions, in addition to the public health benefits of the law.

# Significance (abbreviated)



- Health departments should be aware of current public health laws and of laws that ... have public health implications... The laws that the health department evaluates...may also be laws that others enforce but that impact public health... Program staff of the health department should be reviewing these laws to ensure that they are consistent with evidence-based public health practices and emerging public health issues.

# Required Documentation



1. Reviews of public health laws or laws with public health implications within last three years that include the following:
  - a. Evaluations of laws for consistency with public health evidence-based and/or promising practices
  - b. Documented use of model public health laws, checklists, templates and/or exercises in reviewing laws
  - c. Documentation of input solicited from key stakeholders on proposed and/or reviewed laws

## **Guidance**

# PHAB lists Accreditation's "7 Steps"



## 1. Pre-Application

- Health department prepares and assesses readiness, completes online orientation, and informs PHAB of its intent to apply
- Must be ready to submit with application:
  - 1. Community Health Assessment (CHA)
  - 2. Community Health Improvement Plan (CHIP)
  - 3. Agency Strategic Plan
- Must be no more than 5 years old
- CHA & CHIP are completed through community partnerships

# 7 Steps (cont)



## 2. Application

- Health department submits application form and fee, and completes applicant training

## 3. Document Selection & Submission

- Applicant selects documentation for each measure, uploads it to **e-PHAB**, and submits it to PHAB

# 7 Steps (cont)



## 4 Site Visit

- Site visit of the health department is conducted by PHAB trained site visitors and a site visit report is developed

## 5. Accreditation Decision

- PHAB Accreditation Committee will review the site visit report and determine accreditation status of the health department

# 7 Steps (cont)



## 6. Reports

- If accredited, the health department submits annual reports and fees for five years

## 7. Reaccreditation

- As accreditation status nears expiration, the health department applies for reaccreditation

# The Accreditation Coordinator



- ✓ All applicant Health Departments must designate an Accreditation Coordinator.
- ✓ The Coordinator cannot be the Health Director.
- ✓ The Coordinator must have the support of Health Department Leadership and staff.
- ✓ An Accreditation Team is strongly recommended to assist the Accreditation Coordinator in his/her duties.

# Getting Started



- 1 Appoint an Accreditation Coordinator & department-wide team for review of the process
- 2 Review PHAB's Online Orientation
- 3 Review the documentation requirements for the measures; be sure that documentation is “up to speed”.

# Getting Started (cont)



## 4 Begin/refine work on the prerequisites

- Community Health Assessment
- Community Health Improvement Plan
- Department Strategic Plan

## 5 Prepare documentation according to the guidance contained in the [PHAB Standards and Measures Version 1.0.](#)

# Sample Resources on PHAB Web site



- Readiness Checklist
- Considerations for selecting an Accreditation Coordinator
- Accreditation Coordinator Handbook
- Documentation Guidance
- Documentation Selection Spreadsheet

# When? Several steps impact timeline



- Decision to seek accreditation
- Pre-application
  - Assess readiness (PHAB check lists)
  - Statement of Intent
  - Orientation scheduled by PHAB
- Complete or update CHA, CHIP & Agency Strategic Plan (CHA & CHIP might take 1½ -2 yrs)
- SUBMIT APPLICATION & FEE
- Select, gather & submit documentation (within 12 months of being put in queue)
- PHAB Site Visit
- PHAB board accreditation decision

# Example “ Gantt Chart”



| Months                                                              | 1      | -3     | 4-22   | 23     | -24    | 25-26                       |
|---------------------------------------------------------------------|--------|--------|--------|--------|--------|-----------------------------|
| Decision to apply, Review PHAB start-up guidance, on-line resources | Yellow |        |        |        |        |                             |
| Designate AC                                                        | Yellow |        |        |        |        |                             |
| Start Review of Standards, measures, documentation requirements     | Yellow |        |        |        |        |                             |
| Start documentation review & gathering                              | Yellow | Yellow | Yellow | Yellow | Yellow | Continues after application |
| Visioning & Community Team Building                                 |        | Yellow |        |        |        |                             |
| CHA & CHIP (together often take 18-24 months)                       |        |        | Yellow |        |        |                             |
| Agency Strategic Plan                                               |        |        |        | Yellow | Yellow |                             |
| Submit Application & Fee                                            |        |        |        |        | Yellow |                             |

# Some things could shorten your timeline



- Existing community partnerships
- Previous PHSQIP Assessment
- Recent/current
  - Community Health Assessment
  - Community Health Improvement Plan
  - LHD Strategic Plan

# PHAB Fee Structure



| <b>Health Department Category</b> | <b>Population Size of the Jurisdiction Served</b> | <b>2011/2012 Total Fee</b> |
|-----------------------------------|---------------------------------------------------|----------------------------|
| Category 1                        | Less than 50,000                                  | \$ 12,720                  |
| Category 2                        | 50,000 to 100,000                                 | \$ 20,670                  |
| Category 3                        | >100,000 to 200,000                               | \$ 27,030                  |
| Category 4                        | >200,000 to 1 million                             | \$ 31,800                  |
| Category 5                        | >1 million to 3 million                           | \$ 47,700                  |
| Category 6                        | >3 million to 5 million                           | \$ 63,600                  |
| Category 7                        | >5 million to 15 million                          | \$ 79,500                  |
| Category 8                        | >15 million                                       | \$ 95,400                  |

# Endorsements from LHD Directors



- We are more confident as a team with how important we are in serving our communities with a sense of comparability with other health departments.
- Accreditation helped jumpstart the process to create a QI culture for the agency as a whole.

# More endorsements



- We've got a very clear roadmap to guide us in the months ahead....It's been such a wonderful journey, with greater awards than I imagined.
- Accreditation had a positive effect on those staff involved by providing opportunities to learn about the department in-depth and how much we do for the people who live in and visit our state.

# Resources and Opportunities



- <http://www.phaboard.org/accreditation-process/accreditation-materials/>
- [http://www.naccho.org/toolbox/program.cfm?id=13&display\\_name=Accreditation%20Preparation%20Toolkit](http://www.naccho.org/toolbox/program.cfm?id=13&display_name=Accreditation%20Preparation%20Toolkit)
- [jking@inpha.org](mailto:jking@inpha.org)
- Watch for: Indiana Accreditation Summit for Shared Learning – this fall