

## 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 Norwalk Health Department serves 85,603 residents in the City of Norwalk, located in Fairfield County in the State of Connecticut. According to focus group respondents in the 2012 Community Health Assessment, the city of Norwalk is very diverse ethnically and racially as well as economically. Approximately 68.7% of the population is White, 14.2% is Black, 4.8% is Asian, 12.3% is other/multiple races, and 24.3% are of Hispanic origin. 8.2% of the population is below poverty level.

The Norwalk Health Department has an annual budget of approximately \$3.5 million and a staff of 27 full-time equivalent employees (FTEs). Under the direction of the Mayor, and with valuable guidance from its six-member Board of Health, the Norwalk Health Department provides a variety of services and programs to fulfill its mission: to prevent and control the spread of disease, promote a healthy environment, and protect the quality of life within its changing community. Programs and services are organized within six divisions: Environmental Health, Preventable Diseases, Health Education, Emergency Preparedness, Laboratory Services, and Administration.

#### 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.*

At the beginning of the grant period in December 2012, we had approximately 60% of the required PHAB documentation. At the end of the grant period in May 2013, we now have 89% of the documentation. We completed the remaining prerequisites, which included the CHIP and the strategic plan. We finalized the CHIP by establishing timeframes and incorporating responsibilities for the strategies.

We completed the strategic plan in March 2013. Senior Management and Board of Health members participated in two strategic planning sessions in November 2012. During these meetings they reviewed the community health assessment findings and the community health improvement plan, reviewed the department's vision and mission, established value statements, completed a SWOT analysis, and identified the goals for the plan. The Senior Management Team met twice in January to develop the objectives for the goals. The Project Coordinator provided a

template for the operational plan, and staff added activities, timeframes, responsibilities, and deliverables/measures for their objectives. The Director of Health met with staff individually to revise the operational plans in February and finalized the plan in March.

We submitted our application to PHAB in March 2013 after completion of the prerequisites. The Accreditation Workgroup continued to advance preparation throughout the grant period. Accreditation Workgroup meetings were held once a month and allowed staff to update the group on their progress. The Accreditation Coordinator met with staff individually to review progress in developing and identifying documentation multiple times each month. She also created “to-do” lists so staff would stay on track. The workgroup established goals for each month for what they wanted to accomplish. The Director of Health reviewed and revised policies and procedures with staff. The Accreditation Coordinator and Director of Health presented on progress at two staff meetings and presented at several Board of Health meetings. The Accreditation Coordinator and Project Assistant participated in the May 2013 PHAB Applicant Training session.

Following completion of the strategic plan, the Accreditation Coordinator developed a draft performance management system, in partnership with staff from all levels and divisions from the department. They developed draft goals, objectives, performance measures, and dashboards for reporting. We also contracted with the Public Health Foundation to review our proposed system and provide feedback. While the performance management system was under development, the Accreditation Coordinator and Director of Health also worked on formalizing the quality improvement structure.

We also completed a workforce needs assessment and have drafted a workforce development plan. The Project Coordinator facilitated the training needs assessment with members from the Accreditation Workgroup on December 18, 2012. She designed the methodology of the assessment utilizing resources from the Public Health Foundation and after meeting with the Assistant Director of the Connecticut-Rhode Island Public Health Training Center and representatives from other local health departments. In January, the Project Assistant met with staff members and gathered information on required trainings, which included continued professional development to maintain licenses and certifications. These trainings will also be included in the workforce development plan. The Accreditation Coordinator drafted the workforce development plan utilizing the template from the Ohio Public Health Training Center.

### 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.*

Our biggest challenge was not having enough time to finalize everything as planned. We put together an aggressive plan for finalizing the CHIP, developing the strategic plan, developing the performance management system, producing the workforce development plan, working on all of the other remaining documentation (about 40% was remaining at the start of the grant project period), reviewing and making improvements to documentation, tracking progress for each

measure, selecting final documents to upload to e-PHAB, and promoting accreditation within the entire department. We accomplished most of the work, but performance management and workforce development documents will still undergo more revisions.

We spent more time than anticipated on developing and enhancing the documentation for the remaining PHAB measures that are not yet fully demonstrated. The Director of Health, Accreditation Coordinator, and Project Assistant spent a large amount of time assisting other staff in developing and editing policies and procedures.

#### 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.*

One factor that helped to facilitate completion of the work was the utilization of national and state resources and training opportunities, including NACCHO Strategic Planning Guide, National Network of Public Health Institutes Open Forum for Quality Improvement, Public Health Foundation (performance management and workforce development resources), documentation from NACCHO Accreditation Support Sites (2011-2012), Connecticut-Rhode Island Public Health Training Center, and Public Health Performance Management Systems for Health Departments Training offered by Connecticut-Rhode Island Public Health Training Center and Marni Mason.

Strong leadership commitment from the Director of Health was also a key factor contributing to our successes in advancing accreditation preparation. He has been heavily involved with various aspects of accreditation preparation. He also committed funding to support a part-time Project Assistant to work with the Accreditation Coordinator on accreditation.

#### 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.*

- Provide support in policy development to staff, especially if this is a new area for them.
- There are so many resources and example documents available to you for accreditation preparation. They are a great place to start as you think about your own projects and documents.
- Remember to think about other organizations that can provide documentation for your health department – all of the documentation doesn't need to be created by your department (as long as it is in use in your department).

#### 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 funding has greatly advanced our accreditation readiness. We were able to pay for half of the PHAB fees with this grant money. We were also able to hire a consultant to review our proposed performance management system and provide us with feedback. Additionally, it allowed for the Accreditation Coordinator to devote 100% of her time to accreditation-related activities, which included performance management, community health improvement, quality improvement, and workforce development. Finally, it allowed for an additional participant to attend the PHAB Applicant Training.

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?*

We have applied to PHAB and have attended the Applicant Training. We plan to finish developing the rest of the documentation and upload it to e-PHAB by the beginning of the summer. We aim to complete the site visit by the end of the calendar year in 2013. We aim to achieve accreditation in 2014.