Reaccreditation
Introduction to the Requirements and Process

February 9, 2017
Reaccreditation Webinar Objectives

• Review the structure of the Standards and Measures for reaccreditation and required documentation

• Review the Population Health Outcomes Reporting requirements

• Walk through the process and timeframes
Guide to National Public Health Department Reaccreditation

- Sets forth the process and timeframes
- Includes the Standards and Measures
- Includes description of Population Health Outcomes reporting
- Is available now on PHAB’s website
- Paper version will be available for purchase from PHAB’s on-line store

http://www.phaboard.org/reaccreditation/
Accreditation & Reaccreditation

- PHAB accreditation is for 5 years
- The Guide is for health departments that applied on or before June 30, 2016
- An accredited health department that does not apply for reaccreditation will be referred to the Accreditation Committee and will be determined to be “Not Accredited”
REACREDITATION
STANDARDS AND MEASURES
REACCREDITATION
STANDARDS AND MEASURES

• Version 1.5 Measures grouped together
  – Description rather than individual examples
• One set of reaccreditation Standards and Measures
  – NOT 2 sets of S&M (v 1.5 and reaccreditation)
• No new topic areas (e.g., ethics, branding were new to V. 1.5)
REACCREDISATION
STANDARDS AND MEASURES

Increased emphasis throughout on:

- Collaboration and partnership
- Community involvement
- Leadership for community health development
- Health equity
- System-level actions
- Mobilization of the community
- Culture of quality improvement
DESCRIPTIVE NARRATIVES

• Opportunity for health department to describe and explain what they do

• Reviewers will get the “bigger picture” to understand who the health department is, what they do, and how they do it
  ▪ Rather than examples that they must piece together

• Provide opportunity for health department self-reflection
STANDARDS AND MEASURES

• Did not revise the Domains or Standards
  – The same for reaccreditation as initial accreditation
• Measures reworded to describe the intended impact of meeting the measure
• Requirements for each Measure
• Guidance provides specific instructions for uploads
• Forms for uploads will be provided
### Measure 2.1:
Public health problems and environmental public health hazards are investigated thoroughly, appropriately, and in a timely manner.

This measure addresses continued conformity with Standards and Measures, Version 1.5:

**Standard 2.1** Conduct timely investigations of health problems and environmental public health hazards

**Standard 2.3** Ensure access to laboratory and epidemiologic/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Guidance</th>
<th>Document(s)</th>
<th>Dated Within</th>
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<tbody>
<tr>
<td>1. Protocols for conducting investigations of public health problems and environmental public health hazards</td>
<td>1. Provide protocols that are in place for conducting investigations of public health problems and environmental public health hazards. The protocol must include: a. Protocols for investigations of infectious diseases. Include in the protocols the role of the health department and how other agencies, departments, and/or community stakeholders may be involved. b. Protocols for investigations of non-infectious public health problems or hazards. Include how other agencies, departments, and/or community stakeholders are involved.</td>
<td>1 comprehensive protocol for all problems/hazards; or 2 protocols, one for infectious and one for non-infectious; or a set of several protocols that, together, address infectious and non-infectious health hazards</td>
<td>5 years</td>
</tr>
<tr>
<td>2. Implementation of protocols for conducting investigations of public health problems and environmental public health hazards</td>
<td>2. Describe the health department’s formal processes to ensure that the protocols are followed and conducted in a timely manner. Processes may include, for example, evaluations, audits, case reviews, peer reviews, After Action Reports, etc. The narrative must include: a. A description of the health department’s formal efforts to review investigation protocols and update them, as needed. b. A description of how the health department coordinates with, consults with, and reports investigation results to other health departments (Tribal, state, and/or local health departments). c. A description of how laboratory services are provided to the health department for investigations of public health problems and environmental public health hazards.</td>
<td>Narrative description</td>
<td>Describe the current processes</td>
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**Intended result**

Upload the department’s protocol(s) no older than 5 years old.

Make sure that the protocols cover these items.

Upload a narrative of the current process on a PHAB form.

Make sure that the narrative covers these items.
TYPES OF DOCUMENTS

1. Narrative descriptions of processes, procedures, activities (use PHAB form)
2. Narrative descriptions of examples (use PHAB form)
3. Examples (e.g., communications)
4. Adopted items (e.g., plan, protocol, report, template)
REACREDITATION DOCUMENTATION FORMS

• A unique form for every Requirement
  – Some coversheets
  – Most ask for the details in the Guidance

• Each form will ask:
  “Describe plans for advancement of your health department’s work in the area addressed by this Requirement.”

• When a form is filled out, it must be no more that 5 pages long
Measure 2.1: Public health problems and environmental public health hazards are investigated thoroughly, appropriately, and in a timely manner.

Requirement 1: Protocols for conducting investigations of public health problems and environmental public health hazards.

Instructions:
Upload 1 comprehensive protocol for conducting investigations for all problems/hazards; or 2 protocols, one for infectious and one for non-infectious; or a set of several protocols that together, address infectious and non-infectious health hazards.

The protocol(s) must be no older than 5 years.

Ensure that the protocol(s) includes items (a) and (b) of the Guidance.
**Measure 2.1:** Public health problems and environmental public health hazards are investigated thoroughly, appropriately, and in a timely manner

**Requirement 2:** Implementation of protocols for conducting investigations of public health problems and environmental public health hazards

<table>
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<tr>
<th>Health Department Name</th>
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</table>

**Requirement Narrative**

Provide a narrative description of the health department’s current formal processes to ensure that the protocols are followed and conducted in a timely manner.

Ensure that the description includes items (a) through (c) of the Guidance.

*Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.*

**Continued Advancement**

Describe plans for advancement of the health department’s work in the particular area addressed by this Requirement.
DOCUMENATION

• Reaccreditation Documentation Form MUST be used for all Requirements that ask for a narrative
• Completed forms will be 1 – 5 pages
  – No longer than 5 pages – no more than what is needed
  – BE SUCCINCT
• Be ready to upload documentation when you submit your application (8 weeks)
OVERARCHING QUESTIONS

- Relationship with other levels of health departments
  - Tribal
  - State
  - Local

- Relationship with other health departments
  - Tribal to Tribal
  - State to state
  - Local to local
REPORTING OUTCOMES

Tobacco Stops With Me
StopsWithMe.com
OUTCOMES REPORTING

Requirement for health departments to report health outcomes data

- Not for assessment of health department
- Not submitted to, or used by, the Accreditation Committee
OUTCOMES REPORTING

- Establish a national data base of health outcomes and their associated objectives that accredited health departments have chosen to monitor
- Document how the ongoing work of maintaining accreditation can contribute to better health outcomes
- Encourage the systematic tracking and use of data indicators by health departments
- Provide information to PHAB concerning what outcomes are priorities and are being tracked by health departments
ORGANIZED TOPICS

• Broad areas of health outcomes used to organize topics
  – Organizing framework used is David Kindig’s definition of population health outcomes

• Topics listed under each broad area

  *For example: Under the broad area of mortality you will see homicides, infant mortality, injury mortality, etc.*
INSTRUCTIONS

Health department will select topic and report:

- a specific measurable objective
- benchmark data source
- target
- baseline data
- updated data
- data source for the measurement report
- whether the objective is included in CHA, CHIP, strategic plan, or PHAB standard or measure
INSTRUCTIONS

Health department:

- Will report on 5 – 10 outcomes with reaccreditation

- Will report on the same outcomes with each Annual Report (Section III, submitted with Section II)

- May add outcomes to report on with the Annual Reports if health department and community revise objectives they are tracking
REACCREDITATION PROCESS
Reaccreditation Process: Overview

• Steps basically the same as initial accreditation (application to accreditation)
• Shorter timeframes for each step
• Different documentation requirements
• Health departments must be ready to upload when they apply
• Population Health Outcomes reporting required
• Health department will receive e-PHAB notification - on the first day of the quarter in which it was accredited - that the reaccreditation application is open.
• The application must be submitted by the last day of the quarter in which it was accredited
# Reaccreditation Process

<table>
<thead>
<tr>
<th>RESPONSIBLE PARTY</th>
<th>ACTIVITY</th>
<th>TIMEFRAME</th>
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</thead>
<tbody>
<tr>
<td><strong>1</strong> PHAB</td>
<td>Alerts health department that <strong>reaccreditation application</strong> is due and that the e-PHAB reaccreditation module is available.</td>
<td>Beginning of calendar quarter in which the health department was accredited</td>
</tr>
<tr>
<td><strong>2</strong> Health department</td>
<td>Submits application.</td>
<td>By the last day of the quarter</td>
</tr>
<tr>
<td><strong>3</strong> PHAB</td>
<td>Reviews and accepts the application when it is complete.</td>
<td>2 weeks (usual)</td>
</tr>
<tr>
<td><strong>4</strong> PHAB</td>
<td>Alerts health department that e-PHAB reaccreditation documentation module is available.</td>
<td>Upon determination of a complete application</td>
</tr>
<tr>
<td><strong>5</strong> PHAB</td>
<td>Forwards <strong>invoice</strong> to health department.</td>
<td>1 week (usual)</td>
</tr>
<tr>
<td><strong>6</strong> Health department</td>
<td><strong>Uploads required documentation and completes Population Health Outcomes Reporting.</strong></td>
<td><strong>8 weeks</strong> (Fee must be paid by the time of document submission)</td>
</tr>
<tr>
<td><strong>7</strong> Reviewers</td>
<td>Reviews documents, completes initial assessments of each measure, and identifies what is missing for all measures assessed as “Open Measure.”</td>
<td>Determined by the Review Team</td>
</tr>
<tr>
<td>Step</td>
<td>Responsible Party</td>
<td>Activity Description</td>
</tr>
<tr>
<td>------</td>
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</tr>
<tr>
<td>8</td>
<td>Health department</td>
<td>Uploads clarifying documents.</td>
</tr>
<tr>
<td>9</td>
<td>Reviewers</td>
<td>Reviews new uploads.</td>
</tr>
<tr>
<td>10</td>
<td>Health department and Review Team</td>
<td>Conducts virtual site visit (up to four hours).</td>
</tr>
<tr>
<td>11</td>
<td>Reviewers</td>
<td>Finalize Reaccreditation Report (including review by PHAB staff).</td>
</tr>
<tr>
<td>12</td>
<td>Accreditation Committee</td>
<td>Reviews Reaccreditation Report and determines accreditation status. If continued accreditation is not approved at this time, the Committee will specify which measures need additional work.</td>
</tr>
<tr>
<td>13</td>
<td>Health department</td>
<td>Submits additional documents for specific measures, as required by the Accreditation Committee.</td>
</tr>
<tr>
<td>14</td>
<td>Reviewers</td>
<td>Reviews and assesses documentation.</td>
</tr>
<tr>
<td>15</td>
<td>Accreditation Committee</td>
<td>Reviews assessments and determines continued accreditation status or Not Accredited.</td>
</tr>
</tbody>
</table>
RECOMMENDATIONS

1. Work on your documentation and be ready to upload WHEN YOU SUBMIT YOUR APPLICATION

2. Specifically address the items listed in the Guidance for each Requirement (for each Measure)

3. Develop **CONCISE** narratives
   
   More is not better
THANK YOU