

# NACCHO'S 2016 PROFILE STUDY: ACCREDITATION

## Key Findings

LHDs are **engaging in PHAB accreditation** as recognition of their performance and quality

**7%** LHDs that have achieved accreditation, as of March 2016

Unaccredited LHDs that have formally engaged in PHAB accreditation by submitting an application or registering in e-PHAB

**14%**

### Background and Methods

NACCHO conducts the Profile study every three years to develop a comprehensive description of local health department (LHD) infrastructure and practice. The 2016 Profile study included a total of 2,533 LHDs in the United States, of which 76% completed the survey.

In the Profile study, NACCHO assesses LHD participation in Public Health Accreditation Board (PHAB) accreditation, which measures LHDs against nationally recognized, evidence-based standards.

For more information about the Profile study, email [profileteam@naccho.org](mailto:profileteam@naccho.org).

Small and locally governed LHDs are **much less likely** to be formally engaged\* in the PHAB accreditation process

All LHDs **21%**

### Size of population served

Small (<50,000) **12%**

Medium (50,000-499,999) **33%**

Large (500,000+) **58%**

### Type of governance

Local **15%**

State **35%**

Shared **57%**

\*includes accredited LHDs

The number of LHDs formally engaged\* in accreditation has **tripled** since 2013, but more LHDs have also decided not to apply

LHDs formally engaged in accreditation

2013

6%

2016

21%

LHDs deciding not to apply

15%

20%

The three most common reasons for **not** pursuing PHAB accreditation include:



Time/effort exceeds benefit



Fees are too high



Standards exceed capacity

## NACCHO Recommendations

- Continue to encourage LHDs to pursue PHAB accreditation by examining and promoting its benefits
- Explore ways to financially support LHDs interested in PHAB accreditation
- Identify needs of small and locally governed LHDs interested in engaging in the PHAB accreditation process