SETTING THE STAGE FOR ACCREDITATION: WHERE TO BEGIN? WHAT TO DO? WHAT IS ALL THIS?
Select a vacation destination

A

B

C

D
Who selected Destination A?
Who selected Destination B?
Who selected Destination C?
Who selected Destination D?
In your small group

- Develop a list of the top three criteria that you used to choose your destination
  1. ______________________________________
  2. ______________________________________
  3. ______________________________________

- Identify what additional information you would have liked to have had to make your decision

- Any other items that went into making your decision?
Your future “trip to accreditation”

- What additional information do you need to begin to plan this trip?
PUBLIC HEALTH ACCREDITATION BOARD (PHAB) STANDARDS: INTRODUCTION AND HISTORY
IOWA PUBLIC HEALTH: A BRIEF HISTORY
Ancient Times

1867  Cities, towns, townships boards of health
1880  State board of health
1922  County health units proposed
1924  State health department
The Middle Ages

1964  Governor’s Public Health Advisory Committee

1967  Local Health Act

1970s Guidelines for minimum local board of health responsibilities

1988  Institute of Medicine’s *The Future of Public Health*

No citizen should be without access to the benefits of public health protection through a local public health delivery system.

1994  Core Functions of Public Health Steering Committee defines nation-wide framework for Ten Essential Services
How do the Ten Essential Services guide the work of your health department?
MODERN(IZATION) TIMES
Iowa’s History of Public Health Standards

2003-4 Regional meetings call for action to strengthen public health

2004-5 Workgroups of state and local representatives ask:

What should every Iowan reasonably expect from state and local public health?

Goal: To modernize an integrated, sustainable public health system that ensures a basic standard of delivery to all Iowans.
Iowa’s History of Public Health Standards

2006  Workgroups develop Iowa standards

<table>
<thead>
<tr>
<th>Infrastructure</th>
<th>Services</th>
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<tbody>
<tr>
<td>Governance</td>
<td>Prevent Epidemics</td>
</tr>
<tr>
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<td>Protect Against Environmental Hazards</td>
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<td>Prevent Injuries</td>
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<td>Workforce</td>
<td>Promote Health Behaviors</td>
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<tr>
<td>Community Assessment and Planning</td>
<td>Prepare for, Respond to, and Recover from Public Health Emergencies</td>
</tr>
<tr>
<td>Evaluation</td>
<td>Prevent Epidemics</td>
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2007  Iowa standards approved

2008  Workgroup develops implementation plans
The Iowa Public Health Modernization Act passed in 2009.
Iowa’s Move Toward PHAB Accreditation

2010  Public Health Advisory Council plans for implementation of Public Health Modernization, including accreditation process

2011  Two counties pilot Iowa Voluntary Accreditation Process

2013  Iowa State Board of Health adopts Iowa Public Health Standards

- Modernization shifts to quality improvement (QI)
- Sixteen counties funded for QI projects
- Local health departments across the state receive QI training

2014  Council determines state accreditation program **not** feasible. Recommends health departments work toward PHAB accreditation
History of PHAB Accreditation

2003  Institute of Medicine’s *The Future of the Public’s Health* calls for steering committee on accreditation

2004-5  Robert Wood Johnson Foundation launches Exploring Accreditation project

2006  Exploring Accreditation Steering Committee decides on nation-wide program that:

- Promotes continuous quality improvement
- Recognizes high performers
- Illustrates accountability
- Increases visibility and public awareness
- Clarifies the public’s expectations
The Public Health Accreditation Board (PHAB) incorporated in 2007
Development of PHAB Standards

2008  PHAB drafts standards for alpha testing

2009  Initial accreditation process and standards released for comments and revisions

2010  IDPH one of 30 beta sites for more testing

2011  Standards approved and accreditation program launched
<table>
<thead>
<tr>
<th>Number</th>
<th>Domain</th>
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<tbody>
<tr>
<td>1</td>
<td>Assess</td>
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<tr>
<td>2</td>
<td>Investigate</td>
</tr>
<tr>
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<td>4</td>
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</tr>
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<tr>
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</table>

Domains 1-10 based on Ten Essential Services

How are you addressing these domains today?
UP NEXT: ARE YOU READY? YOU MAY BE CLOSER THAN YOU THINK!
ARE YOU READY?
YOU MAY BE CLOSER THAN YOU THINK!

Supporting accreditation readiness, performance, and quality improvement of Iowa’s local health departments
Copyright © 2015 Gaining Ground Iowa. All rights reserved.
How does the work you do every day fit the PHAB Standards?
The PHAB standards fall into twelve domains:

1. Assess
2. Investigate
3. Inform and Educate
4. Community Engagement
5. Policies & plans
6. Public health laws
7. Access care
8. Workforce
9. Quality Improvement
10. Evidence-Based Practices
11. Administrative & Management
12. Governance
## Listing of PHAB domains

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
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<tbody>
<tr>
<td>1</td>
<td>Conduct and disseminate assessments focused on population health status and public health issues facing the community</td>
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<tr>
<td>2</td>
<td>Investigate health problems and environmental health problems and environmental public health hazards to protect the community</td>
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<tr>
<td>3</td>
<td>Inform and educate about public health issues and functions</td>
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<td>4</td>
<td>Engage with the community to identify and address health problems</td>
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<td>5</td>
<td>Develop public health policies and plans</td>
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<td>6</td>
<td>Enforce public health laws</td>
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<tr>
<td>7</td>
<td>Promote strategies to improve access to health care</td>
</tr>
<tr>
<td>8</td>
<td>Maintain a competent public health workforce</td>
</tr>
<tr>
<td>9</td>
<td>Evaluate and continuously improve processes, programs, and interventions</td>
</tr>
<tr>
<td>10</td>
<td>Contribute to and apply the evidence base of public health</td>
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<tr>
<td>11</td>
<td>Maintain administrative and management capacity</td>
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<tr>
<td>12</td>
<td>Maintain capacity to engage the public health governing entity</td>
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Now let’s see how they fit your work

Activity

- List three things you do at work every day
- What domain does that activity fall in?
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What might you already have to fulfill the standards?
Policies and procedures

- Immunizations
- Blood-borne pathogens
- Disease Outbreaks
- Human resources/personnel
- Financial operations
- Employee orientation
- Grants-to-counties
- Tobacco use
BOH meeting minutes

- Date of meeting
- Attendance
- Contents of BOH packet
Response

- After-action reports
- After-hours call down procedure/contacts
- HAN
- IRIS data entry
- 24/7 plan for notifying health department in place
Community partners

- Coalition work
- CHNA & HIP workgroup
- Stakeholders
- Work with schools, non-profits, other government entities, health-care
- Immunization audits
Administrative activities

- Human resources policies
- Budget
- Table of organization
- Audit report
- Signed contracts
- Annual report
- Ordinances
Other available resources

- Community health needs assessment
- Health improvement plan
- Strategic plan
- Access to data
- Website
- Press release
- Brochure
- Logo/letterhead
How can you make the best use of today’s training?

The Way We See It

- Pursue accreditation
- Adopt PHAB standards
- Watch and wait
- Do nothing
Remember that others have gone before you!
Additional key considerations

- PHAB has three prerequisites for accreditation
  - Community Health Assessment (CHA)
  - Community Health Improvement Plan (CHIP)
  - Strategic plan

- The other biggies
  - Workforce development plan
  - Quality improvement plan
  - Performance management plan
Seven steps to accreditation

1. Pre-application
   - Assess readiness to apply
   - Complete online orientation
   - Submit statement of intent

2. Application
   - Submit application and fee
   - Complete applicant training

3. Document selection and submission
   - Select documentation
   - Upload to e-PHAB
   - Submit to PHAB

4. Site Visit
   - Site visit team made up of peers
   - Site visit report is developed
Seven steps to accreditation

5. Accreditation Decision
   - Determined by accreditation committee
   - Accredited or action plan

6. Annual reports

7. Reaccreditation

...97 percent 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.” — From PHAB evaluation of 33 health departments
Not always about hitting a button

- Read the PHAB standards
- Pay attention to:
  - National Association of City and County Health Officials (NACCHO)
  - Gaining Ground
  - Governor’s Conference
  - Public Health Quality Improvement Exchange (PHQIX)
- As you undertake activities, consult the PHAB standards
Either way

- Consider formalizing some practices
  - Policy and procedures
  - Measures
- Schedule reviews/updates
  - Calendars
  - Gantt charts
- Learn about quality improvement and performance management
- Look for information about workforce assessment and workforce development plans
How to do a self-assessment

- Individual or Team
- Tabletop
  - Review a domain at a time or assign measures to team
  - Assess do we have it, or don’t we?
  - Write down what it is, and who has it

- Review of documentation
  - Actually collect examples
  - Review them for completeness related to the PHAB standards
  - Identify strengths and gaps
Value of self-assessment

- One way to learn the standards and the terminology
- Helps you know your strengths and gaps so you can look for the information you need
- Positions you for funding opportunities
- Positions you for partnerships
- Opens the door for communication
Strategies for deciding what to do first

- Look at how PHAB standards fit the work you do now. Start there!
- Look for low hanging fruit
- Vote on what to do first
- Rate activities based on level of difficulty and level of impact
- Consider your strengths and the strengths of your staff
- Make a list of possibilities and pick something!
How not to get overwhelmed

- Do one thing at a time
- Borrow the work of others and make it your own
- Remind yourself this isn’t about being the fastest – it’s about getting there
- Realize you may have to tweak things as you try them out
- Break things down into small steps
- Work collaboratively
- Be kind to yourself
Questions?
RESOURCE SHARING—WHERE TO GO TO FIND OUT MORE!
PHAB Resources

- Start with the PHAB website at phaboard.org
At phaboard.org, select Accreditation Process > Standards and Measures > PHAB Standards (Version 1.5)
At phaboard.org, select Accreditation Process > Accreditation Materials > PHAB Acronyms and Glossary of Terms (Ver. 1.5)
Now let’s look inside the PHAB standards document.

**STANDARD 1.1:** Participate in or lead a collaborative process resulting in a comprehensive community health assessment.

<table>
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<tr>
<th>MEASURE</th>
<th>PURPOSE</th>
<th>SIGNIFICANCE</th>
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<tr>
<td>Measure 1.1.3 A Accessibility of community health assessment to agencies, organizations, and the general public</td>
<td>The purpose of this measure is to assess the Tribal, state, or local health department’s efforts to share the community health assessment with other agencies and organizations and to make the assessment results available to the general public.</td>
<td>The community health assessment is a resource for all members of the public health system and the population at large. It is a basis for collaborations and for priority setting, planning, program development, funding applications, coordination of resources, and new ways to collaboratively use assets to improve the health of the population. Other governmental units and not-for-profits will use the community health assessment in their planning, program development, and development of funding applications.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>REQUIRED DOCUMENTATION</th>
<th>GUIDANCE</th>
<th>NUMBER OF EXAMPLES</th>
<th>DATED WITHIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Information provided to partner organizations concerning the availability of the community health assessment</td>
<td>1. Health departments must document how it inform partners, stakeholders, other agencies, associations, and organizations of the availability of the community health assessment. Documentation could be, for example, emails to partners and stakeholders providing information of how to access the assessment; announcements in department newsletters; articles in newspapers; digital media, health department tweet or Facebook; public service announcements, and local news announcement.</td>
<td>2 examples</td>
<td>5 years</td>
</tr>
<tr>
<td>2. The availability of the community health assessment findings to the public</td>
<td>2. Health departments must document how it communicates the community health assessment findings to the public. Documentation could be, for example, evidence of distribution of the assessment to libraries or the publication of the community health assessment on the department’s website. Summaries of the findings could be, for example, published in newspapers, outlined in the department’s newsletter, linked to from the department’s Facebook page, or published on the department’s website.</td>
<td>2 examples</td>
<td>5 years</td>
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Go to idph.state.ia.us/mphi/gaining_ground.asp or search on:

Gaining Ground

Gaining Ground Resources: Find our page on the IDPH website
Gaining Ground Resources

- Forthcoming resources on web page:
  - Self-assessment examples
  - More information about impact/difficulty rating forms
- Domain webinars
- 201 level training
  - April 30: NACCHO presents on aspects of public health leadership related to accreditation and PHAB standards
  - 2 additional trainings will be provided
- Funding opportunities to assist local health departments who wish to seek accreditation
- One more regional training opportunity
- Materials related to the standards for use with your local board of health and community partners
- Subject matter expert contacts established
When building a culture of quality in LHDs, a natural evolution of change tends to occur, impacting both the people and processes within the organization. The QI Roadmap provides LHDs with guidance on progressing through six phases or levels of QI maturity until a culture of quality has been reached and can be sustained. For each phase, the Roadmap presents common organizational characteristics and strategies and resources for transitioning to the next phase. The QI Roadmap also describes six foundational elements of a QI culture that LHDs should cultivate over time. Whether a novice or advanced in QI, any LHD can adapt the QI Roadmap as a guide to understanding the current state and identifying next steps for advancing to the next stage of QI integration.
Go to phqix.org
At phf.org, select Focus Areas > Performance Management Toolkit
Also, don’t hesitate to call!

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Getting to YES!!

- What is one key thing that you as an individual learned from today’s session?
- What fears do you have about becoming PHABulous?
- What tools/supports do you need to become PHABulous?
- What do you need to get to YES, when looking at accreditation?
- Who in your community or agency would be good to share the information you learned here with?
Other questions?