INFORMING LOCAL GOVERNING ENTITIES

PRESENTER’S GUIDE

NATIONAL ASSOCIATION FOR COUNTY AND CITY HEALTH OFFICIALS
# Table of Contents

1. **Introduction**................................................................................................................................................. 3

2. **Preparing for the Presentation**................................................................................................................ 3-4

3. **Giving the Presentation**............................................................................................................................. 5
   a. *Public Health 101: Understanding the Importance of Public Health*...................................................... 5-10
   b. *Public Health Accreditation*..................................................................................................................... 10-16

4. **Wrap up**....................................................................................................................................................... 13-14
INTRODUCTION

As local health departments (LHDs) move towards preparing for national accreditation, it is important to remember that local governing entities (LGEs) are critical players in this process. Whether the authority of the LGE is defined as governing, policy making, or advisory, LHDs are held accountable to them and therefore must gain support before proceeding with the accreditation process. Some governing boards may have limited knowledge of public health and/or accreditation, making it essential for LHDs to proactively provide the necessary information.

These training materials are intended to provide a resource for local health officers (LHOs) to inform their respective LGEs on the basics of public health, the importance of accreditation, and the role that LGEs play in the accreditation process. This guide has been designed so that any LHO can pick it up and present the information as-is, or after tailoring it to more specifically meet local needs. Additionally, the presentations may be used together, as one, or as two distinct presentations if only one topic area is needed or if time is limited. Simply follow the directions within this guide to make this resource work for you.

This packet contains:

- Scripts for two PowerPoint presentations – Public Health 101 and Public Health Accreditation
- Instructions on how to tailor the presentations to meet local needs
- Handouts for participants

PREPARING FOR THE PRESENTATION

The presentations that correspond to this presenter’s guide can provide practical information to all LGEs but are very general in scope. It is important to take time beforehand to tailor the PowerPoint slides so they apply to your specific LHD and LGE. The following instructions serve as a general checklist to make sure you are prepared to present the PowerPoint presentations, either consolidated into one presentation or on their own:

1. **Insert your information** – both PowerPoint presentations contain slides with red text that instruct the presenter to insert information specific to their respective LHD. It is important to click through every slide and read through the provided instructions and talking points, in advance of giving the presentation, to ensure that all relevant information is provided.

2. **Assess the needs of your LGE** – It is not necessary to present both PowerPoint presentations. If your LGE demonstrates a grasp of basic public health knowledge, feel free to skip to the Public Health Accreditation. If your LGE is less engaged in the efforts of your LHD, the Public Health 101 presentation could be a good starting point to inform them about the role of public health in the community. Because LGEs vary in knowledge and involvement with the functions of their respective LHD, it is up to you to assess the amount of information to provide.

3. **Print handouts for audience** – The presentations can be supplemented with handouts:
a. **PowerPoint handouts** – although this is optional, participants often find it useful to have handouts of the slides for the purpose of taking notes during the presentation. To print the presentation in ‘Handouts’ view, follow these instructions:
   i. Open the PowerPoint and under the ‘File’ menu or on the ‘Microsoft’ icon at the top left corner (depending on your version of Windows), click ‘Print.’
   ii. Find the ‘Print What’ menu in the lower-left corner of the print dialogue box and select ‘Handouts Page’ from the drop-down menu. To the right of this drop-down menu, change the ‘Slides per page’ option to ‘3.’
   iii. To conserve paper, if you would like to print on both sides of the sheet, click on ‘Properties,’ select the ‘Finishing’ tab, and check the box next to the ‘Print on both sides’ option.

b. **One-page fact sheet** – this fact sheet provides general information on public health, accreditation, and the role LGEs play in accreditation.

4. **Documents for Presenting** – Print a copy of the following documents for assistance during the presentations:
   a. **PowerPoint Presentation in ‘Notes’ view** – this will allow you to flip through hard copies of the slides with all of the talking points provided directly under each slide. To print the presentation in ‘Notes’ view, follow these instructions:
      i. Open the PowerPoint and under the ‘File’ menu, click ‘Print.’
      ii. Find the ‘Print What’ menu in the lower-left corner of the print dialogue box and select ‘Notes Page’ from the drop-down menu.
      iii. To conserve paper, if you would like to print on both sides of the sheet, click on ‘Properties,’ select the ‘Finishing’ tab, and check the box next to the ‘Print on both sides’ option.
   b. **Frequently Asked Questions on Accreditation** – this document of FAQs is intended to assist in answering questions that may be received regarding the national accreditation program.

5. **Read script** – Prior to presenting any of these materials, it is strongly recommended to read through all of the slides and talking points. Feel free to make appropriate changes for your jurisdiction and to include additional thoughts you would like to share.

6. **Logistical preparations** – make sure to download the PowerPoint slides from the NACCHO Web site at [www.naccho.org/accreditation](http://www.naccho.org/accreditation) and arrange for a computer and projector to present the slides. If the technology is not available, consider distributing hard copies of the slides to the audience.

7. **Additional questions** – If there are additional questions while preparing for these presentations, contact Pooja Verma at pverma@naccho.org or (202) 507-4206.

**GIVING THE PRESENTATION**
The following section of this guide provides presenter instructions, talking points, and tips for presenting each slide. This section is divided into two parts:

**Part I. Public Health 101: Understanding the Importance of Public Health**

**Part II. Public Health Accreditation**

Both parts provide specific instructions and talking points for every slide in the presentations. For the slides that include presenter instructions, it is important to follow those instructions and make the necessary changes to the PowerPoint files before presenting the information. This section also provides talking points for every slide in the presentations.

**Part I. Public Health 101: Understanding the Importance of Public Health**

*Estimated time = 15 minutes*

- **Introduction (Slide 1)**

  **Presenter Instructions:**
  
  - Add your name, title, and LHD to the slide
  - If your LHD has a logo, include it on this slide. If you choose to do so, you can also add the logo to every slide in the presentation by following these steps:
    - Open the PowerPoint and click on ‘View’
    - Go to ‘Slide Master’ and insert the logo wherever you would like to position it throughout the presentation.
    - Close Slide Master and your logo should appear on every slide.

  **Talking points:**
  
  - *Introduce yourself and welcome your LGE to the “Public Health 101: Understanding the Importance of Public Health” presentation.*

- **Objectives (Slide 2)**

  **Talking points:**
  
  *Read the objectives of the presentation:*
  
  - Understand the definition of public health
  - Understand the role of public health in [INSERT jurisdiction]
  - Describe the key functions of public health
  - Provide an example of public health’s impact in Lawrence-Douglas County, Kansas (INSERT the name of your county if using a story from your county – see Slide 14 for additional instructions.)

- **What is Public Health? (Slide 3)**

  **Talking Points:**
  
  - Public health takes a proactive and preventive approach to focus on the health of entire populations while they are still healthy, rather than individual patients after they have become
ill. Just as a doctor treats individual patients, public health “treats” entire communities. Public health works to keep entire populations healthy, and when it fails, entire populations suffer.

**Public Health: Past, Present and Future (Slide 4)**

**Presenter Instructions:**

- Under the ‘Emerging threats’ heading, add a bullet or replace the provided ‘emerging threats’ with statistics illustrating health concerns specific to your county and talking points in the script describing the statistics. For assistance in obtaining county specific statistics, visit the Community Health Status Indicator (CHSI) website at [http://www.communityhealth.hhs.gov](http://www.communityhealth.hhs.gov) and search for your state and county to view county specific health indicator statistics.

**Talking points:**

- Since 1900 the average American lifespan has lengthened by 30 years and 25 of those years are attributable to public health. A few of the many public health achievements of the 20th century include:
  
  - Population-wide vaccination programs which have not only eradicated Small Pox but also controlled the spread of numerous communicable diseases including measles, diphtheria, rubella, and tetanus, among others.
  - Improved water sanitation has dramatically reduced the spread of infectious diseases such as Cholera and Typhoid
  - Through public health prevention efforts such as smoking cessation programs, blood pressure control, and early detection, death from coronary heart disease has decreased by 50% over the past four decades.
  - Increased access to antibiotics and health care coupled with better hygiene resulted in a 90% decrease in infant mortality and 99% decrease in maternal mortality since 1900!
  - Millions of cigarette smoking related deaths have been prevented due to public health anti-smoking campaigns and cessation programs.

- Despite these many advancements, we still have a ways to go in protecting the health of our population and many challenges ahead.

**What Public Health Means to Everybody (Slide 5)**

**Talking Points:**

- For many people, “public health” means “publicly-funded health care” or health care for individuals who otherwise cannot afford to access it. In reality, public health is much more extensive, and benefits us all. Let’s walk through a typical day and see how public health impacts all of us!
  
  - After you first arose this morning, did you brush and floss your teeth? Hopefully, you go to your dentist regularly and follow directions to keep your teeth and gums healthy. Public health also keeps your teeth healthy through fluoridation of the public drinking water supply, which began
in 1945. It has resulted in a 40-70% reduction of tooth decay in children and a 40-60% reduction in tooth loss in adults. However, 40% of the U.S. population still live in areas without a fluoridated water supply.

- After you dressed, did you stop for breakfast? Did you have orange juice, or perhaps scrambled eggs, or maybe a bagel with cream cheese? You can be sure that your orange juice, eggs and cream cheese are not contaminated with bacteria that would make you sick because public health regulates the safety of your food supply. We also teach and promote safe food handling practices that kill bacteria and help you and those who handle your food from contaminating it.
- After you had your safe, and hopefully healthy, breakfast, did you or your neighbors send children off to a day care center or school? It is the public health system that works to make sure that children are fully immunized, so that they cannot catch or transmit measles, whooping cough, diphtheria, polio, or other childhood diseases that are killers when they go to school or day care. In the 20th century when tens of thousands of children died or were permanently disabled by these diseases. It takes a continuous effort to make sure that all infants and school children get their shots. We monitor vaccination rates, actively seek out unimmunized children, and offer shots in our clinics.
- When you arrived at your office, it probably didn’t even cross your mind that no one is smoking. Decades of public health research and action have led to our knowledge that tobacco use kills and to many actions designed to reduce smoking, including clean indoor air regulations.
- Perhaps most in the news lately and most on peoples’ minds these days, is being prepared for health emergencies. We all hope that we will never have to worry about another intentional release of anthrax spores, witness anymore natural disasters like Hurricane Katrina, or worry about another influenza pandemic. Nonetheless, public health’s role is to be prepared for the worst and will be among the first responders in case of an emergency.
- I think you get the picture, public health is all around you! And as we move forward to address these challenges and others, we must be prepared for what comes next.

**Making the Invisible More Visible (Slide 6)**

**Presenter Instructions:**

- Insert your LHD logo on this slide. If available, also include images of your LHD in action (e.g. vaccination clinics, health education classes, etc.)
- If your LHD has used the local public health shield in any of its functions, use that story as an example to explain how the shield is used and the relevance and importance of the visibility of public health.
- If you would like to distribute local public health pins/buttons or pens to your board, please contact Kate Grisard at kgrisard@naccho.org for more information.

**Talking points:**

- While prevention efforts are effective they are often unseen and therefore overlooked by both government and the public. Public health personnel go about their work in a way that is invisible in the neighborhoods and communities where they work. When a local Red Cross is associated with something it is universally known who is involved. Local governmental health
departments, unlike police, fire and emergency response agencies or voluntary organizations such as the Red Cross, historically lacked a visual identity that was universally known.

- In 2006, NACCHO developed the public health shield, shown on this slide, in an effort to increase the visibility and national recognition of local public health. By using this visual symbol consistently over time, local public health agencies can let everyone who observes or uses health department personnel, facilities, vehicles, publications, community meetings, or any other activity know that the health department is on the job. Using the logo and messages frequently and prominently helps show pride in the people and power of public health, who are at work every day in every community. It is time for local health departments to be visible and understood by all.

10 Essential Public Health Services (Slide 7)

Talking Points:

- The 10 Essential Public Health Services describe the activities that should be undertaken in all communities. They provide a working definition of public health and a guiding framework for the responsibilities of local public health systems. The practical examples that I shared a few moments ago, all fall under these key functions of public health and you can easily tell where each earlier example fits here.

How is [INSERT LHD] providing the Essential Services? (Slide 8)

Presenter Instructions:

- On the slide, list specific examples of how your LHD provides the Essential Services OR list and discuss the suggested examples in the talking points below.

Talking Points

- Real life examples of how LHDs provide the 10 Essential Services within their communities include:
  - Offer free blood pressure and cholesterol screenings to prevent coronary heart disease (ES 3: Inform, educate, and empower people about health issues)
  - Collaborate with residents, city planners, public health professionals and elected officials to replace liquor stores with grocery stores in an urban community (ES 5: Support policies and plans that support community health efforts).
  - Residents of the community are pleased to see a framed certificate with ‘Sanitation Grade A’ on the wall of their favorite restaurants thanks to routine LHD inspections (ES 6: Enforce laws and regulations to protect health and safety).
  - Provide a toll-free hotline for enrolling uninsured children in a federally funded health insurance program (ES 7: Link people to needed personal health services).

The Taylor Family: A Public Health Success Story (Slide 9)
Presenter Instructions:

- If your health department has a notable success story on hand, insert it into this slide. If you need help developing a success story, follow this link to a guide on how to develop success stories: http://www.cdc.gov/HealthyYouth/stories/pdf/howto_create_success_story.pdf.
- If you do not have a success story, use the example already provided on this slide with the talking points below.

Talking Points:

- So what does public health look like in Lawrence-Douglas County? Paul and Barbara Taylor have lived here for nearly 30 years, raising their four children, who are now building families of their own.
- Paul Taylor, a pastor at a local church and chaplain with Lawrence-Douglas County Fire & Medical, came to the Health Department for his tetanus shot. The Taylor children, Sarah, David, Jeni and Ben, all received their childhood immunizations at the Health Department as well. Barb and daughter Jeni attended the Health Department’s unique family-based sexuality education course, “Kids Need to Know.” Now married and with a family of her own, Jeni’s daughters, Anya, 3, and Charis, 6, have benefited from the Health Department’s Child Care Licensing program, which seeks to ensure the safety of children in day care. Both girls attended a local preschool, one of more than 300 facilities inspected by child care licensing surveyors each year.
- Every day the members of the Taylor family wake up in the morning and brush their teeth using clean water with added fluoride to maintain dental health. They enjoy safe food and water without worrying about them being contaminated with bacteria because public health regulates the safety of the food supply. As soon as they get into their cars to go to work or school, they buckle their seatbelts because public health works hard to promote motor vehicle safety to prevent death and serious injury. In the summer they swim in a public pool that is certified by the department of health, and throw a pool party with hot dogs from a local restaurant that has passed a public health restaurant inspection.
- The Taylors are just one example of the many Lawrence-Douglas County residents who have come to rely on the health department’s presence.

Public Health... (Slide 10)

Presenter Instructions:

- Include this slide ONLY if this is the end of your presentation today. If you are proceeding with either the Roles of Governance in Public Health Accreditation or, move forward to the next presentation.

Talking Points:

- Public health is everywhere, it is at work everyday, and it affects everyone. Public health fulfills its mission in ways so invisible that few working outside of the world of public health will even notice. Nonetheless, to maintain and ensure the health of our communities, we as public health leaders must continue to face the challenges of the new millennium.
Thank You (Slide 11)

Presenter Instructions:

- Include this slide ONLY if this is the end of your presentation today. If you are proceeding to the Public Health Accreditation section, move forward to the next presentation.
- If using this slide, insert your contact information on this slide so the audience can get in touch with you if they have any further questions in the future.

Talking Points:

- This concludes the Public Health 101 presentation. Are there any questions?
- Thank you all for attending the presentation today! Please take down my contact information in case you have questions or need to get in touch with me in the future.

Part II. Public Health Accreditation

Estimated time = 15 minutes

Introduction (Slide 1)

Presenter Instructions:

- Add your name, title, and LHD to the slide
- If your LHD has a logo, include it on this slide. If you choose to do so, you can also add the logo to every slide in the presentation by following these steps:
  - Open the PowerPoint and click on ‘View’
  - Go to ‘Slide Master’ and insert the logo wherever you would like to position it throughout the presentation.
  - Close Slide Master and your logo should appear on every slide.

Talking points:

- Introduce yourself and welcome your LGE to the “Public Health Accreditation” presentation.

Objectives (Slide 2)

Talking points:

Read the objectives of the presentation:
- Understand the definition of accreditation and its importance in public health
- Define and understand the purpose of the Public Health Accreditation Board
- Discuss the benefits of accreditation
- Discuss next steps for [INSERT LHD NAME]

Overview of Accreditation (Slide 3)

Talking points:
Accreditation is a status that provides public notification that an institution, program, or agency meets standards of quality set forth by an accrediting agency. The accreditation process reflects the fact that the institution, agency or program is committed to self-study and external review by one’s peers.

Accreditation has been widely accepted by many fields within the US including the healthcare system, schools, and social service agencies such as police and fire departments. Likewise, public health agencies need to demonstrate their accountability to their community, and measure agency performance against nationally-established standards. We need to move away from the old saying ‘when you’ve seen one health department, you’ve seen one health department’ and toward a place where regardless of where you live, you receive the same level of service from your governmental public health department.

[INSERT LHD] wants to pursue accreditation because it will set us on a path of continuous quality improvement and demonstrate the high quality work we provide. Illustrating this point, a recent research study shows preliminary evidence that there is a link between accreditation and health department performance. Accredited LHDs in North Carolina, a state with a state level accreditation program, demonstrated greater efficiency and effectiveness in H1N1 response to public health emergencies than their non-accredited peers. (Source: Glen Mays & John Wayne)

Public Health Accreditation Board (Slide 4)

Talking points:

- The Public Health Accreditation Board, or PHAB, is a nonprofit organization dedicated to advancing the quality and performance of state, local, tribal, and territorial public health departments by providing a national framework of standards. PHAB has a vision of improving the quality and performance of all health departments in the U.S. through voluntary accreditation.
- The PHAB voluntary accreditation program emphasizes the importance of and is grounded in quality improvement, and has catalyzed health department activity in this arena. The process of preparing for and achieving accreditation yields information about the agency that can be used to identify areas of improvement. Once accredited, health departments maintain this status for 5 years.

2011-2012 Fee Schedule for Accreditation (Slide 5)

Talking points:

- There is a fee for applying for accreditation and rates are based on the size of a health department’s jurisdiction.
- **HIGHLIGHT the category your health department falls in based on size of population served.**
- Health departments have the option of paying in multiple year increments as outlined on the slide OR a health department can pay in advance and receive a discount. The discount will be discussed with the individual LHD.
- Accreditation expenses are an eligible expense for federal grants, according to the Centers for Disease Control and Prevention’s Procurement and Grants Office (PGO). Health departments will however have to work directly with their project officers to receive permission to use specific federal dollars to finance accreditation fees.
PHAB’s fee schedule will be published annually and the rate will be applicable for a 5-year period, starting from the date of submission of the full application.

Additional costs for accreditation preparation include time, staff, materials, and other resources.

Though there is a cost to preparing and applying for accreditation, [INSERT LHD] is confident that the investment will improve and advance the quality of our work and may, consequently, give us a competitive edge at securing additional funding in the future.

Return on Investment (Slide 6)

Talking points:

Now, let’s discuss the return on investment of accreditation. Some of the many advantages of pursuing accreditation include:

- **Leverage for funding:**
  - Accreditation provides evidence to policymakers and public funders that investing public dollars into public health agencies is a useful and efficient use of funds. To better understand the benefits of public health accreditation, a study was conducted on the North Carolina state-based local health department accreditation program. 48 accredited NC LHDs were surveyed on the benefits to accreditation and the study showed that:
    - 46% of LHDs received accreditation preparation funds
    - As a result of being accredited, 8 LHDs reported increase or maintaining funding levels from county government or receiving new funding.
  - After losing 50% of staff after a short time period, a local health department in Missouri was able to build back three-fourths of those jobs, as a result of being accredited under the state based program.

- **Streamline grant application process:**
  - National efforts are currently underway to potentially develop a specific grant application procedure change that acknowledges accredited health departments by accepting the certificate of accreditation in lieu of selected infrastructure components of any federal grant application – providing a “win-win” effect for both the health departments and the funding agencies.

- **Accountability and credibility:**
  - Through accreditation, an LHD can guarantee it has met established national standards to key stakeholders including: elected officials, governing boards (such as ourselves), and taxpayers

- **Awareness of strengths/weaknesses:**
  - National accreditation provides a mechanism to systematically assess agency functions and prioritize areas for improvement, benchmark agency progress with national standards, and receive third-party objective feedback on agency functions.

- **Visibility:**
  - Accreditation provides visibility for the health department, and offers an opportunity to send a very powerful message to the community that the health department is providing quality services.
**Accreditation and Quality Improvement: Increasing Efficiency and Effectiveness (Slide 7)**

**Presenter Instructions:**

- If useful, visit NACCHO’s database of QI stories to find an example of a QI effort in your state and include on the slide: [http://www.naccho.org/topics/infrastructure/accreditation/stories.cfm](http://www.naccho.org/topics/infrastructure/accreditation/stories.cfm).

**Talking Points:**

- Accreditation is not just a status or a stamp of approval. The PHAB program has been designed to serve as a platform for continuous quality improvement as it pushes an agency to continue to improve even after accreditation status has been achieved. With the current economic climate and limited funds and resources, accreditation and quality improvement can make current agency functions more efficient while maintaining the integrity of the work.
- The PHAB beta test sites – a group of 30 HDs that pilot tested the PHAB process and provided feedback - worked on an area for improvement identified through their PHAB self-assessments by implementing a QI project using the Plan-Do-Check-Act framework.
- This was an excellent illustration of how accreditation can create efficiencies in an agency. A few highlights are shown on the slide demonstrating some of the measurable results achieved through this work:
  - Comanche Co. Health Dept (OK) – in working on their community health improvement planning process, they used QI to better engage community partners, in particular by working on meeting effectiveness.
  - Mahoning Co. Health Dept. (OH) increased efficiency in their inspection service related to septic inspections as they improved times from permit until inspections, pleasing the realtors in the community.
  - Miami-Dade Co. Health Dept. (FL) improved customer service in one of their clinics by streaming their appointment process. They are planning on implementing the same process in the rest of their clinics.
  - City of Portland Public Health Division (ME) increased access to care by decreasing the no-show rate for their HIV clinic.
  - Tooele Co. Health Department (UT) improved internal agency operations, documenting PHAB standards by improving the review process for agency policies
  - Tioga Co. Health Department (NY) increased efficiency through their PDCA process by ensuring that 100% of rabies reports were completed within 3 days.
- In a research study conducted in NC to understand the benefits of accreditation, a group of LHDs accredited under the NC state-based accreditation program were surveyed and results revealed that 67% of those LHDs implemented QI efforts after becoming accredited.

**Building the Evidence-Base (Slide 8)**

- Additional research is taking place as well to understand the impact of accreditation and QI implementation in public health. In one recent study that was co-led by Glen Mays and John Wayne focuses on emergency preparedness procedures in North Carolina in 2005 and 2008. The purpose of the study was to “Determine the extent and nature of differences in preparedness between accredited and non-accredited public health agencies in North...
Carolina.” This study presents preliminary evidence that accreditation can help agencies perform better, serve their communities more effectively, and ultimately can help to transform the practice of public health.

- **Accreditation in... (Slide 9)**

  **Presenter Instructions:**

  - LIST specific examples of things your LHD has already done to begin preparing for accreditation and list some next steps for your LHD. Some suggested examples include:
    - Serving as beta test site
    - Provided feedback on PHAB documents
    - Vetting the standards
    - Developing prerequisites

- **Local Governing Entity’s Role in Accreditation (Slide 10)**

  **Talking Points:**

  - So how can we work together? With the buy-in of the LGE, the LHD it governs can ensure that the community it serves is receiving quality services that match a consistent set of national standards. Additional ways LGEs can support [Insert LHD] efforts in achieving accreditation include:
    - Signing a letter of support – In order to be eligible for accreditation, a [Insert LHD] must have a signed letter of support indicating the LGE’s knowledge and support of [Insert LHD] application for accreditation.
    - Supporting [Insert LHD] to become or remain accredited – The accreditation process can be intensive and requires a great deal of staff time and resources. Offer your support by providing administrative buy-in and helping to ensure that the LHD has everything it needs to succeed. Stay connected with the LHO about progress and updates on the process and offer assistance as needed. Assist your health department develop documentation that addresses governance responsibility.
    - Participate in your LHD’s on-site review visit – As part of the accreditation process, [INSERT LHD] will go through an on-site review conducted by PHAB site visitors. The purpose of the site review process is to assess the adequacy of the accreditation materials submitted by the LHD and to determine whether the LHD has met accreditation standards and measures. Site visitors will want to meet with members of the governing entity and interview representatives. Attending the site visit will demonstrate to the site reviewer that the LGE is engaged in the functions of [INSERT LHD].
    - Reading the on-site review report – This report will provide you with valuable information regarding [INSERT LHD] strengths and areas of improvement. By
reviewing the report the LGE will gain an understanding of where [INSERT LHD] falls short of meeting standards and can advise accordingly.

- Celebrating success – it is important to celebrate success once [INSERT LHD] achieves accreditation so that the efforts of the agency are rewarded and recognized, both in small steps and in reaching accredited status.

❖ Let’s get on board! (Slide 11)

Presenter Instructions:

- Discuss next steps in moving forward with accreditation preparation efforts in your LHD. Examples of possible next steps are provided in the talking points below. Only include examples that are relevant to your LGE.

Talking points:

- Accreditation will contribute to creating a high-performing public health system that will make us the healthiest nation.
- PHAB aims to have 60% of the U.S. population served by an accredited agency by the year 2015.
- This is an opportunity for [INSERT LHD] to be visionaries for the future. Through accreditation, we can set an example for our peers and set the path for a healthier nation!
- Let’s get on board before we’re left behind!
- As [INSERT LHD] moves forward with next steps in preparation for accreditation, we’d like to ask you to:
  - Sign a letter of support
  - Budget for costs of accreditation
  - Familiarize yourself with accreditation standards focused on governing boards and health department administration so we can work together to meet these standards.

❖ Additional Resources (Slide 12)

Talking Points:

- The following resources will provide more information on how [INSERT LHD] can pursue national accreditation:

  ❖ [INSERT LOCAL HEALTH OFFICER CONTACT INFORMATION]
  ❖ National Association for Local Boards of Health (NALBOH) – NALBOH is the national organization representing LGEs. They provide training and educational resources to aid LGE members in promoting and protecting the health of their communities. NALBOH supports public health accreditation and works closely with PHAB to get LGEs engaged in the process
  ❖ Public Health Accreditation Board – The PHAB website is an excellent resource to learn more about accreditation and how you can become involved.
  ❖ National Association of County & City Health Officials (NACCHO) – NACCHO’s Accreditation Preparation and Quality Improvement Web site offers a wealth of tools
and resources to engage in accreditation preparation activities along with access to peers already engaged in accreditation preparation efforts.

❖ Thank You! (Slide 13)

Talking Points:

- This concludes the Public Health Accreditation presentation. Are there any questions?
- Thank you all for attending the presentation today! Please take down my contact information in case you have questions or need to get in touch with me in the future.

WRAPPING UP – POST PRESENTATION INSTRUCTIONS

To ensure that NACCHO is providing useful and practical resources to LHOs in informing LGEs regarding these important topics, please take a moment to provide feedback on how these materials can be improved at the following URL: http://www.naccho.org/topics/infrastructure/accreditation/trainings.cfm. Tell us how these materials can be improved under the ‘Informing your Local Governing Entity’ section. Your feedback will be completely anonymous and will be aggregated to assess the usefulness of these materials. Providing timely feedback will allow NACCHO to continuously improve these materials to best serve your needs.

We hope that these materials have been useful in informing your LGE! Feel free to contact Pooja Verma at pverma@naccho.org or (202) 507-4206 with any questions or comments.