

Digging a Little Deeper



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deeper

Preparation – Role of AC & AT



Role of the AC

- Leader
- Manager
- Communicator
- Editor



Members of the AT?

- 5-10 members
- Various disciplines/programs
- Various levels



Role of the AT

- Support to the AC
- Documentation gatherers
- SME
- Know the HD
- QI/PI



Role of the AT

- Build Support & Enthusiasm
- Learn the Standards & Measures
- Assess Where You Are
- Go back to Documentation



Role of the AT

- Spread the Work
- Engage Folks Where They Are
- Get Everyone on Board
- Make it Fun!



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Changes to the Guide



Changes to the Guide

- SOI 🖱️ Registration
- Pre-Application 🖱️ Preparation
- Extensions
- Inactive Status
- Factual Errors step deleted



Extensions

- Legitimate Cause or Extenuating Circumstance
 - Beyond the control of the HD
 - Significantly compromises the ability to complete a process step within the timeframes



Inactive Status

- Time determined by HD and PHAB
- No access to e-PHAB
- A fee of \$100 a month will be charged
- Request or Required by PHAB



Timelines

- Registration – 90 days
- Application – 6 months after access
- Documentation submission – 1 year after access
- Completeness review – 30 days
- Pre-Site Visit Review – 30 days
- Action Plan – 90 days to submit
 - 1 year from acceptance to complete
- Extensions – 30 days to 6 months



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Plans & Systems



Plan Alignment/Linkages

- Community Health Assessment Measure 1.2.2
- CH Improvement Plan Measure 5.2.2
- Strategic Plan Measure 5.3.2
- Workforce Development Plan Measure 8.2.1
- PM System Standard 9.1
- QI Plan Measure 9.2.1
- Emergency Operations Plan Standard 5.4
- Risk Communications Plan Measure 3.2.4



Planning

- Plans provide direction and unity
 - decisions
 - staff contributions
 - Resources
- Don't want:
 - Plans that contradict
 - Plans that are not used



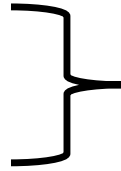
Linkages

- CHA identifies community health strengths and weaknesses
- CHIP guides community partnerships, programs, & services
- SP guides health department development
- WFDP positions department for competence and capacity
- PMS identifies needed improvements
- QI Plan guides improvements
- EOP protects the public – plan of actions
- Risk Communications Plan informs the public



What's needed?

- Development
- Adoption
- Implementation
- Review
- Revision



Monitoring



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Documentation



Challenges and Gaps

- Past Documentation
- Community Engagement
- Defining the Process
- Showing Implementation
- Building on the Foundation



Organizing Documentation

- Collecting
 - Storing
 - Gathering
- Assessing
- Creating
- Selecting



Documentation Tips

- Follow the Goldilocks Principle
- No Blanks - Templates & Signature Lines
- No Draft or Provisional Documents
- Highlight and Flag the Required Elements
- Use Measure Narratives to Tell Your Story
- Use PDFs as much as possible
- Don't Confuse the Site Visitors
- Limit Acronyms and Jargon
- Date Everything! Authenticate Everything!
- Review it, check it, and open it before you submit



Provide Context

A. In Documentation

- Highlighting/Notes in Document

B. In e-PHAB

- Upload Title
- Upload Description
- Measure Narrative



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Evaluation



External Evaluation Overview

- 3-year contract
- Focus on process and short-term outcomes
- Data collection from HDs
 - Survey 1: After HDs submit their Statement of Intent (n=175)
 - Survey 2: After HDs are accredited (n=67)
 - Survey 3: One year after HDs are accredited (n=52)



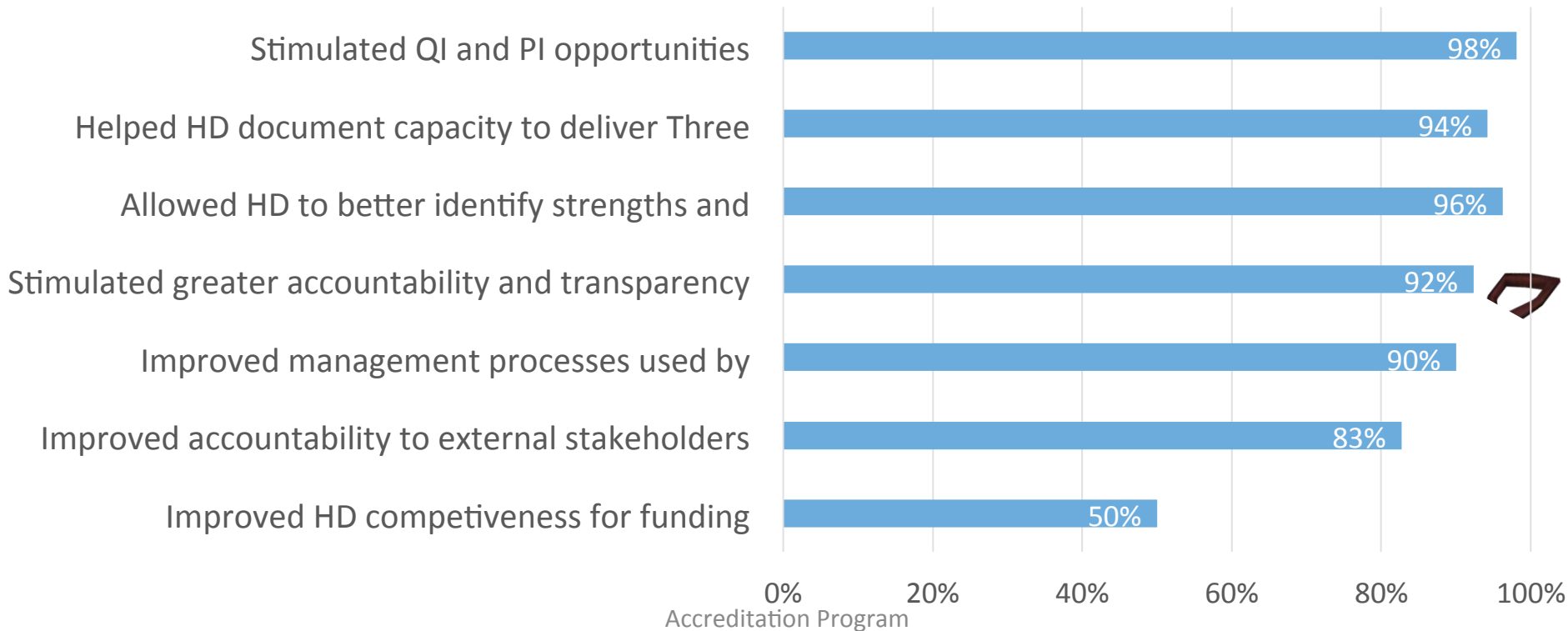
Perceived Benefits

Among applicants, most believe accreditation will...

- Stimulate QI and PI opportunities (100%)
- Allow HD to better identify strengths & weaknesses (98%)
- Improve mgmt. processes used by leadership team (97%)
- Stimulate greater accountability & transparency (95%)
- Help HD to deliver Three Core Functions & Ten Essential PH Services (95%)
- Improve accountability to external stakeholders (90%)
- Improve credibility within community/state (87%)
- Improve competitiveness for funding (87%)
- Improve relationships with key community stakeholders (86%)



Accreditation Benefits



HD Satisfaction

- Fees as a good value
 - 92% (n=61) “strongly agreed” or “agreed” (Survey 2)
- Correct decision to apply
 - 100% (n=66) “strongly agreed” or “agreed” (Survey 2)
- Didn't experience adverse effects from participation
 - More than half said there were no adverse effects (Survey 3)
 - One said time, energy, and resources couldn't be recovered



HD Quality Improvement

	Survey 1 (n=175)	Survey 2 (n=67)	Survey 3 (n=52)
HD uses or has implemented/plans to implement strategies to monitor and evaluate effectiveness and quality.	85%	100%	-
HD uses or plans to use information from QI processes to inform decisions.	76%	96%	100%
HD has implemented or plans to implement new strategies for QI.	70%	94%	98%
HD compares programs, processes, and outcomes against other similar HDs as a benchmark for performance.	54%	-	69%

HD Barriers/Challenges

	Survey 1 (n=175)	Survey 2 (n=67)	Survey 3 (n=52)
Limited staff time/other schedule limitations	82%	54%	25%
Staff turnover/loss of key staff	38%	43%	25%
Lack/decreased perceived value/benefit of accreditation	33%	6%	6%
PHAB application fees	31%	-	-
Difficult to demonstrate conformity with selected Standards & Measures	27%	-	-
Selected Standards & Measures not applicable to HD	10%	-	-
Lack of/decreased support among HD leadership	9%	3%	0%
Lack of/decreased support from elected leaders	6%	0%	0%
Lack of/decreased support from BOH/governing entity	4%	1%	4%
Not a/decreased priority	3%	1%	0%
Reduced funding to support accreditation activities	-	-	29%

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Questions?



Drop me a note!

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