

2015-2016 Accreditation Support Initiative (ASI) for Health Departments

FINAL REPORT

1. **Community Description:** Briefly characterize the community(ies) served by your agency (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 Commonwealth Healthcare Corporation (CHCC) serves a community wide variety of community members, we basically serve all people of the CNMI. Under the Corporation umbrella is the only hospital, division of public health and division behavioral health services. We are a USA territory that has a mix population of US citizens and foreign workers. We provide services to the insured, uninsured and underinsured population.

2. **Project Overview:** Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period and the key activities 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.

A significant accomplishment was that of the CHIP completion. During the ASI project period the CHCC and public health service partners engaged in the process of prioritization of activities/strategies to address the health issues/concerns of the CNMI. The process was critical, especially as we began to address how we would address the health challenge/concerns that were brought upon by the completion of the CHA last year. With the facilitation and assistance of Redstar Innovation the CHIP team worked thoroughly on the completion of the plan, with the constant reminder of feasibility of the actions/strategies we were suggestion. The team was able to work through the challenges and agree on aligned efforts to truly build innovative solutions to place into the plan.

3. **Challenges:** Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please **do** include them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

1. Some of the challenges CHCC has encountered during this project period is the rescheduling of the CHIP on site facilitation. The original facilitation was targeted at December 2015, however due to scheduling conflicts the facilitation process was moved to February 2016.

The pre-work continued to move forward and deliverables were still met in a timely manner. Another challenge was the finalization of response and final feedback from the CHIP team. Some of the edits of the priorities/objectives of the CHIP were affected due to the lack of available services/programs to address some of the challenges. The CHIP Team ultimately decided that these areas would be noted as a priority to be addressed with available support/program support.

4. **Facilitators of Success:** Describe factors or strategies that helped to facilitate completion of your agency's work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. **Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.**

Leadership engagement was key to the success to the completion of the CHCC ASI funded work. Both the CEO and Director of Public Health required all Public Health Management to participate and join the CHIP team. They voiced the importance of taking the opportunity at head and running with it, using the CHIP as guidance and additional support to the work plans that they are using. The continued push for PH Accreditation was also crucial, as the staff buy-in increased as they realized this is essential in moving forward.

5. **Impact of ASI:** To what extent do you feel your health department was more prepared for accreditation at the end of the ASI5 project as compared to the beginning? What specifically changed during that time that made your agency more prepared for accreditation? How did the ASI5 contribute to your health department's progress?

I feel that CHCC better understands not just the requirements for Accreditation, but now we have buy-in and support. A specific change was the agreeance and participation in building our internal PH Accreditation roadmap. In the past most management stated that they felt like this would be an extra workload to their already full plate, however they now understand that if we tackle PH Accreditation one step at a time and have different counterparts taking leadership on different initiatives then it is not as burdensome as they once thought. I have also heard some programs mention our on going activities and moving in the direction of Ph Accreditation and asking their grant PO's how they can align some of their objectives and direction.

6. **Lessons Learned:** Please describe your agency's overall lessons learned from participating in the ASI. 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 who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

The overall lesson learned from participating in the ASI is to decide on the objective with the team that is needed for implementation. Having their buy in and support in the beginning of this entire process is crucial, as they will also be able to voice possible concerns, ideas and thoughts on the application and objectives selected.

7. **Funding Impact:** Describe the impact that this funding has had on your agency. How has this funding advanced your agency's accreditation readiness or quality improvement efforts?

The funding has continued the 'fire' for PH Accreditation, as it has funded the completion of the CHIP. Also, it has continued the 'fire' for the culture of quality improvement within the division of public health.

8. **Next Steps and Sustainability:** What are your agency's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?

The first plan we have is finalizing our internal roadmap to accreditation for public health. We are in the initial planning process of this, and this activity will be led by the Quality Coordinator and the Public Health Quality Council. The Quality Coordinator is the lead for getting the CNMI PH Accredited. CHCC leadership support is key. One of the main areas we have noticed as a gap during this process is a proper workforce development plan, therefore we hope that with any future accreditation relation funding we can address this, and other gaps we see in our roadmap to accreditation.