2012-2013 Accreditation Support Initiative (ASI) for Health Departments and Support Organizations

FINAL REPORT

1. **Community Description**
   Briefly characterize the community(ies) served by your health department or support organization (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.

   The Erie County Health Department is a local health jurisdiction located in northern Ohio on the shores of Lake Erie. This department serves a population of 77,000 citizens who live in urban, suburban, and rural areas. Erie County is also home to a large freshwater island and several amusement parks and resorts which lead to seasonal population swells of thousands of temporary residents due to the staffing of these operations.

   The Erie County Health Department is governed by a Board of Health. Members of the Board are elected by a District Advisory Council consisting of local government officials from the townships, cities and villages that comprise Erie County. The Board of Health is the appointing authority for the Health Commissioner who is the head of the Health Department. The Health Department is composed of six divisions (Administration, Nursing, Clinic Services, Environmental Health, Construction Service, and Community Health), and all programs are administered within their corresponding division.

2. **Work Plan Overview**
   Provide an overview of the work you conducted with or because of this funding, including the significant accomplishments/deliverables completed between December 2012-May 2013 under the auspices of this grant, and the key activities you 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.

   The largest portion of our project, and undoubtedly the most important, is the development of the CHIP. Having the CHIP and incorporating it into our Strategic Plan enabled us to meet PHAB’s application requirements. Our application was submitted and accepted on 5/01/2013. Additionally, the domains and standards were reviewed by the Accreditation Team and assigned to Division Directors. A protocol is being developed for document selection and review for submission.

3. **Challenges**
   Describe any challenges or barriers encountered during the implementation of your work plan. These can be challenges you may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities. If challenges were noted in your interim report, please do include them here as well.

   The largest challenge, as anticipated, is the time involved in the process. The actual work and manpower necessary to gather and/or create the documents is somewhat foreseeable, but the
time exhausted in discussion and analysis of documents was not. The Erie County Health Department’s Accreditation Coordinator and Accreditation Team all have fulltime responsibilities in their home divisions within the department. All members volunteered to be a part of the team and must carefully manage their time. Additional responsibilities pursuant to accreditation have also been assigned or delegated to many other members of the staff who also have existing workloads and preexisting time commitments.

4. **Facilitators of Success**
Describe factors or strategies that helped to facilitate completion of your work. These can be conditions at your organization that generally contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above.

From the beginning, the Erie County Health Department determined the accreditation process to be an agency-wide priority. This is evident in the creation of the Accreditation Team which is comprised of staff members from all six divisions. Having this diversity and knowledge has been crucially important in the document selection process. The Accreditation Team collectively has knowledge of every program, policy and plan within the Erie County Health Department.

Open communication and regularly scheduled meetings and updates to staff have assisted in limiting the challenges related to time management and existing workloads. Staff members not directly involved in the process willingly take on some of the daily responsibilities of the staff members who are actively working on accreditation-related tasks. In addition, the Erie County Board of Health firmly supports and encourages all efforts by the Health Department in pursuit of accreditation following NACCHO templates, models and other resources.

With regard to the creation of the CHIP; the pre-existing relationship with all of the stakeholder groups and collaborators who partnered with the Erie County Health Department for the Community Health Needs Assessment made the development of that document a very efficient process.

5. **Lessons Learned**
Please describe your overall lessons learned from participating in the Accreditation Support Initiative. 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 or support organizations who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

Having representation from all divisions on the Accreditation Team and appointment of a Coordinator was extremely beneficial. Very rarely was there a question that couldn’t be answered or a point of clarification that couldn’t be made by the members of that team. Having an Accreditation Team that is unfamiliar with the extensive programs administered and the services provided by a health department may be an impractical approach. If the Accreditation Coordinator and Accreditation Team were not familiar with the agency; they would need to learn every aspect of every program from the ground up. Not only would this be an extremely lengthy process for those individuals, but also for a significant number of the health department staff members who will inevitably be required to educate the Accreditation Team. This enormous expenditure of time and effort would need to occur before any accreditation activities could even begin. It was also
determined that educating and involving all staff members was greatly rewarding. All staff members are aware of the benefits of accreditation and the scope of the process for obtaining it.

The use of expert consultants for the Community Health Assessment and the Community Health Improvement Plan was beneficial. If this service is available and affordable it may assist in a more focused and effective process for administering the assessment and creating these documents. The use of NACCHO resources was also determined to be an important asset in developing these items.

6. Funding Impact
Describe the impact that this funding has had on your health department/support organization (and/or health departments you worked with as a support organization). In other words, thinking about the work you have done over the last six months:

- (Health departments) How has this funding advanced your own accreditation readiness or quality improvement efforts?
- (Support organizations) How has this funding advanced the technical assistance you provide to health departments? How has this funding advanced the accreditation readiness of the health departments you worked with?

The CHIP was the largest required component of the application process that we were lacking, but funding and dedicated time for the creation of it was always an issue that delayed the project. Having the ASI funding enabled us to accelerate that timeline and reach our goal much sooner. As a direct result of completing the CHIP; we were prepared to submit our application for accreditation to PHAB on 5/01/2013. This was at least six months sooner than we had originally anticipated applying.

7. Next Steps
What are your organization’s (and/or the health departments you worked with as a support organization) general plans for the next 12-24 months in terms of accreditation preparation and quality improvement?

The next twelve months will be spent selecting and submitting required documents in preparation for the PHAB site visit. This process will involve feedback and input from the entire staff, but will be overseen by the Accreditation Team. The Accreditation Coordinator will attend PHAB’s accreditation training. Other training or conference events will be attend by the staff, and the participation in regional accreditation work groups as well as web-based communities of practice will be utilized.

Incorporation of accreditation standards into positions and program areas has already begun and will continue. The Board of Health and the staff of The Erie County Health Department understand that the accreditation standards must not only be met, but must be maintained in order to ensure accredited status.