1. **Project Overview**

   According to the 2008 census, Oneida County is home to approximately 36,000 residents. It is a very rural area with the largest city being Rhinelander, population 8,000. There are 20 municipalities served by a single local health department consisting of a health director and 18 other employees.

   During the project period, Oneida County Health Department (OCHD) assessed readiness for application for accreditation through completing the PHAB Readiness Checklist. An Accreditation Work Plan was developed based on the results of the checklist and grant objectives. As one of the first steps, OCHD worked to gain buy-in from staff and policy makers through regular education and training about accreditation. The next activities included developing a tool to assess staff competencies and training needs. Staff completed the evaluation and future staff development trainings are based on the identified needs. Finally, updating, reviewing, and developing policies and procedures were a major activity during the project period. A standard template was developed and gaps in the policy and procedure manual were identified so that new policies and procedures could be created. During the completion of these activities, OCHD also applied for PHAB accreditation. The Health Officer and Accreditation Coordinator attending the in-person training in Alexandria, VA in April 2012.

   With the timeline provided in the Accreditation Work Plan, activities were completed based on the identified completion date and/or need. The Accreditation Coordinator was responsible for managing the timeline and meetings were often held with the Health Officer, Assistant Director, and Accreditation Coordinator to discuss the progress of the grant objectives and current needs for successful accreditation application.

   Significant accomplishments include increased buy-in from policy makers and staff (which includes increased participation in documentation identification) and OCHD is now able to upload documentation to ePHAB- one of the biggest steps in the accreditation process.

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

   Strategies for successful implementation of the activities outlined in the project include communication, effective management, and education. Communication is essential between everyone involved in the process. The Accreditation Coordinator needed to communicate often with OCHD staff regarding certain needs to help in the progress of becoming accredited. Additionally, communication between the OCHD Director and Accreditation Coordinator and reporting on
progress or health department needs was also critical. Secondly, effective management of the Accreditation Work Plan was critical in completing the activities as well. The work plan was an excellent tool that served as a type of checklist as OCHD completed activities. Finally, education was a huge piece in the implementation of the activities. Whether it was providing education to staff and policy makers about accreditation and the accreditation process or providing education about updated or developed policies and procedures, this piece is key!

One major barrier or challenge that OCHD had to overcome was creating new documents. There were several documents in which there weren’t any great examples that served our purposes. For example, there were few samples from other areas that served our purposes for the communication plan and the employee evaluation tool. The Director and Accreditation Coordinator had to go through a rigorous process of drafting, editing, re-drafting, editing, etc when this happened and this took a lot of time.

Successful implementation of this project can be largely contributed to health officer involvement and creating some kind of work plan that outlines not only the objectives outlined in the project, but other objectives that the health department knows it has to complete.

NACCHO’s Accreditation Coordinators Learning Community was very helpful- it was nice to have a “sounding board” and it was also very helpful for getting examples of documentation that we were looking to update or develop.

3. **Impact and Next Steps**

   This grant has allowed our agency to devote more staff time (increase the hours of the Accreditation Coordinator) to the accreditation process. With the increased time, more activities were able to be completed in a shorter amount of time. For example, policy and procedure review/updating/development may have taken a much longer time without dedicated staff time to complete it. We were able to apply for accreditation and participate in PHAB accreditation process activities much sooner than we would otherwise be able to. OCHD was also able to fulfill the financial obligations of accreditation because of the NACHHO grant as well. Accreditation fees were partially paid through the grant and the Health Officer was also able to attend the PHAB mandatory in-person training with the Accreditation Coordinator in Alexandria, VA.

   Because of the emphasis placed on accreditation over the course of the past six months, OCHD staff is able to really understand the accreditation process and understand why OCHD is pursuing it. There is more staff buy-in and staff are more educated on PHAB accreditation.

   Many of the activities that were required as part of this grant were activities that OCHD needed to complete for successful application to PHAB. Many of the documents that were created during the grant period will likely be used for either the ePHAB uploading process or may be selected during a site visit. Additionally, by really evaluating accreditation readiness of OCHD, we were able to identify QI projects.
In the next 12 months, OCHD plans to complete the accreditation process (including the site visit and accreditation decision) and become accredited. OCHD also plans on continuing to implement quality improvement activities and staying updated on PHAB’s Accreditation Standards and Domains so that OCHD continues to be updated on the requirements of accreditation.