The Public Health Accreditation Board (PHAB) is committed to encouraging research to develop the science base for accreditation and systems change in public health, as well as to evaluating the accreditation program in order to continuously improve it. To support those two goals, the PHAB Research & Evaluation Committee developed and vetted a logic model that was approved by the PHAB Board of Directors in August 2010. More recently, the PHAB Research Advisory Council and the Evaluation and Quality Improvement Committee have revised the logic model. The revised logic model, which was approved by the Board of Directors in December 2013, can be found on the following page.

The logic model is designed to illustrate the contributions of PHAB (shown in yellow); stakeholders and partners, including funders, partner organizations, and researchers (shown in pink); and individual public health agencies that participate in the accreditation process (shown in blue). The model presents a logical framework of how their inputs and strategies may lead to outputs and outcomes for PHAB, participating health departments, and the public health field as a whole (shown in white). The proximate outcomes are the results that might be realized in the near term (1 – 3 years) and that are considered to be more directly related to the accreditation process. For example, because many of the standards and measures require the health department to demonstrate partnerships and community engagement activities, increased collaboration is viewed as a proximate outcome. Ultimate outcomes, on the other hand, are the results that are anticipated for further in the future (7-10 years) and are affected by many other factors. For example, health status is heavily influenced by the social determinants.

The logic model is an important tool to help researchers and evaluators understand the goals of accreditation so that they can systematically test the links between the work of the accreditation system and the outputs, proximate outcomes, intermediate outcomes, and ultimate outcomes, in turn. It is also a visual reminder of how the stakeholders in the accreditation enterprise can work together to achieve the goal of the voluntary national accreditation program: “to improve the health of the public by advancing the quality and performance of state, local, tribal, and territorial public health departments.”
### Improved Community Health Indicators / Reduced Health Disparities

- Organizational structure
- Board, committees, and work groups
- Staffing and expertise
- Principles for standards, measures, and assessment process
- Site visitors

- Market program
- Implement the 7 steps of accreditation
- Train agencies and site visitors
- Develop e-PHAB
- Evaluate program and improve quality
- Promote research

- Promote national accreditation
- Encourage agencies to meet national standards and seek accreditation
- Support agencies through TA before, during, and after process
- Conduct and disseminate research

- Participate in training and TA
- Assess readiness
- Submit application and documentation
- Host site visit
- Review and share findings
- Develop and implement improvement plan
- Implement QI
- Mentor other agencies
- Participate in reaccreditation process

### Increased Visibility and Credibility of Public Health Agencies

- Ultimate Outcomes

### Increased Inter-agency and Inter-sectoral Collaboration

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Organizational Accountability

- Public Health Agencies are more effectively and efficiently using resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Knowledge of Organizational Strengths and Weaknesses

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Awareness of Importance of QI and a Supportive Culture

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Responsiveness to Community Priorities

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Public Recognition of Public Health Role and Value

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture

### Increased Science Base for Public Health Practice

- Public Health Agencies more effectively and efficiently use resources
- Strengthened organizational capacity and workforce
- Increased awareness of importance of QI and a supportive culture