

## 2013-2014 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.*

North Central District Health Department (NCDHD) serves a frontier area in north-central Nebraska comprised of nine counties and spanning 14,455 square miles, with a population of approximately 46,394 people. The district is heavily focused on agriculture and sparsely populated. NCDHD has a staff of approximately 9 full-time equivalent (FTE) staff members and is governed by a Board of Health.

2. **Project Overview**

*Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed between January 2014-May 2014 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.*

Funding through this project allowed North Central District Health Department (NCDHD) to complete three major deliverables.

One of the major deliverables completed during this project was an accreditation orientation. The Accreditation Coordinator and Executive Director completed the Public Health Accreditation Board online accreditation orientation. Completion of this orientation is required before a department applies for accreditation. In addition, NCDHD staff and Board of Health members participated in accreditation orientation sessions, resulting in a greater awareness and better understanding of the purpose and benefits of accreditation, the department's current status in the accreditation process, their roles and responsibilities in the accreditation process, and what to expect moving forward in the accreditation process.

Another major deliverable completed during this project was the creation of a department policy/procedure review process. Completion of this deliverable involved identifying and documenting written department policies and procedures, as well as capturing daily operational activities for which development of a formal, written policy or procedure was needed. Staff ownership and a calendar timeline for annual review were established for each department policy or procedure. A written process was established to outline staff roles and responsibilities, as well as describe steps that will be taken to ensure all department policies and procedures are consistently reviewed at least annually and revised, when necessary.

The final major deliverable completed during this project was the completion of a written self-

study capturing results of the department accreditation readiness assessment. Completion of this deliverable involved a thorough review of the Public Health Accreditation Board (PHAB) Standards and Measures. Using the Standards and Measures, along with multiple other tools and resources, a written self-study was created to document department strengths, opportunities for improvement, and plans for addressing gaps relative to accreditation readiness. This self-study also includes a timeline mapped out to guide accreditation readiness activities the department will undertake during the next 12 to 18 months.

### 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.*

No major challenges occurred as the department worked to complete the project deliverables. One issue identified as both a challenge and a benefit is the size of the department. The entire accreditation process is a significant undertaking. With only nine staff members in the department, personnel resources are limited. Therefore, it is challenging to create a balance that provides for devoting time and resources to accreditation work while also managing existing staff workload. Staff size was also identified as a benefit, and was ultimately listed as a department strength, as it allows everyone on the staff to be engaged and involved in accreditation work, results in a more easily managed scope of work, reduces time needed for training and staff development, and produces a work environment where it is significantly easier for all staff members to remain aware of current work efforts and how that information can be best used in achieving accreditation.

### 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.*

As mentioned above, staff size served as a facilitator of success. Having a smaller staff allows everyone on the staff to be engaged and involved in accreditation work, results in a more easily managed scope of work, reduces time needed for training and development, and produces a work environment where it is significantly easier for all staff members to remain aware of current work efforts and how that information can be best used in achieving accreditation.

The project funding itself creates a facilitator of success in that project deadlines ensure adherence to project schedule and completion of project deliverables. Without project funding and deadlines, accreditation work can often receive less priority and fewer resources, even in a department with established commitment to the accreditation process.

## 5. **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.*

Everyone I have come in contact with who is working on performance management, quality improvement, and accreditation efforts is more than willing to share information and is extremely interested in collaboration. During participation in one of the sessions at the PHIT training, my workgroup came up with a description that I believe fits perfectly. It started with the saying, "we are all in the same boat". After a little further discussion, we tweaked that to reflect the following: we are NOT all in the same boat...some of us are traveling in row boats, some in canoes, some in sail boats, some in motor boats, etc., but we are all navigating the same river. Some of us are further ahead in the river than others, and some of us may hit a sand bar occasionally – whatever the case, we can all benefit by sharing resources and helping each other get to our destination.

The sheer volume of information and resources out there for accreditation-related work can be overwhelming. This can be a good thing and a bad thing! It can be very difficult at times to figure out where to go for the best examples. Utilize the opportunity to develop networking relationships whenever possible.

## 6. **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?*

Prior to this project, accreditation-related activities undertaken by the department followed a more isolated approach, without a cohesive plan or clear idea of how these activities fit into the overall accreditation process. Funding provided through this project has allowed the department to take a step back and look at accreditation from a more global standpoint, encompassing all domains from a broader perspective. It has allowed the department to allocate resources and staff time toward efforts to assess where the department currently stands, identify all components that need to be addressed, develop a clear vision, and create a structured plan that will lay a strong foundation for proceeding with accreditation preparation in an organized, effective manner. In addition, the department has achieved staff and Board of Health involvement and engagement in the accreditation process.

One of the greatest department strengths coming into this project was leadership commitment to the accreditation process. However, funding is limited to rural local health departments and infrastructure dollars cannot solely support accreditation readiness work. That department leadership commitment, paired with the work made possible by funding through this project, has provided the necessary focus and direction that will truly allow the department to intentionally move forward with accomplishing accreditation activities.

## 7. **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?*

North Central District Health Department (NCDHD) is excited to move forward with implementation of the accreditation timeline outlined in the department accreditation readiness self-study assessment results. The Executive Director and Accreditation Coordinator hold overall responsibility for accreditation readiness activities, and will continue to engage all staff members in the accreditation process, beginning with formal activation of the Accreditation Team in June 2014.

The department will continue to seek out funding opportunities to support accreditation activities, and unrestricted department funds will be utilized to supplement and continue the process of preparing for accreditation.