

Achieving Excellence in Public Health Through Accreditation



*Advancing
public health
performance*

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CCLHO/HOAC
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Disclosure Statement

- Board member of the Public Health Accreditation Board (PHAB).
- Otherwise, I have NO financial relationships with commercial interests in the 12-month period that impact the content of the CME presentation.

Session Objectives

- Provide an update of the national public health accreditation program.
- Discuss future plans and initiatives for national accreditation.
- Describe some early findings on the results and benefits of accreditation.
- Describe strategies for supporting excellence in public health department practice through the accreditation process.

Acknowledgement

- Thanks Kaye Bender for this slide presentation



PHAB, President/CEO



National Accreditation Program Update



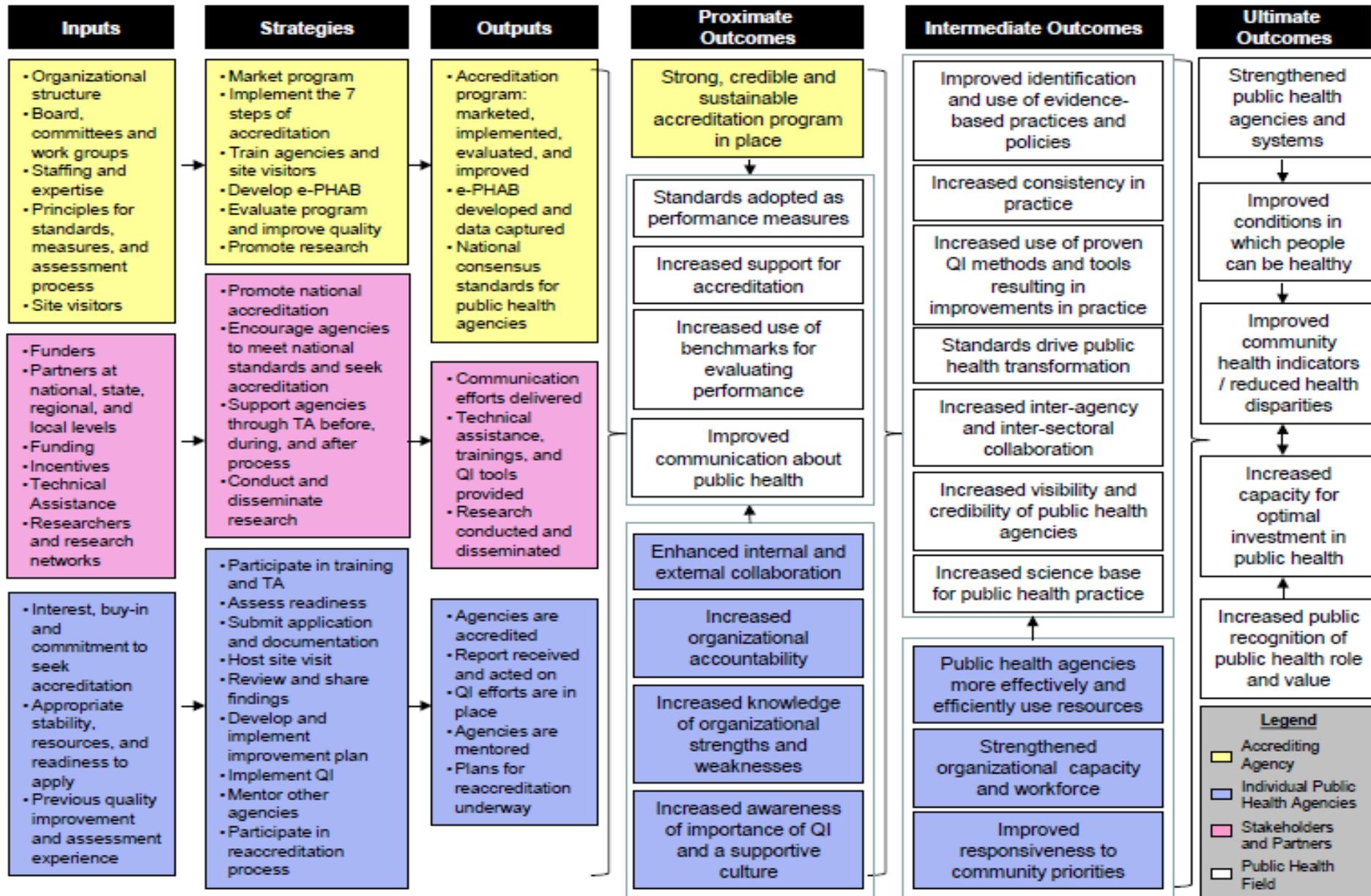
Public Health Accreditation Board (PHAB)



The goal of the voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of state, local, tribal and territorial public health departments.

Public Health Agency Accreditation System

Approved December 2013



Accredited Health Departments

- Central Michigan District Health Department, Mount Pleasant, Mich.
- Champaign-Urbana Public Health District, Champaign, Illinois
- Chicago Department of Public Health, Chicago, Ill.
- Columbus Public Health, Columbus, Ohio
- Comanche County Health Department, Lawton, Okla.
- Cook County Department of Public Health, Oak Forest, Ill.
- Delaware General Health District, Delaware, Ohio
- Deschutes County Health Services, Bend, Oregon
- DuPage County Health Department, Wheaton, Illinois
- El Paso County Public Health, Colorado Springs, Colo.
- Florida Department of Health, Tallahassee, Florida
- Franklin County Health Department, Frankfort, Ky.
- Hennepin County Human Services and Public Health Department, Minneapolis, Minn.
- Johnson County Department of Health and Environment, Olathe, Kansas
- Kane County Health Department, Aurora, Ill.
- Kansas City Missouri Health Department, Kansas City, Mo.
- Kenosha County Division of Health, Kenosha, Wis.
- Lexington-Fayette County Health Department, Lexington, Kentucky
- Licking County Health Department, Newark, Ohio
- Livingston County Department of Health, Mt. Morris, N.Y.
- Loudoun Health District, Leesburg, Va.
- Madison County Health Department, Richmond, Kentucky
- Marion County Health Department, Salem, Oregon
- Minnesota Department of Health, St. Paul, Minnesota

Accredited Health Departments

- Missoula City-County Health Department, Missoula, Montana
- New Orleans Health Department, New Orleans, Louisiana
- Northern Kentucky Independent District Health Department, Edgewood, Ky.
- Norwalk Health Department, Norwalk, Connecticut
- Oklahoma City-County Health Department, Oklahoma City, Okla.
- Oklahoma State Department of Health, Oklahoma City, Okla.
- Oneida County Health Department, Rhinelander, Wis.
- Polk County Health Department, Balsam Lake, Wis.
- RiverStone Health, Billings, Montana
- Spokane Regional Health District, Spokane, Wash.
- Summit County Combined General Health District, Stow, Ohio
- The Public Health Authority of Cabarrus County, Inc. d/b/a Cabarrus Health Alliance, Kannapolis, N.C.
- Three Rivers District Health Department, Owenton, Ky.
- Tooele County Health Department, Tooele, Utah
- Tulsa Health Department, Tulsa, Okla.
- Ventura County Public Health, Oxnard, California
- Vermont Department of Health, Burlington, Vermont
- Washington State Department of Health, Olympia, Wash.
- West Allis Health Department, West Allis, Wis.
- Wood County Health Department, Wisconsin Rapids, Wis.

03/2013: 11
06/2013: 03
08/2013: 05
11/2013: 03
03/2014: 09
06/2014: 13
09/2014: 10

August 26, 2014

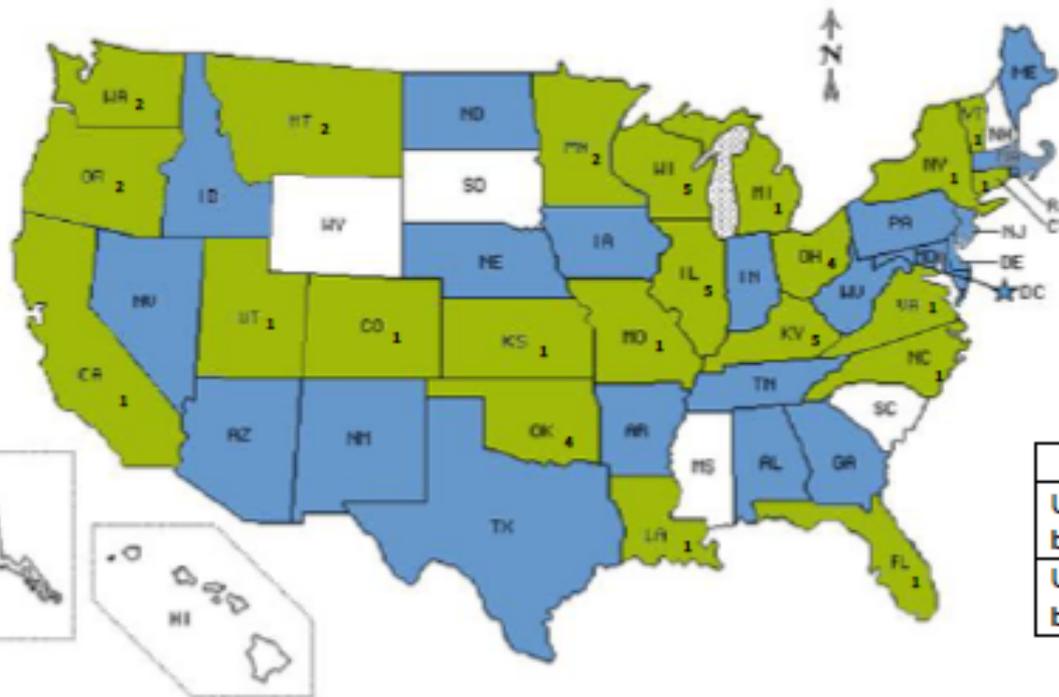
Public Health Accreditation Board (PHAB)

Distribution of Health Departments:

- Local: 196
- State: 27
- Tribal: 2
- Centralized States Integrated System¹: 67
- Multi-Jurisdictional¹: 7

299 Health Departments in

e-PHAB



Key

- States with health departments in process
- States with accredited health departments

Population (last updated 8/1/2014)

Unduplicated Population Covered by Health Departments in e-PHAB	204,331,652
Unduplicated Population Covered by Accredited Health Departments	48,938,968

¹Single accreditation for multiple health departments

Applicant Names Are Kept Confidential

Accreditation Fees

Health Department Category	Population Size of the Jurisdiction Served	2014 - 2015 Total Fee
Category 1	Less than 50,000	\$ 12,720
Category 2	50,000 to 100,000	\$ 20,670
Category 3	>100,000 to 200,000	\$ 27,030
Category 4	>200,000 to 1 million	\$ 31,800
Category 5	>1 million to 3 million	\$ 47,700
Category 6	>3 million to 5 million	\$ 63,600
Category 7	>5 million to 15 million	\$ 79,500
Category 8	Greater than 15 million	\$ 95,400

What Do the Fees Cover?

- An **assigned accreditation specialist** to guide your department through the application process;
- In-person **training** for your health department's accreditation coordinator;
- A **subscription** to PHAB's online accreditation information system (e-PHAB), making it easier and more cost-efficient for your health department to participate in accreditation;
- A **site visit** by a team of peer review experts, including a comprehensive review of your health department's operations against the national accreditation standards;
- A **peer review process**, including the decision and comments from the Accreditation Committee;
- Annual **quality improvement guidance** and support over a period of 5 years
- Support in preparing for re-accreditation;
- Identified opportunities for improvements to help your health department better serve its population; and
- Exclusive contribution to a growing network of accredited local health departments and best practices to enhance the evidence-base for public health.

Version 1.5 (07/01/14)

- Edits and rewording for increased clarity
- Recommendations from the PH Community
- Questions Received from HDs and site visitors
- Think Tanks and Expert Panels
 - Health Equity
 - Public Health Ethics
 - Public Health Communication Science
 - Public Health Workforce
 - Public Health Informatics
- Other Resources – Meetings and readings



Plans and Initiatives for 2014-2015



Think Tanks in 2014-2015

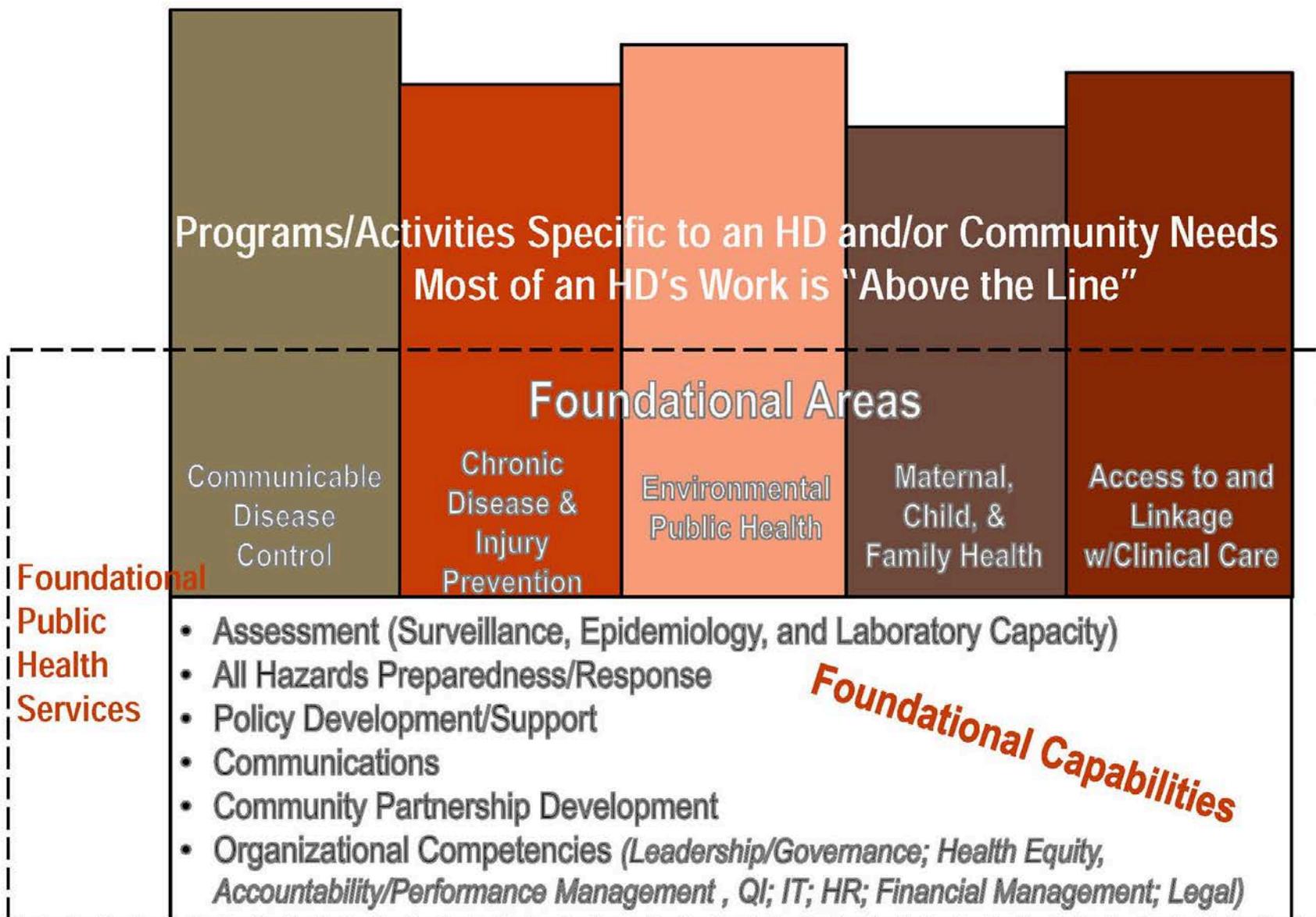
- Accreditation and Quality Improvement
- Public Health and Health Care Intersection
- Vital Records/Statistics
- Army Public Health
- Large City/Metro
- Rural Health Departments



Other Activities in 2014-2015

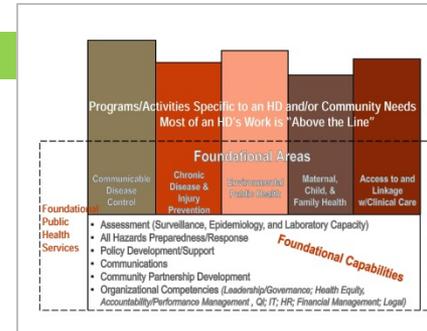
- Update to the Accreditation Process
- Alignment with the DHHS Quality Aims
- Alignment with the **Foundational Capabilities**
- Early report of the “deeper dive” into accredited health department CHA/CHIP
- Release of some case studies on preparing for accreditation
- Release of some early evaluation of impact of accreditation

Foundational Public Health Services



Glossary

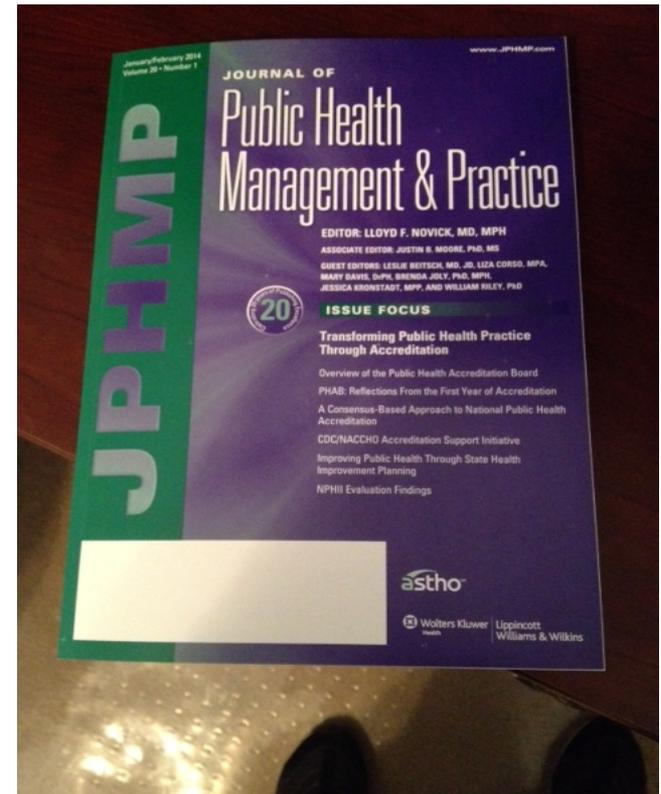
<http://www.resolv.org/site-foundational-ph-services/>



- **Foundational Areas (FAs):** Substantive areas of expertise or program-specific activities in all state/local health departments necessary to protect the community's health
- **Foundational Capabilities (FCs):** Cross-cutting skills needed in state/local health departments everywhere for health system to work anywhere; essential skills/capacities to support all activities
- **Foundational PH Services (FPHS):** Comprised of the FCs and FAs; a suite of skills, programs/activities that must be available in state/local health departments system-wide
- **Programs/Activities Specific to a Health Department or a Community's Needs:** Additional, critical significance to a specific community's health, supported by FAs/FCs; most of a health department's work

Free Online Issue of JPHMP

Journal of Public Health Management and Practice,
January/February
2014 Issue totally dedicated to accreditation. It's free online at www.jphmp.com





Early Findings on the Evaluation of Accreditation



Sources of Evaluation Data

- Internal evaluation



- Program data



- External evaluation



at the UNIVERSITY of CHICAGO

Internal Evaluations

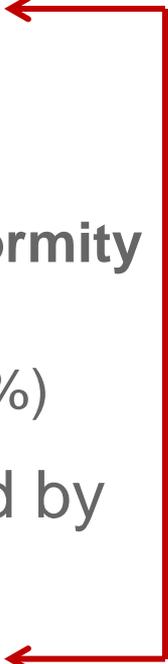
- Trainings
- Time for Various Stages of the Process
- Applicant Experiences
- Site Visitor Experiences
- General Feedback



Program Data: Baseline Data on Motivators, Benefits, and QI

- Data reported by applicant HDs at baseline (prior to participating in PHAB-led training)
 - Accreditation will stimulate quality and performance improvement opportunities (100% *Strongly Agree* or *Agree*)
 - Accreditation will allow HD to better identify strengths and weaknesses (100% *Strongly Agree* or *Agree*)
 - Accreditation will improve management processes used by HD leadership team (97% *Strongly Agree* or *Agree*)
 - HD compares programs, processes, and/or outcomes against other similar HDs (57% *Strongly Agree* or *Agree*)
 - HD implemented QI strategies prior to assessing accreditation readiness (70% *Strongly Agree* or *Agree*)
 - HD uses information from QI processes to inform decisions (76% *Strongly Agree* or *Agree*)

Preliminary Survey Data on Challenges

- **Top challenges** in accreditation process, reported by applicants at baseline (prior to training):
 - Limited **staff time** or other schedule limitations (79%)
 - Staff **turnover** or loss of key staff (34%)
 - PHAB application **fees** (31%)
 - Difficult for our health department to demonstrate **conformity** with selected PHAB Standards and Measures (27%)
 - Lack of perceived **value or benefit** of accreditation (26%)
 - **Top challenges** in accreditation process, reported by applicants after accreditation decision:
 - Limited staff time or other schedule limitations (33%)
 - Staff turnover or loss of key staff (33%)
- 

Early Evaluation Results

- Among health departments applying for accreditation, 95% or more believe that accreditation will:
 - Stimulate quality and performance improvement opportunities
 - Allow HD to better identify strengths and weaknesses
 - Improve management processes
 - Stimulate greater accountability and transparency within HD

*

From NORC at the University of Chicago evaluation survey of 62 health departments that have applied for accreditation.

Early Evaluation Results

- Health departments also reported the following motivators for applying for accreditation^
 - Accountability to external stakeholders
 - Documentation of HD's capacity to deliver the 3 core functions and 10 Essential Public Health Services
 - Credibility of HD within community
 - Relationships with community stakeholders
 - Competiveness for funding opportunities
 - Communication with governing entity
- *^From NORC at the University of Chicago evaluation survey of 62 health departments that have applied for accreditation.*

Early Evaluation Results

- 97% of health departments that have had their PHAB site visit strongly agree that “Going through the accreditation process has improved the performance of our health department.”[^]
- According to HDs that have had their site visit, accreditation:
 - Identifies strengths and areas for improvement
 - Strengthens internal and external partnerships
 - Encourages HDs to prioritize and address long-standing concerns
 - Acts as a “stimulus...for continuous quality improvement and performance management in our daily practice”

[^] From PHAB evaluation of 33 health departments.

Why Were the Initial 44 Health Departments Interested in Accreditation?

- Transparency and Accountability
- Most other governmental and health related services are accredited: hospitals, schools, child care centers, police departments, fire departments, etc.
- Provides a priority setting framework
- Commitment to improving their services
- Increased public engagement and support
- Increased staff morale
- Risk Management
- Potential for increased funding in the future; already using their accreditation certificate in grant proposals

ACCREDITED HEALTH DEPARTMENTS ANNUAL REPORTS

“The submission of annual reports is required of all accredited health departments, in an on-line format provided by PHAB. Reports must:

- Include a statement that the health department continues to be in conformity with all the standards and measures of the version under which accreditation was received.
- Include leadership changes and other changes that may affect the health department’s ability to be in conformity with the standards and measures.
- Describe how the health department has addressed areas of improvement noted in the site visit report.
- Describe how the health department will continue to address areas of improvement identified in the site visit report and/or by the health department in their accreditation action plan.
- Describe work on emerging public health issues and innovations

Results from Initial Annual Reports

Focus areas of improvement reported to PHAB:

- 10 program specific
- 4 administration/financial management
- 3 community partnership
- 3 Governance
- 3 Planning
- 2 Data
- 2 QI Infrastructure
- 2 Workforce

Examples of QI

- Getting into compliance with mandated frequencies of inspections
 - Improving a program that works with schools to implement environmental/policy changes
 - Improving communications with governing entity
 - Procuring an EMR system to get better data for evaluation & performance management
 - Improving new employee orientation
 - Streamlining & strengthening process for responding to grant RFPs
-
- Most common efficiency outcomes: Time saved & reduced number of steps
 - Most common effectiveness outcomes: Increased customer/staff satisfaction
 - Quality enhancement of services or programs: Organizational design improvements



Strategies for Supporting Excellence in Public Health Practice Through the Accreditation Process



Ride the Wave

- CHA/CHIP Ongoing
- Partnerships
- Performance Management
- Quality Improvement
- Workforce
- Emerging Issues



Questions





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