



# Ventura County Public Health

## ACCREDITATION PROCESS & TIPS



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Public Health Director*



VENTURA COUNTY  
HEALTH CARE AGENCY



CARING FOR INDIVIDUALS, FAMILIES AND COMMUNITIES

2 Hospitals

45 Ambulatory Care Medical Clinics

Medical Examiner

VC Health Care Plan

Behavior Health

Public Health



# 12 Domains

1. Conduct Assessment Activities
2. Investigate Health Problems
3. Inform and Educate about Public Health
4. Engage with the Public to Solve Public Health Problems
5. Develop public health policies and plans
6. Enforce public health laws and regulations
7. Promote strategies to improve access to health care services
8. Maintain a competent workforce
9. Evaluate and continuously improve processes, programs, and interventions
10. Contribute to and apply the evidence base for public health
11. Maintain administrative and management capacity
12. Maintain capacity to engage the public health governing entity

*System Management*





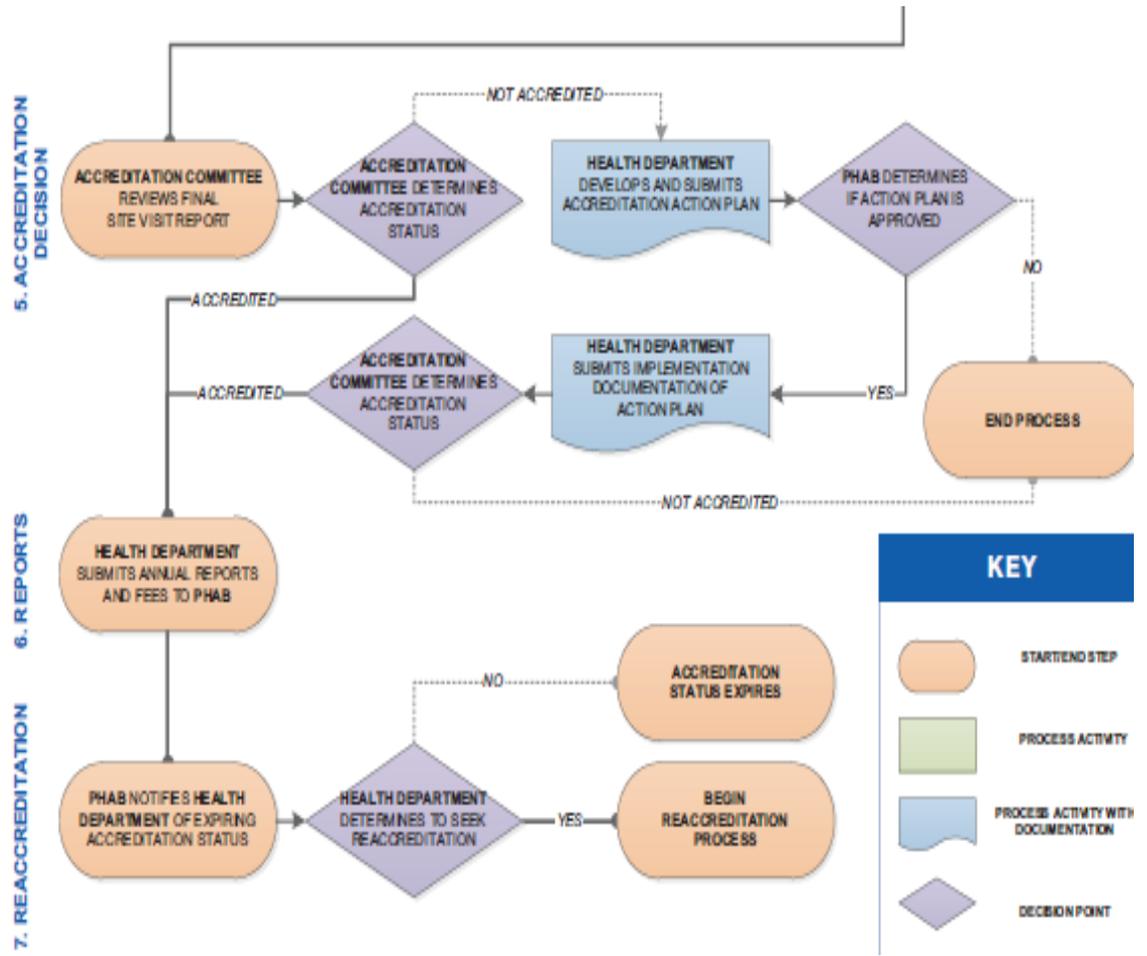
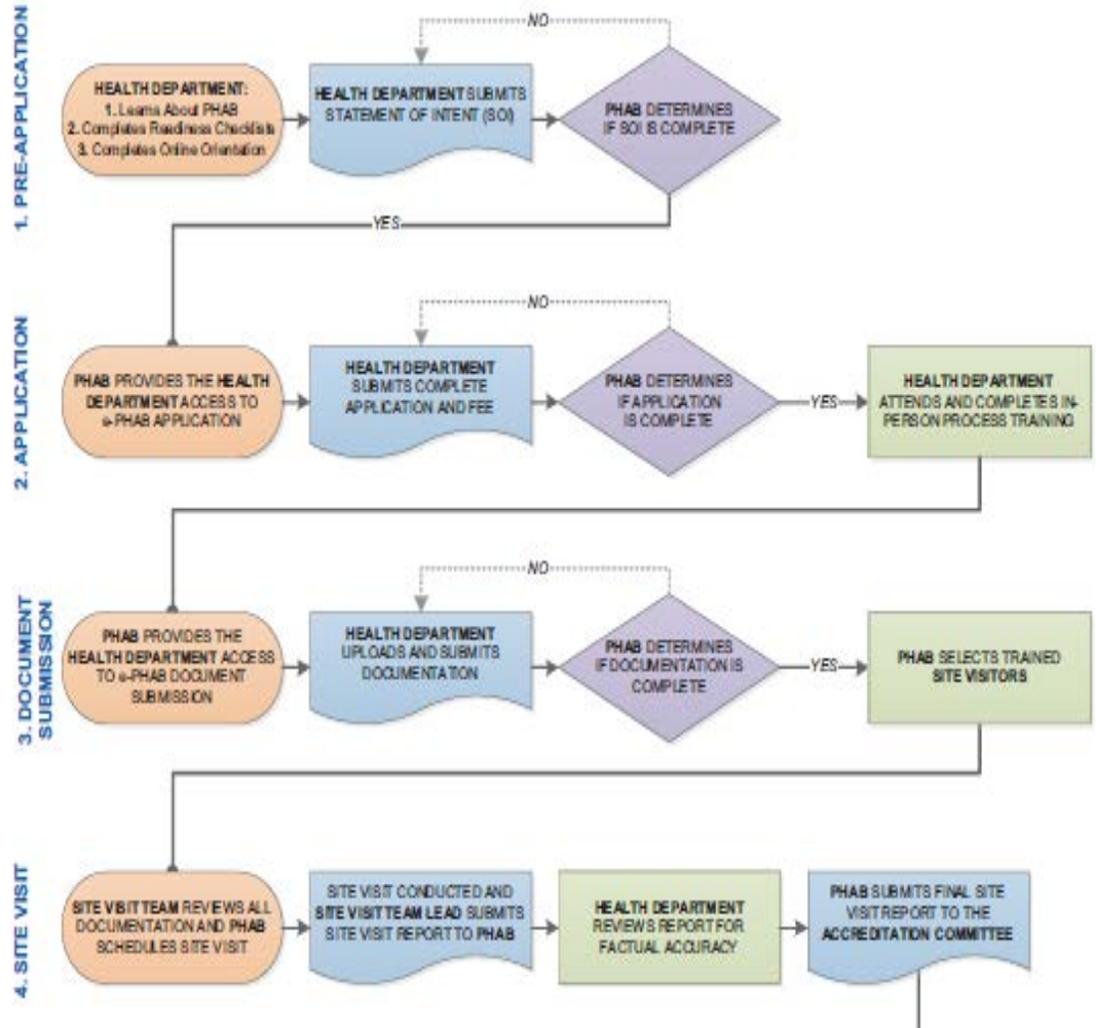
# Domains/Standards/Measures & Documentation

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## Example:

- Domain 4 – Engage with the community to identify and address health problems
- Domain 4 includes 2 Standards
- Within each Standard there are Measures/Purpose/Significance
- Required Documentation

# PHAB ACCREDITATION PROCESS MAP





# Our Accreditation Steps & Timeline

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1. Pre-application (gearing up & staff buy in) Early 2012
2. Application (w/CHA, CHIP & SP) November 2012
3. Documentation Submission November 2013
4. Site Visit - April 2014
5. Site Visit Report – May 2014
5. PHAB Decision (June 2014)
6. Annual Reports on progress
7. Re-Accreditation (June 2019)



# Gearing Up...

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Identified Executive Team (PHAB Steering Committee)

Identified PHAB Coordinator (Administrative Assistant)

Refined CHA, CHIP and SP

Transformed QI process into a Performance Management System

Reviewed 12 Domains and chose at least 2 management staff to lead each Domain (Domain Leads)



# Staff Buy In

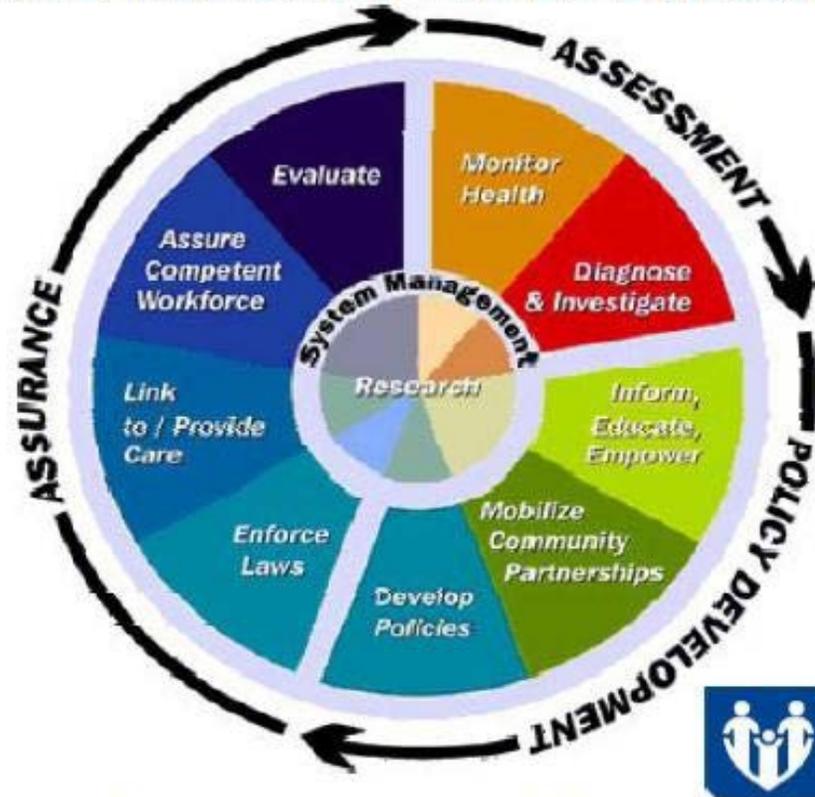
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Early Intro of Staff to PH 10 Essential Services and 3 Core Functions

Oriented staff to PHAB purpose via emails, mtgs and videos

Competition for Design of Accreditation Logo

# Public Health Accreditation



## Project Improve and Inspire (PI<sup>2</sup>)

# Applied: November, 14 2012

[STAFF](#) [COMMITTEE](#) [SOIs](#) [APPLICATIONS](#) **[CANDIDATES](#)** [DECISION](#) [ACCREDITED](#) [ACTION](#) [ARCHIVE](#) [Q&A](#)

[HOME](#) [STAFF](#) [SOI](#) [APPLICATION](#) [BILLING](#) [TRAINING](#) **[DOC. SUBMISSION](#)** [GROUPS](#) [NOTES](#) [EMAIL](#) [HELP](#)

Show: Progress Status Filter by: All

Not Started In Progress Ready for AC Review Requires HDD Review Ready for Submission to PHAB

Showing: Progress Status of All.

1.1.1L	1.1.2L	1.1.3A	1.2.1A	1.2.2A	1.2.3A	1.2.4L	1.3.1A	1.3.2L	1.4.1A	1.4.2L	2.1.1A	2.1.2L	2.1.3A	2.1.4A	2.1.5A	2.2.1A	2.2.2A
2.2.3A	2.3.1A	2.3.2A	2.3.3A	2.3.4A	2.4.1A	2.4.2A	2.4.3A	3.1.1A	3.1.2A	3.2.1A	3.2.2A	3.2.3A	3.2.4A	3.2.5A	4.1.1A	4.1.2L	4.2.1A
4.2.2A	5.1.1A	5.1.2A	5.1.3A	5.2.1L	5.2.2L	5.2.3A	5.2.4A	5.3.1A	5.3.2A	5.3.3A	5.4.1A	5.4.2A	6.1.1A	6.1.2A	6.2.1A	6.2.2A	6.2.3A
6.3.1A	6.3.2A	6.3.3A	6.3.4A	6.3.5A	7.1.1A	7.1.2A	7.1.3A	7.2.1A	7.2.2A	7.2.3A	8.1.1L	8.2.1A	8.2.2A	9.1.1A	9.1.2A	9.1.3A	9.1.4A
9.1.5A	9.2.1A	9.2.2A	10.1.1A	10.2.1A	10.2.2A	10.2.3A	11.1.1A	11.1.2A	11.1.3A	11.1.4A	11.1.5A	11.1.6A	11.1.7A	11.2.1A	11.2.2A	11.2.3A	11.2.4A
12.1.1A	12.1.2A	12.2.1A	12.2.2A	12.3.1A	12.3.2A	12.3.3A	<a href="#">All</a>										

*Note: Health Department has one year from application date to submit all required documentation*

# Documentation Upload Progress

Show:  Filter by:

Not Started 
  In Progress 
  Ready for AC Review 
  Requires HDD Review 
  Ready for Submission to PHAB

Showing: Progress Status of All.

1.1.1 L	1.1.2 L	1.1.3 A	1.2.1 A	1.2.2 A	1.2.3 A	1.2.4 L	1.3.1 A	1.3.2 L	1.4.1 A	1.4.2 L	2.1.1 A	2.1.2 L	2.1.3 A	2.1.4 A	2.1.5 A	2.2.1 A	2.2.2 A
2.2.3 A	2.3.1 A	2.3.2 A	2.3.3 A	2.3.4 A	2.4.1 A	2.4.2 A	2.4.3 A	3.1.1 A	3.1.2 A	3.2.1 A	3.2.2 A	3.2.3 A	3.2.4 A	3.2.5 A	4.1.1 A	4.1.2 L	4.2.1 A
4.2.2 A	5.1.1 A	5.1.2 A	5.1.3 A	5.2.1 L	5.2.2 L	5.2.3 A	5.2.4 A	5.3.1 A	5.3.2 A	5.3.3 A	5.4.1 A	5.4.2 A	6.1.1 A	6.1.2 A	6.2.1 A	6.2.2 A	6.2.3 A
6.3.1 A	6.3.2 A	6.3.3 A	6.3.4 A	6.3.5 A	7.1.1 A	7.1.2 A	7.1.3 A	7.2.1 A	7.2.2 A	7.2.3 A	8.1.1 L	8.2.1 A	8.2.2 A	9.1.1 A	9.1.2 A	9.1.3 A	9.1.4 A
9.1.5 A	9.2.1 A	9.2.2 A	10.1.1 A	10.2.1 A	10.2.2 A	10.2.3 A	11.1.1 A	11.1.2 A	11.1.3 A	11.1.4 A	11.1.5 A	11.1.6 A	11.1.7 A	11.2.1 A	11.2.2 A	11.2.3 A	11.2.4 A
12.1.1 A	12.1.2 A	12.2.1 A	12.2.2 A	12.3.1 A	12.3.2 A	12.3.3 A	All										

Edit Domain Staff Assignmen



# Documents Submitted: November 11, 2013



Cerri Mansfield  
Accreditation Coordinator  
Ventura County Public Health



my account

sign out

HOME STAFF SOI APPLICATION BILLING TRAINING DOC. SUBMISSION NOTES EMAIL HELP

Show:  Filter by:

Reviewed by PHAB

Showing: Progress Status of All.

1.1.1 L	1.1.2 L	1.1.3 A	1.2.1 A	1.2.2 A	1.2.3 A	1.2.4 L	1.3.1 A	1.3.2 L	1.4.1 A	1.4.2 L	2.1.1 A	2.1.2 L	2.1.3 A	2.1.4 A	2.1.5 A	2.2.1 A	2.2.2 A
2.2.3 A	2.3.1 A	2.3.2 A	2.3.3 A	2.3.4 A	2.4.1 A	2.4.2 A	2.4.3 A	3.1.1 A	3.1.2 A	3.2.1 A	3.2.2 A	3.2.3 A	3.2.4 A	3.2.5 A	4.1.1 A	4.1.2 L	4.2.1 A
4.2.2 A	5.1.1 A	5.1.2 A	5.1.3 A	5.2.1 L	5.2.2 L	5.2.3 A	5.2.4 A	5.3.1 A	5.3.2 A	5.3.3 A	5.4.1 A	5.4.2 A	6.1.1 A	6.1.2 A	6.2.1 A	6.2.2 A	6.2.3 A
6.3.1 A	6.3.2 A	6.3.3 A	6.3.4 A	6.3.5 A	7.1.1 A	7.1.2 A	7.1.3 A	7.2.1 A	7.2.2 A	7.2.3 A	8.1.1 L	8.2.1 A	8.2.2 A	9.1.1 A	9.1.2 A	9.1.3 A	9.1.4 A
9.1.5 A	9.2.1 A	9.2.2 A	10.1.1 A	10.2.1 A	10.2.2 A	10.2.3 A	11.1.1 A	11.1.2 A	11.1.3 A	11.1.4 A	11.1.5 A	11.1.6 A	11.1.7 A	11.2.1 A	11.2.2 A	11.2.3 A	11.2.4 A
12.1.1 A	12.1.2 A	12.2.1 A	12.2.2 A	12.3.1 A	12.3.2 A	12.3.3 A	<input type="button" value="All"/>										

# Key Documents

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## 1. Pre-Requisites

- CHA
- CHIP
- SP

## 2. Plans

- Response plans
- Communication plan(s)
- All Hazards Emergency Operations Plan
- Workforce Devt. plan
- QI/Perf. Excellence Plan

## 3. Expectations

- Performance management
- Financial management
- Board support
- Community Partner involvement



# Documentation Tips

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- Department Logo on ALL documents
- Narrative required for ALL documents submitted
- Dates required on ALL final version documents (within 5 years)
- If documents used for another domain: provide justification
- Documents must be “living” – in place, revision dates, etc



# Site Visit Purpose

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- To provide context to the documentation submitted
- Verify the accuracy of documentation
- Seek answers to questions re. conformity with the standards
- Provide opportunity for discussion and further explanation



# PHAB Site Visit Structure

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- 3 Site Visitors from other states

onsite for 2 days

Concurrent meetings with Domain Leads and Steering Committee Member

Meeting with Partner Agencies and Board of Supervisors

Exit Meeting

- ✓ 3 strengths
- ✓ 3 areas for improvement



# Post Site Visit

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Site Visit Report sent to Director

Review for factual accuracy - 30 days to respond

PHAB Committee reviews final site visit report which includes strengths and opportunities

Health Department notified if Accredited

Accreditation is for 5 years

Annual Reports submitted with annual fee



# Suggestions

Identify who will be on the “PHAB Steering Committee” (Exec Team)

Identify a Champion that will oversee the entire process

Assign Management to Domains

- They can pull a team of other staff together if needed to find documents to satisfy measure.

Assure you have a PHAB Coordinator that is organized and efficient

- Schedules regular meetings with Steering Committee, Domain Leads
- Standardizes all documents, including cover letters (branding, dates)
- Places “call outs” in documents
- Keeps timelines



# Tips...

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Meet with partners and Board members prior to site visit

Include partners to site visit

Have close relationships (or at least be able to demonstrate a strong partnership) with Environmental Health, EMS, EPO and Animal Services

Include all of the above in CHA, CHIP and SP process

Assure a strong PMS (Performance Management System) is in place

Prioritize cultural competency in all work across public health programs

Assure appropriate signage to include access for disabled population



# PHAB Version 1.0 vs Version 1.5

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Version 1.0 prior to July 2014

Version 1.5 with slight modifications to the measures and more focus on Health Equity and community involvement

# Received Official Accreditation: June 18, 2014



