2015-2016 Accreditation Support Initiative (ASI) for Local 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.

Countryside Public Health is a five county fully integrated public health agency in rural southwestern Minnesota. Countryside Public Health serves a population of approximately 44,000 citizens. Countryside Public Health has five local offices with staff located in each office to serve the needs of the population. There are nine hospitals and 13 school districts in our region. Countryside Public Health is governed by a board of County Commissioners and lay board members meeting monthly to determine the organization’s mission and vision.

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.

Countryside Public Health with the assistance of these grant funds was able to initiate collaborative meetings with five hospitals and many community members in four of the five counties. With each meeting Countryside Public Health with our Informatics Technician would develop and share data trends and Community Health Assessment data with the community partners and hospitals to assist in determining Community Health priorities for our hospitals, community, and public health. The work continues with all five hospitals today.

The Montevideo Hospital has partnered with Integrated Strategies out of Minneapolis and selected our local public health organization to work with them on local governance of Community Health Boards. Countryside Public Health also became a member of a Minnesota Department of Health workgroup to create and develop a new CHIP document to be used by all Community Health Boards in the state of Minnesota.

Partnering with a Accountable Care Organization and sharing data trends and attending workgroup meetings to share the Community perspective on health related issues.

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.

The challenges of Countryside Public Health were the number of counties and hospitals to meet with during this six-month time frame. I was not able to meet with Yellow Medicine County in the six-month time frame of this grant application.

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.

The strategies for success were making a concrete work plan with these grant dollars to complete the deliverables assigned in the six month time frame. This concrete time frame with an influx of dollars assisted our organization to be motivated, excited, and engaged in this process.

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?

Countryside Public Health is more prepared to continue to study accreditation and take the next steps of moving forward to apply for accreditation.

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 definite lesson taken from this grant was: with a large geographical area and nine hospitals—it was not realistic to complete all the work in six months to engage the entire five-county population.
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 was key in selection for the Minnesota Department of Health workgroup and creation of a new CHIP document for all Community Health Boards in the state of Minnesota. |

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 general plans for the next 12-24 months is continuing the planning meetings with the Minnesota Department of Health Nurse consultant on PHAB accreditation. |