PUBLIC HEALTH ACCREDITATION: A JOURNEY FOR EVERYONE



April Harris MPH CHES Three Rivers District Health Department (Kentucky)



- Why pursue public health accreditation?
- TRDHD's Journey
- Accreditation and QI
- NACCHO Resources



Why Pursue Accreditation

Accreditation provides public notification that a health department meets standards of quality set forth by the accrediting agency (the Public Health Accreditation Board).

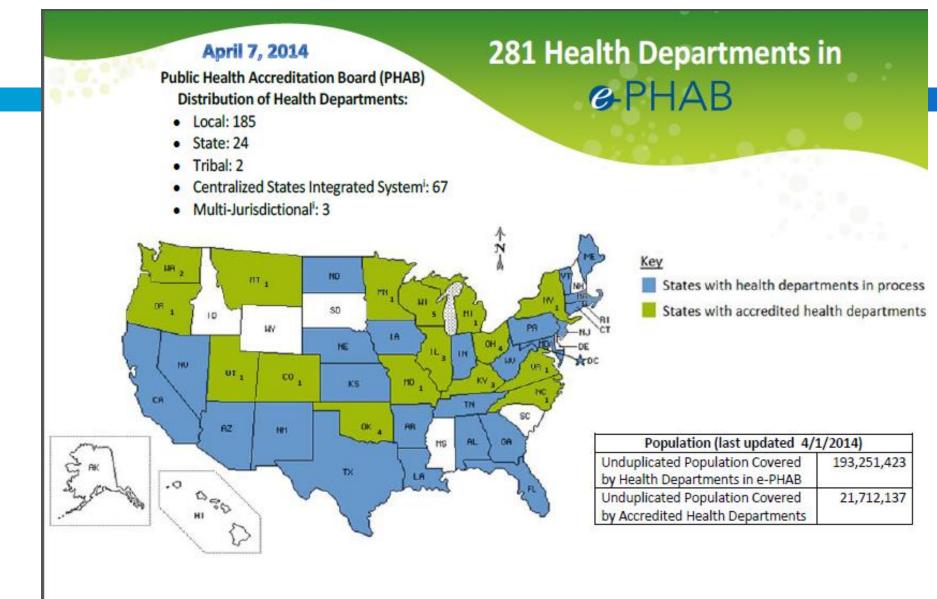


Who is PHAB?

The Public Health Accreditation Board (PHAB) is the accrediting agency for state, local, Tribal, and territorial health departments.

PHAB's Goal: The goal of the accreditation program is to improve and protect the health of every community by advancing the quality and performance of public health departments (state, local, Tribal, territorial).

Visit <u>www.phaboard.org</u> for details about PHAB's voluntary national accreditation process and fees.



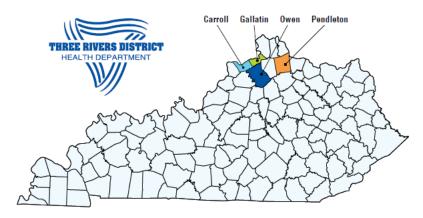
Background

District Health Department

45,000

65 Employees

Board of Health (5)



Accreditation Basics

- The value of accreditation
 - The state of public health
 - No Outcomes
 - Little Accountability
- Necessary buy-in
 - Staff
 - Governing Body
 - Community
- □ Tell your story
 - It won't be a fairy tale
 - It is the work you have been doing!



PHAB's Process

- Pre-application
 - Statement of Intent
- Application
 - In-Person Training
- Document Selection and Submission
 - e-PHAB
 - 12 months
- Site Visit
- Accreditation Decision
- Reports
- Reaccreditation



Role of the Board of Health

- DOMAIN 12
- Public Health Policies
- Communication
- Strategic Plan



Role of the Community

- DOMAIN 4
- Partnerships
- Communications
- Grants



Three River's Accreditation Process

2007: Assessments began

2008: Assessments continued, Community Partnerships formed

2009: Strategic planning complete, vision/mission and Quality Improvement training for staff

2010: Community Health Assessment complete

2011: Accreditation Coordinator appointed and Community Health Improvement Plan complete, Board of Health trainings

2012: Official Site Visit

2013: Accreditation Awarded \bigcirc

Three Pre-Requisites



Accreditation Basics

Educate Yourself

- You will be the subject matter expert
- Keep an open mind
- Stay motivated

Educate Others

Change is scary

"If you tell me, I will listen. If you show me, I will see. But if you let me experience, I will learn."

Lao-Tse, 5th-century BC philosopher

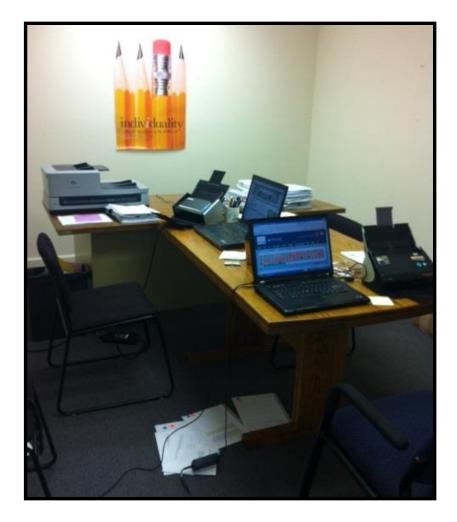
Making it Work

Leadership Support Building My Team □ Having a Timeline Utilizing Accreditation **Networks** Look for What You Have



Making it Work

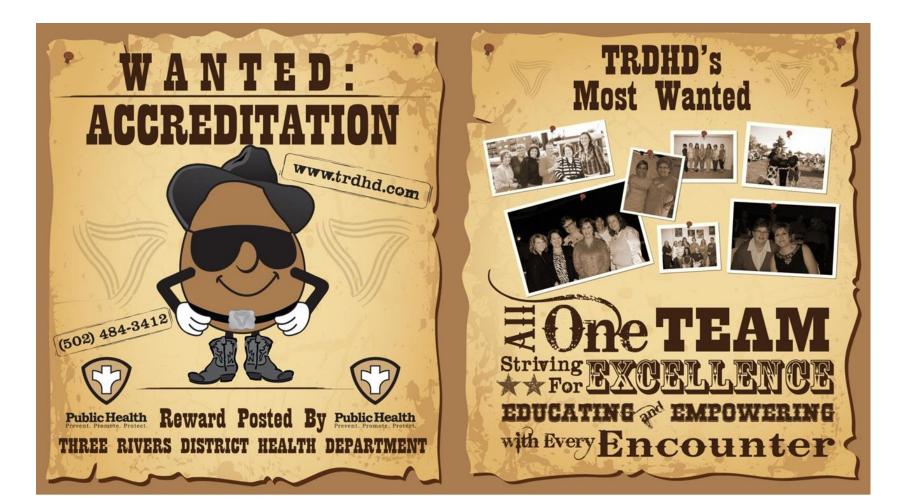


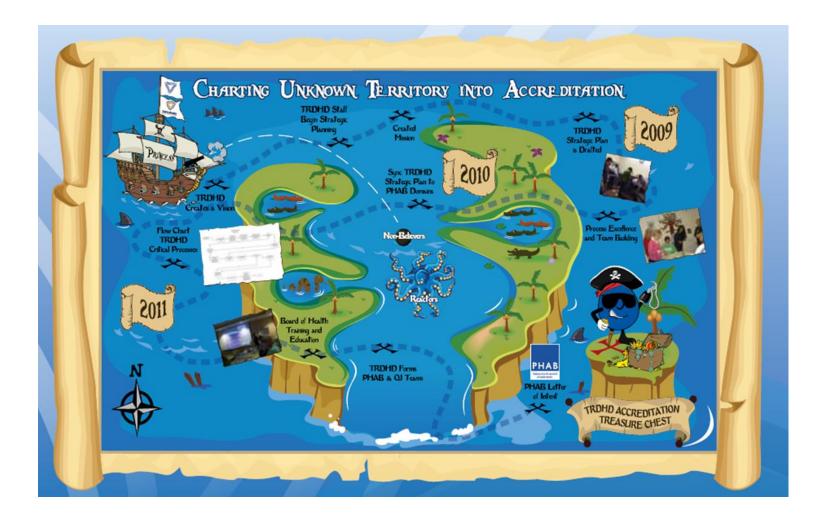












Benefits

- Board of Health involvement
- Community support
- Grant money
- Employee morale
- Public health identity
- Culture of quality improvement
- Physical & infrastructure clean-up

Lessons Learned

- Don't "start" with Domain 1
- Don't "start" until you know what gaps exist
- Document Description Template
 WHO, WHAT, WHEN, WHERE & WHY
- Share & Learn from Others
- Hurry Up & Wait
- Keep the Momentum

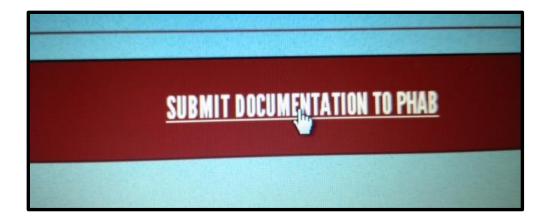
Lessons Learned

- Move towards electronic documentation maintenance
- Communicate, communicate, communicate
- Don't focus on the end product, focus on the process



Documentation

- More is not necessarily better
 - **Think A-Z**
- Upload what they ask for
- Be direct
- Have a wide array of documents



Documentation

🗆 e-PHAB

Required Documentation 2.

Documented distribution of health profiles to public health system partners, community groups and key stakeholders such as governing entities or community advisory groups, via email and websites, etc.

Guidance:

The Tribal or local health department must provide documentation of the distribution of health profiles to public health system partners, community groups, other Tribal and local health departments, and key stakeholders, such as governing entities or community advisory groups. This may include partners, such as governing entities and elected/appointed officials, community based organizations, civic groups and any others who receive services, help in the delivery of services or support public health services. Distribution may be documented by a mailing list, email list-serve, posting on the web site, press releases, meeting minutes documenting distribution of the profile, presentations and inserts or flyers.

Document 1.4.2 L.2.1	Email Distribution		April Harris 02-06-2012	
Document 1.4.2 L.2.2	TRDHD Website	The documentation provided is email distribution of the health profile		

DESCRIPTIONS

TITLES

Mock Site Visit

Practice makes perfect!

- Internal with Key Staff
- External with Public Health Staff
 - 3 Accreditation Coordinators
 - Internal Policy Analyst DPH (former employee)
 - Preparedness Manager (PPHR recognition)
 - - Ready to Go
 - Needs some TLC
 - Start Over

Final Review with Director

Mock Site Visit

TRDHD INTERNAL SITE VISIT REPORT

MEASURE:

REVIEWER:

+

•			
REQUIRED DOCUMENTATION:	SCORE:	COMMENTS: Explain what was missing or why it does not meet the measure. (must have comment if not "Fully Demonstrated)	HOW TO IMPROVE: Describe very specifically on what needs to be improved upon. (must have comment if not "Fully Demonstrated)
1.)	Not Demonstrated Slightly Demonstrated Largely Demonstrated Fully Demonstrated		

_____This piece of documentation is ready to be submitted to PHAB.

_____This piece of documentation will be ready to be submitted upon making the suggested changes.

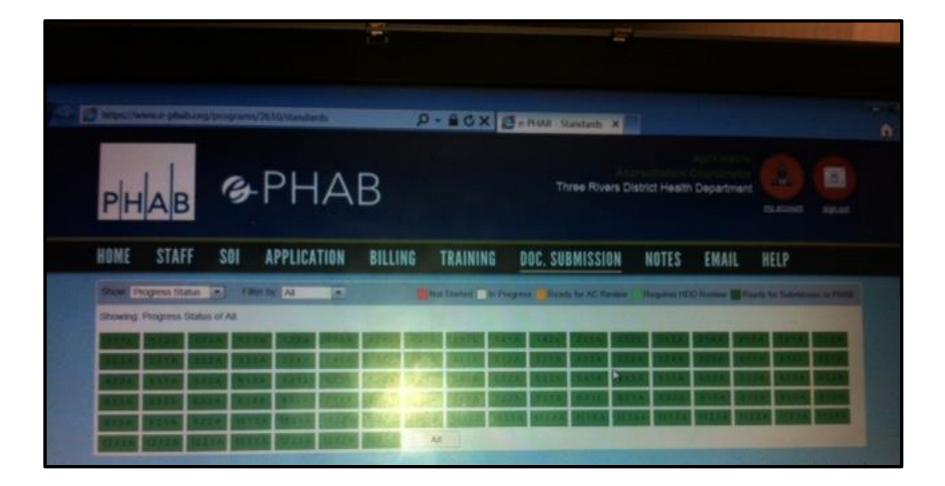
_____This piece of documentation should not be submitted to PHAB and a new example should be given.

Mock Site Visit

- One and a half days
- De-briefed after each day
- Learning experience for everyone
- Would have been great for partners and board of health members







Site Visit

- Prepare your Staff
 - Brag on Your Successes!
- Speak with your Board of Health
 - Breakfast Briefing
- Engage your Community Partners
 - Individual Visits
- Do a Visual Walk Through

Site Visit

On-site meetings

- Community: Specific One Hour Session
- Board of Health: Specific One Hour Session
- Domain interviews (BOH & Community Partners can be involved)
- Discussion of documentation
- Identify a recorder

Our Site Visit



Three Rivers District Health Department

Site Visit Agenda December 12 - 13, 2012

Day 1: Wednesday, December 12

Site Visit Team

April Harris

Dr. Georgia Heise

Accreditation Team

Site Visit Team

Site Visit Team

Location: Conference Room

Dr. Georgia Heise/April Harris

Location: Conference Room

Members of Management Team and

Representatives of Health Department

8:30 AM	Entrance Conference
	*Introductions
	* Purpose and Process for Visit
	*Overview of District and County
	Departments: Governance and
	Operations
	(Breakfast Provided)

9:00-9:15 Walk Through

CHA and CHIP 9:15 (Standards 1.1 and 5.2) Strategic Plan (Standard 5.3)

- 10:00 Break
- Concurrent Domain Sessions 10:15 Domain 1: (11 measures



Representatives of Health Department Location: Dr. Heise's Office

Domain 2: (15 measures)

Domain 11: (11 measures)

11:30 Lunch and Executive Session (Lunch Provided)



Representatives of Health Department Location: Conference Room

Site Visit Team Location: Conference Room 12:30 PM Meeting with Governing Entity

1:30 Concurrent Domain Sessions Domain 12 (7 measures)

Domain 5 (12measures)

Domain 6 (10 measures)

2:30 Break

2:45 Concurrent Domain Sessions Domain 10 (6 Measures) Domain 9 (7 Measures)

Domain 3 (7Measures)

3:45 Follow up on Domains 2 & 6, If needed

4:15 Adjourn

5:00 Executive Session (at Hotel)

Site Visit Team Board of Health Members Dr. Heise/April Harris Location: Conference Room

Representatives of Health Department Location: Resource Room

Representatives of Health Department Location: Conference Room

Representatives of Health Department Location: Dr. Heise's Office



Representatives of Health Department Location: Conference Room

Representative(s) of Health Department Location: Resource Room

Site Visit Team Representative(s) of Health Department Location: Conference Room

Site Visit Team

Our Site Visit

	Day 2: Thursday, Location: Gallatin Cou	
8:00 AM	Leave for GCHC from District Office	
8:30 B	reakfast at GCHC	
9:00 W	/alk Through	
9:15	Executive Session *Will let Department know if we have any final follow up on Domains	Site Visit Team
9:30	Concurrent Sessions	
	Domain 8 (3 measures)	Representatives of Health Department Location: GCHC Office
	Domain 4 (4 measures)	Representatives of Health Department Location: GCHC Office
	Domain 7 (6 measures)	Representatives of Health Department Location: GCHC Conference Room
10:00	Meeting with Community Partners	Site Visit Team Representatives of Communities Location: GCHC Conference Room
11:00	Break	
11:15	Meeting with Director of Health Department	Site Visit Team Dr. Heise/April Harris Location: Conference Room
12:15 PM	Lunch, Executive Session and Report Development *Any final follow up on Domain sessions	Site Visit Team Representative(s) of Health Department, if needed Location: GCHC Conference Room
1:15	Exit Interview	Site Visit Team Dr. Heise/April Harris Location: GCHC Conference Room
1:45	Adjourn	

Site Visit Report

- Three Strengths
- Three Opportunities for Improvement
- Overall Impression of the Health Department
- Overall Domain Comments
- Feedback for each Measure:
 - Conformity
 - Areas of Excellence
 - Opportunities for Improvement

Site Visit Report

1.1.1 L: Participate in or conduct a Tribal/local partnership for the development of a comprehensive community health assessment of the population served by the health department
Score : Fully Demonstrated V
Comments
Conformity:
The LHD has provided sufficient documentation to demonstrate that it has formed a community based partnership and successfully collaborated with its partners, using the MAPP process, to conduct its Community Health Assessment that includes substantive contributions from community members.
Areas of Excellence:
The LHD demonstrates considerable competence in implementing the MAPP process.
Opportunities for Improvement:
An opportunity for improvement would be to ensure that the LHD captures specific comments from its partners in meeting minutes to establish a written record of input from the community.

Site Visit Report: Conformity

• 11.1.6 A: Use information systems that support the health department mission and workforce by providing infrastructure for data collection/analysis, program management, and communication
Score : Fully Demonstrated V
Comments
Conformity:
Two examples of utilizing software, one for the WIC program and another, Catalyst, enable staff to enter program plans and utilization information.
As required, hardware and software inventories were provided.
~ 1.1.3 A:
Ensure that the community health assessment is accessible to agencies, organizations, and the general public
Score : Fully Demonstrated V
Comments
Conformity:
The LHD documents that the CHA report was distributed to community partners and made available to members of the public through multiple means of communication which exceeded what was required to fully demonstrate this measure.

Site Visit Report: Areas of Excellence

Areas of Excellence:

The LHD's use of the MAPP process is an example of a promising practice that should be emulated by other LHDs.

Areas of Excellence:

The LHD showed commitment and sensitivity in successfully negotiating policy changes to restrict tobacco access, doing so in a part of the country where tobacco is an important part of the area's history and culture.

Areas of Excellence:

The county boards of health are required by state statute to meet annually. Under Dr. Heise's leadership, the local boards meet quarterly. The additional meetings are used to educate the boards on public health and public health matters in their communities.

Site Visit Report: Opportunities for Improvement

Opportunities for Improvement:

The Three Rivers Health District is recognized as an innovator and leader among local health departments in Kentucky by the other health departments and the state health department. Incorporating more technology into the daily operations in areas such as inspections, an electronic medical record for clinical programs, and utilizing social media in outreach programs is a natural direction to pursue.

Opportunities for Improvement:

The Record of Complaint form could be used as a quick summary of the complaint and outcome that could be useful for review and for sharing with others (e.g., reporting party) rather than having to review all follow up reports as well in order to get a full picture of the complaint.

Site Visitor

- Two SV Team, One Team Chair
- Weekly Phone Calls
- Inter-rater Reliability
- What is helpful from a Site Visitor perspective?
 - Documentation Descriptions
 - Highlights
 - The Best Two Examples





Next Steps

- Annual Report
 - Significant Changes
 - Address Areas of
 - Improvement
- Maintain Culture
- □ Version 1.5

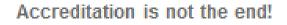


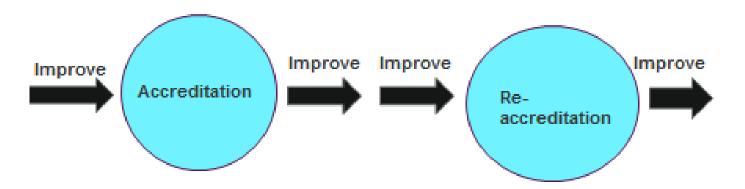
Common Questions

- □ How much did it cost?
- How much time did it take as the Accreditation Coordinator?
- □ What's going to change with PHAB?
- What would you do differently?

Accreditation and QI







Improving the public's health through continuous quality improvement



National Accreditation Partners



Robert Wood Johnson Foundation

Centers for Disease Control and Prevention





National Indian Health Board





National Association of Local Boards of Health



Public Health Foundation







National Support for Accreditation

- National Public Health Improvement Initiative (NPHIII)
- Strengthening the Community of Practice in Public Health (COPPHI)
- NACCHO's Accreditation Support Initiative (funded by OSTLTS at CDC)
- NACCHO's Accreditation Preparation and Quality Improvement work
- NACCHO's Accreditation Preparation: Community Health Assessment and Community Health Improvement Plan Project
- ASTHO's support for state health departments
- Public Health Foundation's work on Performance Management/Quality Improvement





NACCHO Resources

Specific NACCHO resources include:

- Example Documentation Repository
- Podcasts/PowerPoint presentations for local governing entities
- Roadmap to an Organizational Culture of QI

All NACCHO resources can be found at <u>www.naccho.org/accreditation</u>. If you cannot find a particular resource, please e-mail <u>accreditprep@naccho.org</u>

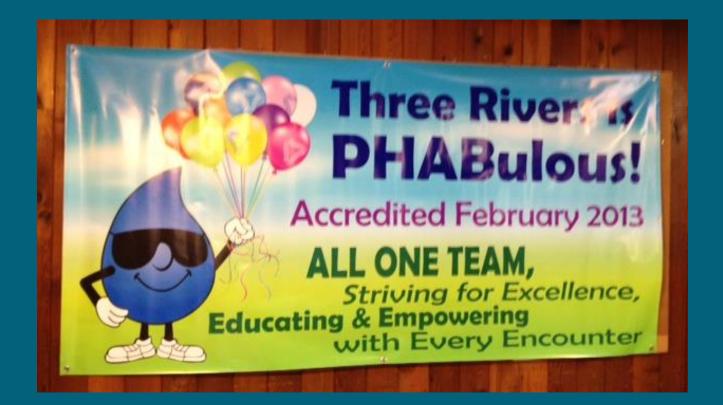




NACCHO's Speakers Bureau of Accreditation Champions

This presentation was part of NACCHO's Speakers Bureau of Accreditation Champions. The views that I have expressed today do not necessarily reflect NACCHO's views.

QUESTIONS?



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