1. **Project Overview**

   Missoula City-County Health Department (MCCHD) is a local health jurisdiction with an inter-local agreement between the City of Missoula and the Missoula County officials. The governing entity is the Missoula County Board of Health. Missoula County is situated in the Rocky Mountains in the western portion of Montana. It is made up of 2,598 square miles and sits at an elevation of approximately 3,200 feet. The population in 2010 was 109,299 and is contained in both the urban area of Missoula and the rural areas outside the city.

   During the project period (November 2011 through May 2012), MCCHD undertook many activities to prepare for application to PHAB. These activities included finalizing the Community Health Assessment, completing the Community Health Improvement Plan and Agency Strategic Plan, forming an Accreditation Team to spearhead the effort, reviewing documentation needed for PHAB application, and systematically reviewing policies and organizing documents into an easily manageable electronic filing system.

   MCCHD’s Accreditation Coordinator worked closely with the health department director and staff to provide training and guidance as to the documentation necessary for application to PHAB, including necessary process and final written products for the CHA, CHIP, and Strategic Plan. The Accreditation Team met weekly to review PHAB Standards and Measures and present and discuss documentation available to meet the measures as well as discovering gaps in documentation and areas needing improvement.

   Completing deliverables for this grant successfully guided MCCHD to complete and organize necessary work within the organization and move toward accreditation. Some of these deliverables included complete prerequisites, completed and updated self-assessment tool for documentation collection, time-cost questionnaires, minutes and agendas of a Lead Accreditation Team within the department, and application for accreditation to PHAB.

2. **Reflections: Successes, Challenges, and Lessons Learned**

   MCCHD staff experienced many major successes as well as challenges associated with preparation for PHAB Accreditation.

   We are well on our way to having a functional Quality Improvement effort that is implemented department wide, with trained champions for QI. We were able to strengthen collaborations and partnerships with stakeholders in our community through the process of developing a CHA and CHIP. Staff within the department has a better understanding of PHAB requirements for
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accreditation and almost all staff members are participating in preparation, whether it is organizing documents within their own files for easier locating all the way to championing the Quality Improvement efforts. There is something for everyone when it comes to accreditation preparation and the staff has willingly participated when and where they can.

The biggest challenge that we experienced was how to keep the staff engaged in accreditation activities and excited about the changes being made when “there is so much other work to be done.” This was addressed in different ways. Each division received an overview presentation on PHAB Accreditation that included the basics of who, what, where, when, and how, as well as what each person can do to help prepare. The Accreditation Coordinator produced a newsletter distributed regularly to all staff via e-mail to keep staff updated on the accreditation process and what was happening within our own health department and the progress being made. The Accreditation Team met weekly to review documentation, which kept leadership staff engaged in the accreditation efforts.

The most significant lesson learned from this experience is that creative ways of engaging staff at different levels is the most important thing to finding success in this process. Accreditation preparation and application cannot be completed by one person, it takes a team and staff at all levels in order to find success.

3. **Impact and Next Steps**

This grant has had a very significant impact on the predictability of our timeline for application to PHAB. A portion of this grant was used to supplement funding for payment of application fees as well as to offset some of the cost associated with having a designated position of an Accreditation Coordinator. Without the supplemental funding available through this grant, our application to PHAB would have been delayed. This grant allowed us to review the costs associated with personnel, supplies, and software necessary so that we may better predict and plan for future expense associated with accreditation preparation. This will allow us to include necessary budgeting for future cycles. We were also able to network with our peers and share different ideas for the challenges experienced during the process.

Through this grant cycle we had many different aspects of preparation for accreditation underway all at the same time. We had one committee working on the CHIP and Strategic Plan while at the same time a different (and sometimes overlapping) group was meeting to discuss and select required documentation. Separate from those two groups, the general staff were participating in training and working within their respective program areas to organize documents and review policies for revisions, dates, and finalization. With the many different aspects of preparation being addressed at the same time, we were able to shorten our timeline for preparation by many months.

Within the next twelve months, we plan to complete uploading documentation to e-phab and be preparing for our site-visit, with the hope that we will become an accredited health department within the next twenty-four months.