Let’s Get Ready to be Accredited: Preparing to Launch in 2011!

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SAGADAHOC COUNTY HEALTH OFFICER
AND PHAB MEMBER AND FORMER MULTNOMAH COUNTY HEALTH OFFICER (1972-1978)
(with many thanks to Kaye Bender, PhD, RN, FAAN)
Session Objectives

- Public Health 101: “jump start” (QUESTIONS?)
- PHAB 101: “everything you need to know …”
- PHAB 301: lessons from the beta test;
- PHAB 401: Status of Accreditation; and General plans for the Fall 2011 Launch
Any resemblance to any person’s or agency’s positions … is purely coincidental!
• Committee on Assuring the Health of the Public in the 21st Century
MAJOR OPPORTUNITIES FROM IOM 2003

- The SYSTEM components and their roles
- The TEN Essential Services
- Core Competencies
- Public Health SYSTEM Performance Standards
- Certification
- Accreditation
IOM Reports 1988/2003 – National Catalyst for Accreditation

• Establish a “national commission to explore accreditation”

• Further states…
  – “This (accreditation) commission should focus on the development of a system that will further the efforts of NPHPSP.”
Building on the 1988 Recommendations: Exploring Accreditation

- Co-funded by CDC and RWJF
- Informed by the Multi-State Learning Collaborative
- Model addressed governance, standards, financing and incentives, and evaluation
- Model for voluntary accreditation developed and approved

Accreditation for state and local health departments is both desirable and feasible!
Public Health System Assessment Instruments and ACCREDITATION

• Can achievement of a “passing grade” on a performance assessment be used for accreditation?
• How should WHO accredit WHOM and HOW? (not to mention WHY?)
• SEE: “Exploring Accreditation” and CDC’s NPHPSP website
But first...
What is PHAB?

PHAB is a non-profit, voluntary accreditation organization whose goal is to advance public health performance by providing a national framework of standards for local, state, territorial and tribal health departments.
PHAB Partners

• Association of State and Territorial Health Officials (ASTHO)
• National Association of County and City Health Officials (NACCHO)
• National Association of Local Boards of Health (NALBOH)
• National Indian Health Board (NIHB)
• American Public Health Association (APHA)
• National Network of Public Health Institutes (NNPHI)
• Public Health Foundation (PHF)
PHAB Funding and Content Partners

- Centers for Disease Control and Prevention (CDC)

- Robert Wood Johnson Foundation (RWJF)
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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</thead>
<tbody>
<tr>
<td>2003</td>
<td>Institute of Medicine (IOM) report calls for an examination of public health accreditation</td>
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<td>2004</td>
<td>CDC identifies accreditation as a key strategy for strengthening public health infrastructure</td>
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<tr>
<td>2005</td>
<td>Exploring Accreditation Project (EAP) develops a model, which is revised after a public review process</td>
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PHAB’s History

2006  EAP final recommendations are released; APHA, ASTHO, NACCHO and NALBOH become the Board of Incorporators of PHAB

2007  PHAB is incorporated in May

2008  PHAB’s workgroups and committees begin developing elements of accreditation
PHAB’s History

2009 – 2010
PHAB conducts a beta test of accreditation

2010-2011
PHAB considers all evaluation data, think tank report information, and other feedback
PHAB develops final materials for accreditation launch

2011
PHAB begins accepting applications for accreditation – late summer/early fall
Benefits of Accreditation

• Credibility, transparency, and accountability
• Recognition of high performing health departments
• Framework for effective planning
• Culture of quality and performance improvement
• Access to resources for improvement
• Public health services aimed at improving health outcomes
Who is eligible?

- Local health departments
- State and territorial health departments
- Tribal health departments
Steps in the Accreditation Process

A. Pre-application
   Applicant prepares and assesses readiness, informs PHAB of its intent to apply, and receives training

B. Application
   Applicant submits application form

C. Self-assessment
   Applicant gathers and submits documentation

D. Site Visit
   • Site visit is conducted and report developed

E. Accreditation Decisions
   • PHAB Board will award accreditation status for 5 years

F. Appeals
   • Procedure for appeals and complaints (if needed)

G. Reports and Reaccreditation
   • Department reports progress and reapplies
Twelve Domains

1. Conduct assessments focused on population health status and health issues facing the community
2. Investigate health problems and environmental public health hazards to protect the community
3. Inform and educate about public health issues and functions
4. Engage with the community to identify and solve health problems
5. Develop public health policies and plans
6. Enforce public health laws and regulations
7. Promote strategies to improve access to healthcare services
8. Maintain a competent public health workforce
9. Evaluate and continuously improve processes, programs, and interventions
10. Contribute to and apply the evidence base of public health
11. Maintain administrative and management capacity
12. Build a strong and effective relationship with governing entity
PHAB 301: Burning Questions

- What did PHAB learn from the Beta Test?
- What does PHAB intend to do with what we learned?
- Will PHAB ever decide about the fees?
- When can health departments apply?
- How should health departments prepare?
What Did PHAB Learn from the Beta Test?
Thank You!
Overall Impression of Application Process

- Implement without any changes: 4%
- Implement with minor changes: 22%
- Implement with significant changes: 74%

N=27
Overall Impressions of Self-Assessment Process

- Implement without any changes: 0%
- Implement with minor changes: 21%
- Implement with significant changes: 79%

N=29
BTS Overall Impressions of Site Visit Process

- Implement without any changes: 72%
- Implement with minor changes: 24%
- Implement with significant changes: 4%
- NOT be implemented in accreditation: 0%

N=29
Site Visitors’ Overall Impressions of Site Visit Process

- 85% Implement without any changes
- 5% Implement with only minor changes
- 10% Implement with significant changes
- 0% NOT be implemented in accreditation

N=86
Overall Impressions of Beta Test Site

- Participating in the Beta Test will improve the performance of our health department
- The health department made the right decision to apply to be a Beta Test Site

N=30
Overall Impressions

- Other benefits of beta test participation
  - Increased emphasis on documentation
  - Opportunities to convey the importance of public health internally and externally
  - Greater awareness of strengths and areas for improvement
  - Increased emphasis on a culture of QI
  - Opportunity to prepare for accreditation
Beta Test Feedback

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.”

Beta Test Site Health Department
Beta Test Feedback

“. . . 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 and visit our state.”

Beta Test Health Department
“After completing the process, I am even more convinced of the value of this process. In addition to all the known benefits, I believe it will lead to a new level of communication and collaboration between public health agencies and jurisdictions.”

Beta Test Site Visitor
Beta Test Feedback

“The standards and measures can be viewed as an operating manual on how to run a good health department. The basics and fundamentals in management are there, so as new leaders come in they don’t have to reinvent the wheel—the standards and measures can provide a consistent roadmap.”

Beta Test Health Department
The beta test “helped jumpstart the process to create a QI culture for the agency as a whole.”

Beta Test Health Department
Likelihood of Applying for Accreditation

Health Department will seek national accreditation when it becomes available

- Strongly Agree: 77%
- Agree: 20%
- Disagree: 3%
- Strongly Disagree: 0%

N=30
What Are We Doing With What We Learned from the Beta Test?
Gist of Changes to Standards and Measures

• A new format allows for the inclusion of a description of the purpose and significance of each measure.

• Documentation required to be provided to meet each measure has been clarified.

• There are twelve groups of standards, or domains; ten that relate to the Essential Public Health Services, one for administration and management and one for governance.

• Required documentation guidance is numbered to correspond to each piece of required documentation, making it easier to locate each.

• State, local and tribal standards are all included in ONE document.

• Domain 9 on quality improvement has been rewritten.

• Domain 12 on governance has been rewritten.
“PHAB has encouraged Tribal input, listened to Tribal discussions and incorporated indigenous knowledge and wisdom in the development of the standards. They should be commended for their commitment to improving the health of all Americans.”

“[Using the PHAB standards and measures] provided a better understanding of the strengths and weaknesses of the public health department.”
# Guide to Standards and Measures – New Format

**Standard:** *This is the standard to which the measure applies.*

<table>
<thead>
<tr>
<th>Measure</th>
<th>Required</th>
<th>Purpose:</th>
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<tbody>
<tr>
<td><em>This section states the measure on which the health department is being assessed.</em></td>
<td><em>This section lists the documentation that the health department must provide as evidence that it is in conformity with the measure.</em></td>
<td>The purpose of this measure is to assess the health department’s . . .</td>
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<tr>
<td></td>
<td></td>
<td><em>This section describes the public health capacity or activity on which the health department is being assessed.</em></td>
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<tr>
<td></td>
<td></td>
<td><em>This section describes the necessity for the capacity or activity that is being assessed.</em></td>
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<tr>
<td></td>
<td></td>
<td><em>This section provides guidance specific to the required documentation. Types of materials may be described, e.g., meeting minutes, partnership member list, etc. Examples may also be provided here.</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>This section will state if the documentation is department-wide or if a selection of programs’ documentation is required.</em></td>
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</table>

*The documentation will be numbered: 1)Xxxx 2)Xxx*

**Significance:** *This section describes the necessity for the capacity or activity that is being assessed.*

**Guidance:** *This section provides guidance specific to the required documentation. Types of materials may be described, e.g., meeting minutes, partnership member list, etc. Examples may also be provided here.*

*This section will state if the documentation is department-wide or if a selection of programs’ documentation is required.*

1)Xxxx

2)Xxxx

a) xxx

b) xxx
**SAMPLE SITE VISIT REPORT FORMAT**

**DOMAIN 4:** Engage with the community to identify and address health problems  
Engage the Public Health System and the Community in Identifying and Addressing Health Problems

**STANDARD 4.1 B:** Engage the public health system and the community in identifying and addressing public health problems through an ongoing, collaborative process.

**MEASURE 4.1.1 B:** Establish and actively participate in collaborative partnerships and coalitions to address public health issues

<table>
<thead>
<tr>
<th>REQUIRED DOCUMENTATION</th>
<th>SITE VISIT TEAM SCORE</th>
<th>SITE VISIT TEAM COMMENTS</th>
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<tr>
<td></td>
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<td>COMMENT ON SCORE</td>
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<tr>
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<td>Describe how conformity with the measure was demonstrated; OR Explain what was missing, if the measure was not scored as “demonstrated.”</td>
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<tr>
<td></td>
<td></td>
<td>AREAS OF EXCELLENCE</td>
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<tr>
<td></td>
<td></td>
<td>Describe any areas of excellence or unique promising practices</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OPPORTUNITIES FOR IMPROVEMENT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Describe any opportunities for improvement. (Even if the measure is met, describe any opportunities for improvement identified by the site visit team.)</td>
</tr>
</tbody>
</table>

- **4.b** Two examples of ongoing collaborations that address public health issues (e.g. tobacco coalition, maternal child health coalitions, HIV/AIDS coalition, or a planning process such as CHIP)  
  - Not Demonstrated  
  - Slightly Demonstrated  
  - Largely Demonstrated  
  - Fully Demonstrated

- **4.b** List of partners in each collaboration  
  - Not Demonstrated  
  - Slightly Demonstrated  
  - Largely Demonstrated  
  - Fully Demonstrated

- **4.c** Description of process and templates used for collecting feedback and evaluating at least one partnership.  
  - Not Demonstrated  
  - Slightly Demonstrated  
  - Largely Demonstrated  
  - Fully Demonstrated

- **4.d** Documentation of use of evaluation findings  
  - Not Demonstrated  
  - Slightly Demonstrated  
  - Largely Demonstrated  
  - Fully Demonstrated

**Overall Comments About the Department's Conformity with this Standard/Domain (i.e., Description of areas of excellence, promising practices, areas that are lacking, and overall opportunities for improvement)**

In conclusion, the Team will provide their impression of the health department by stating the (1) three greatest strengths, (2) three most serious challenges or opportunities for improvement, and (3) their overall impression of the department as a functioning health department.
But WAIT...

There’s MORE!
How much will it cost?

Fees
Accreditation Fees

• The PHAB Board has approved a formula for developing the final accreditation fee schedule.

• More work has to be done to address the fee schedule for special application situations such as
  - Centralized states
  - Multi-jurisdictional
  - Tribes

• PHAB will publish the fee later in this month.
But WAIT…

STAY TUNED!
Think Tanks

- Environmental Public Health (completed)
- Centralized States (two held, one to be planned)
- Tribal Public Health (completed)
- Governance (completed)
- Texas Local Health Department Accreditation Implementation (completed)
- Large City Metro (one held; one to be planned)
- Emergency Preparedness (being planned)
- Chronic Disease (being planned)
- Workforce (being planned)
- Small Health Dept/Rural/Multi-jurisdictional (being planned)
- Maternal and Child Health (being planned)
- California Public Health Department Accreditation Implementation (being planned)
When can we apply?

What’s next in the accreditation program development process?
Accreditation Documents

Accreditation items expected to be released in early summer (that’s this month) in anticipation of the fall launch are:

• Standards and Measures, Version 1.0
• Accreditation Process (includes application information)
• Fee Schedule for 2011/2012
• Education Services to be Provided by PHAB
When Can We Apply?

Health departments should apply when they think they are ready, beginning in the fall of this year! PHAB will open its doors for applications with an official launch of the program in Washington DC. However, PHAB hopes to have a continuous stream of applicants over each year.
How should we prepare?
Step One: Readiness Checklists

• Key elements in the process
• Helps you determine where you are
• Helps you determine when you are ready to apply
• Does not have to be submitted to PHAB
• Can be a good roadmap
Step Two: Get Organized

- Appoint an Accreditation Coordinator
  - Able to devote a substantial amount of time
  - Have a good sense of the department overall
  - Be detail oriented
  - Have enough “authority” to enlist coworker support
- Engage senior health department leadership
- Begin collecting documentation as a routine part of operations
- Develop a team approach
- Ask questions; seek TA; attend training sessions
Step Three: Review New Materials Released Later This Month

- Standards and Measures, Version 1.0
- Accreditation Process (includes application information, Readiness Checklists, and Guide)
- Fee Schedule for 2011/2012
- Education Services to be Provided by PHAB
Step Four: Become Familiar with the Steps in the Accreditation Process

A. Pre-application
   Applicant prepares and assesses readiness, informs PHAB of its intent to apply, and receives training

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Step Five: Pre-Requisites

- Community Health Assessment
- Community Health Improvement Plan
- Departmental Strategic Plan
Step Six: Take Advantage of Training and Technical Assistance

Attend trainings and webinars offered by ASTHO, NACCHO, and others

Watch for PHAB to Announce Online Training and In-Person Training for Applicants
Step Seven: Just Do It!
“Accreditation is a major accomplishment for a health department. It means that it is addressing key community health problems”

Thomas R. Frieden, M.D., M.P.H.
CDC Director

Read the full March 24, 2011 press release:
http://www.cdc.gov/media/releases/2011/p0324_publichealthdeptaccreditation.html
The Way Forward to ACCREDITATION

TRANSPARENCY

ACCOUNTABILITY

TRUST
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