


**Public Health Accreditation Board**



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National Association of Local Boards of Health

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### Presentation Overview

- Introduction to PHAB
- Program development and timeline
- Board Approved Assessment Process
- Benefits and incentives
- Questions from you



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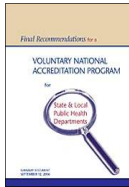
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### A Rising Tide...

- CDC's Future Initiatives
- "Future of the Public's Health" in the 21st Century (IOM)
- Statewide Accreditation Programs
- Exploring Accreditation



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## Voluntary Accreditation Goal

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

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## Public Health Accreditation Board

- Established May 2007 in Alexandria, VA
- Governed by state, tribal and local public health officials and board of health members
- Health department involvement:
  - Board of Directors representation
  - Workgroups oversee development
  - Volunteer opportunities



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## PHAB Board of Directors

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|----------------------------------|-------------------------------|
| • Kaye Bender, President and CEO | • Kenneth Kerik (OH)          |
| • Rex Archer (MO)                | • Carol Moehrle (ID)          |
| • Leslie Beitsch (FL)            | • Judy Monroe (IN)            |
| • Shepard Cohen (MA)             | • Bud Nicola (WA)             |
| • Leah Devlin (NC)               | • Alonzo Plough (CA)          |
| • Marie Fallon (OH)              | • William Riley (MN)          |
| • Fernando A. Guerra (TX)        | • F. Douglas Scutchfield (KY) |
| • Paul K. Halverson (AR)         | • H. Sally Smith (AK)         |
| • Edward Harrison (IL)           | • Hugh Tilson (KY)            |
| • Jack Lanier (VA)               | • Harvey Wallace (MI)         |

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## Eligible Applicants

All variations of state, local, tribal and territorial health departments can apply for national accreditation




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## Developmental Work

- Standards Workgroup
- Assessment Process Workgroup
- Beta test
- Equivalency Recognition Workgroup
- Research and Evaluation Committee
- Fees & Incentives Workgroup
- Marketing and Communication





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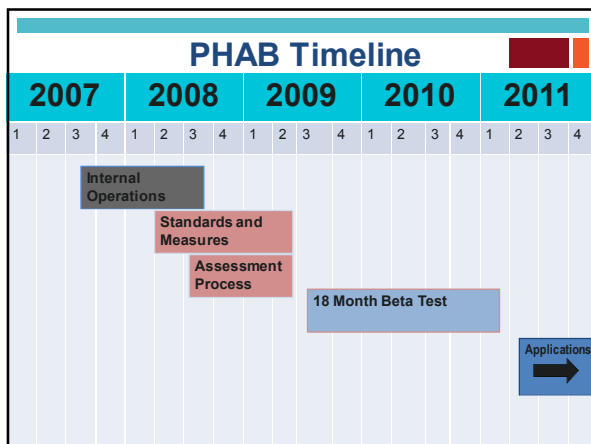
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**Standards Development Workgroup**

- Workgroup comprises state and local health department leaders and BOH members
- Collaborative, consensus, iterative process
- Facilitated by consultant with standards development expertise
  - MCPPP Healthcare Consulting, Inc

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**Standards Development Workgroup**

- Leah Devlin (NC): Co-Chair
- Carol Moehrle (ID): Co-Chair
- Terry Allan (OH)
- Rex Archer (MO)
- Tim Callahan (CT)
- Rick Danko (TX)
- Robert Fulton (MN)
- John Gwinn (OH)
- Mary Kushion (MI)
- Richard Morrissey (KS)
- Rita Parris (NE)
- **Sylvia Pirani (NY)**
- Joy Reed (NC)
- Stephen Ronck (OK)
- Jane Smilie (MT)
- Torney Smith (WA)
- Bonita Sorenson (CA)
- Jeffrey Stoll (CO)
- Susan Turner (FL)
- Harvey Wallace (MI)
- Christina Welter (IL)
- Kathy Vincent (AL)
- Barbara Worgess (AZ)

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**Standards and Measures Development**

- Develop standards for all health departments
- Measures specific to local and state health departments
- Guidance for documentation and demonstration of department performance on meeting standards and measures
- Scoring and weighting methodology

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### Standards and Measures: Principles

- Advance the collective practice
- Be simple, reduce redundancy
- Minimize burden
- Reinforce local and state health departments' roles, demonstrate shared accountability
- Apply to all sizes and all forms of governance structure
- Based on American National Standards Institute principles

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### Principles continued

- › Based on a body of existing work
  - › Essential PH Services
  - › NACCHO Operational Definition
  - › National Public Health Performance Standards Program
  - › State Experiences
  - › ASTHO Survey Data
- › Essentially all of the concepts in the Operational Definition and NPHPS have been addressed

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### Standards Development Timeline

- Draft standards and measures developed by workgroups **Feb 08-Feb 09**
- Alpha test/desk review **Oct 08-Nov 08**
- Public vetting **Feb 09-April 09**
- Revised based on feedback **May 09-June 09**
- PHAB Board approval **July 09**
- Beta testing **Fall 09 - Nov 10**

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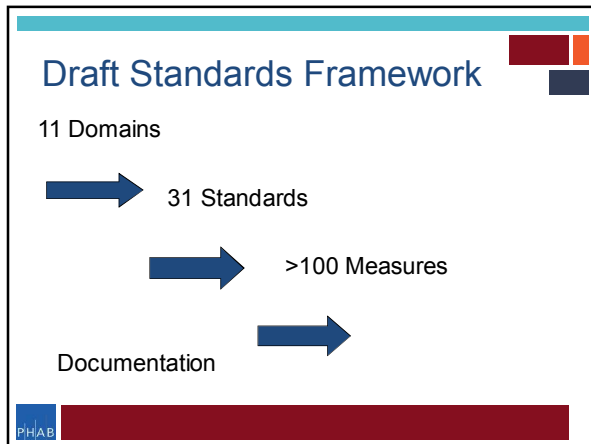
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- ### Eleven Domains
- Part A**  
Administrative Capacity and Governance
- Part B**
1. Conduct assessment activities focused on population health status and health issues facing the community
  2. Investigate health problems and environmental public health hazards to protect the community
  3. Inform and educate about public health issues and functions
  4. Engage with the community to identify and solve health problems
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- ### Eleven Domains (cont.)
5. Develop public health policies and plans
  6. Enforce public health laws and regulations
  7. Promote strategies to improve access to healthcare services
  8. Maintain a competent public health workforce
  9. Evaluate and continuously improve processes, programs, and interventions
  10. Contribute to and apply the evidence base of public health
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Part A: Administrative Capacity and Governance			
Standard A1 B: Provide Infrastructure for Public Health Services		Develop and maintain an operational infrastructure to support the performance of public health functions.	
Measure	Documentation and Scoring Guidance	Type of Measure	Type of Review
A1.1 B: Implement policies and procedures regarding agency operations, review policies regularly and assure these are accessible to staff	Documentation should address: <ul style="list-style-type: none"> <li>Policy and Procedure Manual</li> <li>Reports of review, at least every three years</li> <li>Description of methods for staff accessibility</li> </ul>	Process	Health Department Level
A1.2 B: Demonstrate written policies regarding confidentiality, including HIPAA requirements	Documentation could include: <ul style="list-style-type: none"> <li>Confidentiality policies, including business associate agreements and electronic transfer of data policies</li> <li>Training documentation and attendance</li> <li>Signed employee confidentiality forms</li> </ul>	Process	Health Department Level
A1.3 B: Implement a Human Resources system.	Documentation should address: <ul style="list-style-type: none"> <li>Policy and Procedure Manual or individual policies that address at least two of these topics:               <ul style="list-style-type: none"> <li>Personnel recruitment, selection and appointment policies and procedures</li> <li>Salary structure</li> </ul> </li> </ul> Documentation could include: <ul style="list-style-type: none"> <li>Law agreements, including description of mechanisms for working relationships</li> <li>Agency staffing plan</li> <li>Periodic personnel administration audit</li> </ul>	Capacity	Health Department Level
A1.4 B: Maintain information systems that support the agency's mission and workforce by providing infrastructure for data collection, program management, and communications.	Documentation could include: <ul style="list-style-type: none"> <li>Inventory list of hardware</li> <li>Inventory list of software, including capacity for data analysis, word processing, and internet</li> <li>Examples of reports (at least two) that support</li> </ul>	Capacity	Health Department Level

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## Assessment Workgroup Principles

- The process should promote quality improvement
- The process should reduce anxiety and increase comfort for applicants, to the degree possible
- The process should be largely paperless and online

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## Assessment Process Overview

<ol style="list-style-type: none"> <li>1. Pre-application Applicant prepares and assesses readiness, informs PHAB of its intent to apply, and receives training</li> <li>2. Application Applicant submits application form</li> <li>3. Self-assessment Applicant gathers documentation</li> </ol>	<ol style="list-style-type: none"> <li>4. Site Visit Site visit is conducted and report developed</li> <li>5. Accreditation Decisions PHAB Board will award accreditation status</li> <li>6. Appeals Procedure for appeals and complaints</li> <li>7. Reports and Reaccreditation Department reports progress and reapplies</li> </ol>
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**I. Pre-application**

**A. Technical Assistance**

- PHAB will provide technical assistance on process, not QI

**B. Orientation**

- Overview of process and standards
- Online, available 24/7, free
- Mandatory, prerequisite to letter of intent

**C. Readiness**

- PHAB will provide readiness assessment tools

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**I. Pre-application**  
Continued

**D. Letter of Intent**

- Required; non-binding
- Place agency in training queue
- Designates applicant's accreditation coordinator

**E. Applicant Training**

- Required, accreditation coordinator
- 2 day, face-to-face
- A fee will be charged

PHAB 23

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**II. Application**

**A. Application Form**

- Contract
- Non-refundable payment
- On-line, provide sufficient information to determine eligibility

**B. Eligibility**

- Completeness Review
- Eligibility Determination
- Multi-agency applications

PHAB 24

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**III. Self-assessment**

**A. Process**

- To be completed in twelve months
- Completeness review by staff

**B. Content**

- Demonstrate how department meets standards and measures

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**IV. Site Visit**

**A. Site Visitor Training**

- Two day, Face-to-face

**B. Site Visit Team**

- Appointment of team
- Team members
- Conflict of interest

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**IV. Site Visit**  
Continued

**C. Site Visit**

- Pre-site visit
- Process of site visit
- Review
- Evaluation

**D. Site Visit Report**

**E. Site Visit Follow-up**

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V. Accreditation Decisions

- Process
- Review Committee
- Accreditation Status
- Conditional Accreditation

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VI. Appeals

- Levels of Review
- Complaints

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VII. Reports & Reaccreditation

- Departments report changes as they occur
- Mid-term reports – 2 ½ year report
- Re-application

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Why participate?



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Benefits of Accreditation



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Financing

- Workgroup on fees and incentives
- Affordability of fees critical to success
- Accreditation process should be designed with cost controls in mind



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### Incentives

- Uniformly positive
- Participate in learning community
- Informed by UNC research
- Possible tangible incentives
  - Improved access to funding
  - Grants application requirements
  - Grants reporting requirements

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### Incentives Research

- What matters to State HDs?
  - Financial incentives
    - Accredited agencies – 60%
    - Agencies applying for accreditation – 32%
  - Infrastructure/quality improvement – 36%
  - Grants application and administration – 20%

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### Incentives Research

- What matters to Local HDs?
  - Financial incentives
    - Agencies considering accreditation – 51%
    - Accredited agencies – 37%
  - Infrastructure/quality improvement – 33%
  - Technical assistance and training – 27%

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**Your Next Steps.....**

- Review Exploring Accreditation Final Recommendations
- Visit [www.phaboard.org](http://www.phaboard.org) often for updates
- Convene key "thought leaders" to discuss next steps in your agency
- Work with your association
  - ASTHO, NACCHO, NALBOH
- Employ the National Public Health Performance Standards
- Employ NACCHO's Operational Definition for Local Health Departments



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For more information...

[www.phaboard.org](http://www.phaboard.org)

Contact Kaye Bender  
or any Board Member  
703.778.4549



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