




Excellence in Public Health: Health Department Accreditation and the Important Role of Governing Boards




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Greetings from the PHAB Board of Directors



Session Objectives

- Provide an update of the national public health accreditation program.
- Discuss the engagement of boards of health in health department accreditation initiatives
- Describe some early findings on the results and benefits of accreditation



Current Status

Public Health Accreditation Board

PHAB is national accrediting organization for **public health departments**:

- **State** health departments
- **Local** (city, county, regional) health departments
- **Tribal** health departments
- **Territorial** health departments

Public Health Accreditation Board (PHAB)

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

What is Public Health Accreditation?

- The measurement of health department performance against a set of nationally recognized, practice-focused and evidenced-based standards.
- The issuance of recognition of achievement of accreditation within a specified time frame by a nationally recognized entity.
- The continual development, revision, and distribution of public health standards.

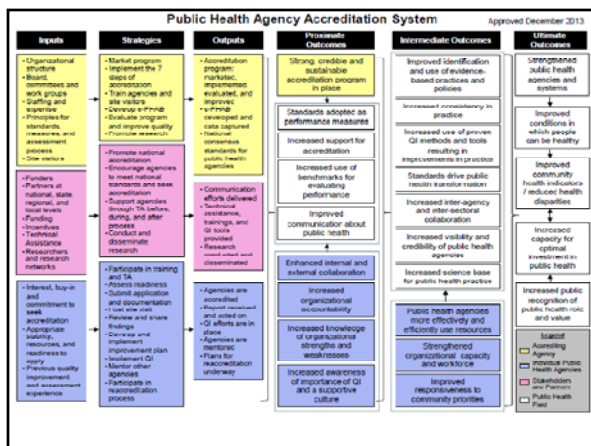
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Assessing Documentation

Domain
 Standard
 Measure
 Required Documentation
 Guidance

Purpose
Significance

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Accredited Health Departments

- Central Michigan District Health Department, Mount Pleasant, Mich.
- Champaign-Urbana Public Health District, Champaign, Illinois
- Chicago Department of Public Health, Chicago, Ill.
- Columbus Public Health, Columbus, Ohio
- Comanche County Health Department, Lawton, Okla.
- Cook County Department of Public Health, Oak Forest, Ill.
- Delaware General Health District, Delaware, Ohio
- Deschutes County Health Services, Bend, Oregon
- DuPage County Health Department, Wheaton, Illinois
- El Paso County Public Health, Colorado Springs, Colo.
- Florida Department of Health, Tallahassee, Florida
- Franklin County Health Department, Frankfort, Ky.
- Hennepin County Human Services and Public Health Department, Minneapolis, Minn.
- Johnson County Department of Health and Environment, Olathe, Kansas
- Kane County Health Department, Aurora, Ill.
- Kansas City Missouri Health Department, Kansas City, Mo.
- Kenosha County Division of Health, Kenosha, Wis.
- Lexington-Fayette County Health Department, Lexington, Kentucky
- Licking County Health Department, Newark, Ohio
- Livingston County Department of Health, Mt. Morris, N.Y.
- Loudoun Health District, Leesburg, Va.
- Madison County Health Department, Richmond, Kentucky
- Marion County Health Department, Salem, Oregon
- Minnesota Department of Health, St. Paul, Minnesota

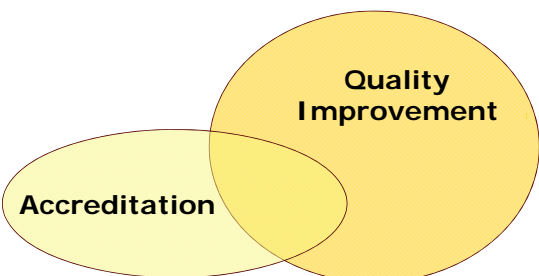


Accredited Health Departments


- Missoula City-County Health Department, Missoula, Montana
- New Orleans Health Department, New Orleans, Louisiana
- Northern Kentucky Independent District Health Department, Edgewood, Ky.
- Norwalk Health Department, Norwalk, Connecticut
- Oklahoma City-County Health Department, Oklahoma City, Okla.
- Oklahoma State Department of Health, Oklahoma City, Okla.
- Oneida County Health Department, Rhinelander, Wis.
- Polk County Health Department, Balsam Lake, Wis.
- RiverStone Health, Billings, Montana
- Spokane Regional Health District, Spokane, Wash.
- Summit County Combined General Health District, Stow, Ohio
- The Public Health Authority of Cabarrus County, Inc. d/b/a Cabarrus Health Alliance, Kannapolis, N.C.
- Three Rivers District Health Department, Owenton, Ky.
- Tooele County Health Department, Tooele, Utah
- Tulsa Health Department, Tulsa, Okla.
- Ventura County Public Health, Oxnard, California
- Vermont Department of Health, Burlington, Vermont
- Washington State Department of Health, Olympia, Wash.
- West Allis Health Department, West Allis, Wis.
- Wood County Health Department, Wisconsin Rapids, Wis.

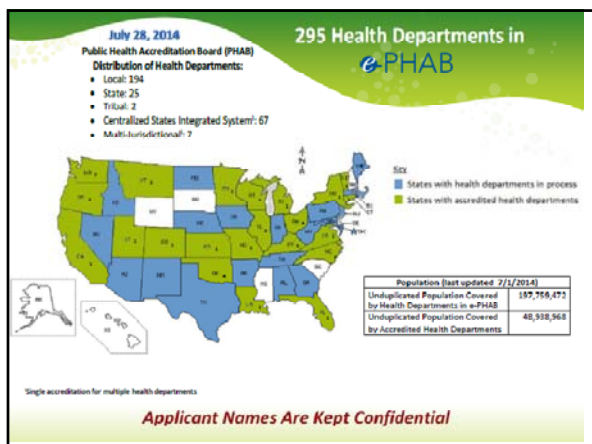


The Relationship Between Accreditation and Quality Improvement



The diagram consists of two overlapping yellow circles. The left circle is labeled 'Accreditation' and the right circle is labeled 'Quality Improvement'. The overlapping area in the center is also yellow.





Accreditation Fees

Health Department Category	Population Size of the Jurisdiction Served	2014 - 2015 Total Fee
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	Greater than 15 million	\$ 95,400

- ### What Do the Fees Cover?
- An assigned accreditation specialist to guide your department through the application process;
 - In-person training for your health department's accreditation coordinator;
 - A subscription to PHAB's online accreditation information system (e-PHAB), making it easier and more cost-efficient for your health department to participate in accreditation;
 - A site visit by a team of peer review experts, including a comprehensive review of your health department's operations against the national accreditation standards;
 - A peer review process, including the decision and comments from the Accreditation Committee;
 - Annual quality improvement guidance and support over a period of 5 years
 - Support in preparing for re-accreditation;
 - Identified opportunities for improvements to help your health department better serve its population; and
 - Exclusive contribution to a growing network of accredited local health departments and best practices to enhance the evidence-base for public health.

Version 1.5 (07/01/14)

- Edits and rewording for increased clarity
- Recommendations from the PH Community
- Questions Received from HDs and SVs
- Think Tanks and Expert Panels
 - Health Equity
 - Public Health Ethics
 - Public Health Communication Science
 - Public Health Workforce
 - Public Health Informatics
- Other Resources – Meetings and readings

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Think Tanks in 2014-2015

- Accreditation and Quality Improvement
- Public Health and Health Care Intersection
- Vital Records/Statistics
- Army Public Health
- Large City/Metro
- Rural Health Departments

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Engagement of Boards of Health in Health Department Accreditation Initiatives

Definition of Governing Entity

1. It is an official part of Tribal, state, or local government.
2. It has primary responsibility for policy-making and/or governing a Tribal, state, or local health department.
3. It advises, advocates, or consults with the health department on matters related to resources, policy making, legal authority, collaboration, and/or improvement activities.
4. It is the point of accountability for the health department.
5. In the case of shared governance (more than one entity provides governance functions to the health department), the governing entity, for accreditation purposes, is the Tribal, state, regional, or local entity that, in the judgment of the health department applying for accreditation, has the primary responsibility for supporting the applicant health department in achieving accreditation.

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Domain 12

- Standard 12.1: Maintain Current Operational Definitions and Statements of the Public Health Roles, Responsibilities, and Authorities
- Standard 12.2: Provide Information to the Governing Entity Regarding Public Health and the Official Responsibilities of the Health Department and of the Governing Entity
- Standard 12.3: Encourage the Governing Entity's Engagement In the Public Health Department's Overall Obligations and Responsibilities

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Early Results and Benefits

Free Online Issue of JPHMP

Journal of Public Health Management and Practice, January/February 2014 Issue totally dedicated to accreditation. It's free online at www.jphmp.com



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Early Evaluation Results

- 97% of health departments that have had their PHAB site visit strongly agree that "Going through the accreditation process has improved the performance of our health department."[^]
- According to HDs that have had their site visit, accreditation:
 - Identifies strengths and areas for improvement
 - Strengthens internal and external partnerships
 - Encourages HDs to prioritize and address long-standing concerns
 - Acts as a "stimulus...for continuous quality improvement and performance management in our daily practice"

[^] From PHAB evaluation of 33 health departments.

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Early Evaluation Results

- Among health departments applying for accreditation, 95% or more believe that accreditation will:^{*}
 - Stimulate quality and performance improvement opportunities
 - Allow HD to better identify strengths and weaknesses
 - Improve management processes
 - Stimulate greater accountability and transparency within HD

^{*} From NORC at the University of Chicago evaluation survey of 62 health departments that have applied for accreditation.

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Early Evaluation Results

- Health departments also reported the following motivators for applying for accreditation^
 - Accountability to external stakeholders
 - Documentation of HD's capacity to deliver the 3 core functions and 10 Essential Public Health Services
 - Credibility of HD within community
 - Relationships with community stakeholders
 - Competitiveness for funding opportunities
 - Communication with governing entity

^From NORC at the University of Chicago evaluation survey of 62 health departments that have applied for accreditation.

Why Were The Initial Health Departments Interested in Accreditation?

- Transparency and Accountability
- Most other governmental and health related services are accredited: hospitals, schools, child care centers, police departments, fire departments, etc.
- Provides a priority setting framework
- Commitment to improving their services
- Increased public engagement and support
- Increased staff morale
- Risk Management
- Potential for increased funding in the future; already using their accreditation certificate in grant proposals

NEW IN 2014

ACCREDITED HEALTH DEPARTMENTS ANNUAL REPORTS

“The submission of annual reports is required of all accredited health departments, in an on-line format provided by PHAB. Reports must:


- Include a statement that the health department continues to be in conformity with all the standards and measures of the version under which accreditation was received.
- Include leadership changes and other changes that may affect the health department's ability to be in conformity with the standards and measures.
- Describe how the health department has addressed areas of improvement noted in the site visit report.
- Describe how the health department will continue to address areas of improvement identified in the site visit report and/or by the health department in their accreditation action plan.
- Describe work on emerging public health issues and innovations

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Results from Initial Annual Reports

Focus areas


- 10 program specific
- 4 administration/financial management
- 3 community partnership
- 3 Governance
- 3 Planning
- 2 Data
- 2 QI Infrastructure
- 2 Workforce



Examples of QI

- Getting into compliance with mandated frequencies of inspections
- Improving a program that works with schools to implement environmental/policy changes
- Improving communications with governing entity
- Procuring an EMR system to get better data for evaluation & performance management
- Improving new employee orientation
- Streamlining & strengthening process for responding to grant RFPs

- Most common efficiency outcomes: Time saved & Reduced number of steps
- Most common effectiveness outcomes: Increased customer/staff satisfaction,
- Quality enhancement of services or programs; Organizational design improvements



Overall Contributions of Board Members to Accreditation

- Key supporters of accreditation and quality improvement
- Committees, expert panels, and think tanks
- Site visitors for PHAB
- Technical assistance providers

