

PHAB

*Advancing
public health
performance*

Tools of the Trade

Public Health Accreditation Resources for Tribes





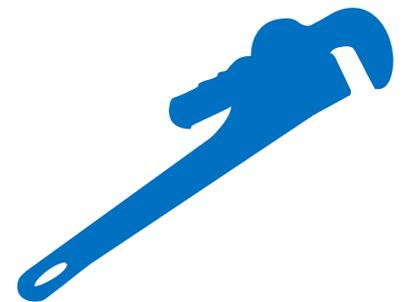
Welcome

-  Why are you here?
-  Purpose
-  Resources
-  Cliché Hunters



The First Tool

the Background





the Background



Non-profit



Chartered in 2007



Launched September 2011



First Accredited February 2013



First Reaccredited Applications – Now!



What is it?

Standards

Assessment

Decision

QI Throughout



PHAB's Goal

The goal of the voluntary national accreditation system is to improve and protect the health of the public by advancing and ultimately transforming the quality and performance of state, local, Tribal and territorial public health departments.



The Second Tool
the Reason



What do you invest?

Time & Resources

Internal Process

Documentation





Why Seek Accreditation?

- Responsive to Change
- Shared Decision-Making
- Workforce Development
- Services and Programs
- Performance Improvement
- Strong Partnerships



Benefits of Accreditation

- Credibility
- Visibility and Accountability
- New Funds
- Streamlined Reporting
- Knowledgeable Peers

A Better Health Department



Benefits of Accreditation

- Identifies Strengths and Improvements
- Strengthens Partnerships
- Prioritizes and Addresses Long-Standing Concerns
- Acts as a “Stimulus”



Benefits of Accreditation

- Quality and Performance Improvement
- Better Identify Strengths and Weaknesses
- Greater Accountability and Transparency



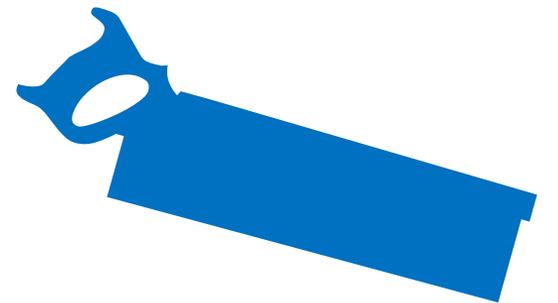
Check Point

What benefits of accreditation do you see for your health department?



The Third Tool

the Preparation





Begin Here...



Photo courtesy of: flickr.com UW Digital Collections



To Be Successful...

- Support
- Define Why
- Be Prepared

You will determine these!



Get Organized





Role of the AC

Communicator

Leader

Manager

Editor

Considerations for Selecting an Accreditation Coordinator

March, 2012

Health department directors can use this information to aid in the selection of their Accreditation Coordinator.

Health departments pursuing PHAB accreditation are required to appoint one person as an Accreditation Coordinator (AC). The AC is an assigned staff member who will lead the health

Accreditation Coordinator responsibilities include:

- Conduct assessments of the health department's readiness to seek accreditation;
- Complete the PHAB Online Orientation, Statement of Intent (SOI), and Application;
- Coordinate the development and implementation of the health department's internal plan to engage staff in the accreditation process;
- Engage partner organizations and community partners in the accreditation



What's the Role of the AT?

Support to the AC

Documentation Gatherers

Subject Matter Experts

Know the Health Department

Quality & Performance Improvement



Who's on the AT?

Members of Various Levels, Disciplines and Programs



5-12



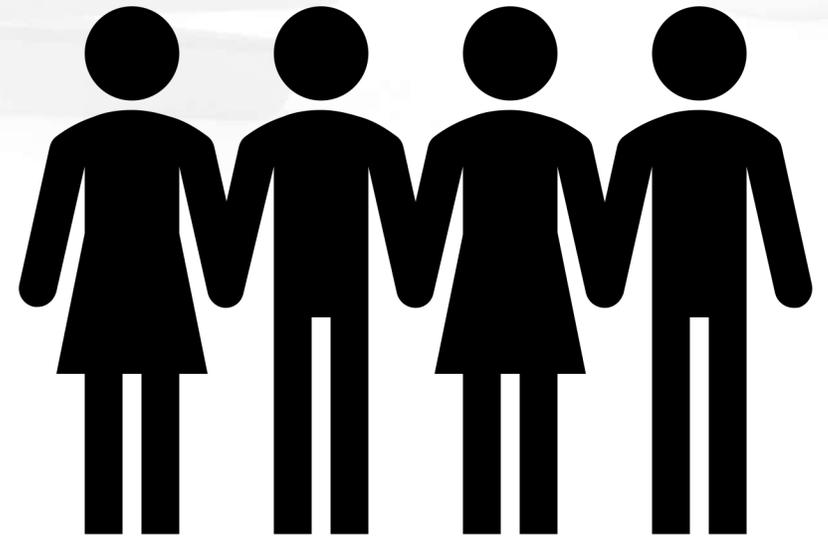
AC & AT

Build Support & Enthusiasm

Learn the Standards & Measures

Assess Where You Are

Go Back to Documentation





Q's for Getting Started

Why you are seeking accreditation?

What do you hope to improve?

What benefits do you see for your department?

What is the amount of leadership support?

A hand holding a wrench and a screwdriver, symbolizing preparation or maintenance. The background is a gradient of orange and blue.

Check Point

What element of preparation needs the most attention?



The Fourth Tool

the Process





Accreditation Process

- 1 Preparation
- 2 Registration & Application
- 3 Document Selection & Submission
- 4 Site Visit
- 5 Accreditation Decision
- 6 Reports
- 7 Reaccreditation



Timelines

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



1. Preparation

-  Applicant Prepares / Assesses Readiness
-  Completes Orientation
-  Readiness Checklists



Readiness Checklists



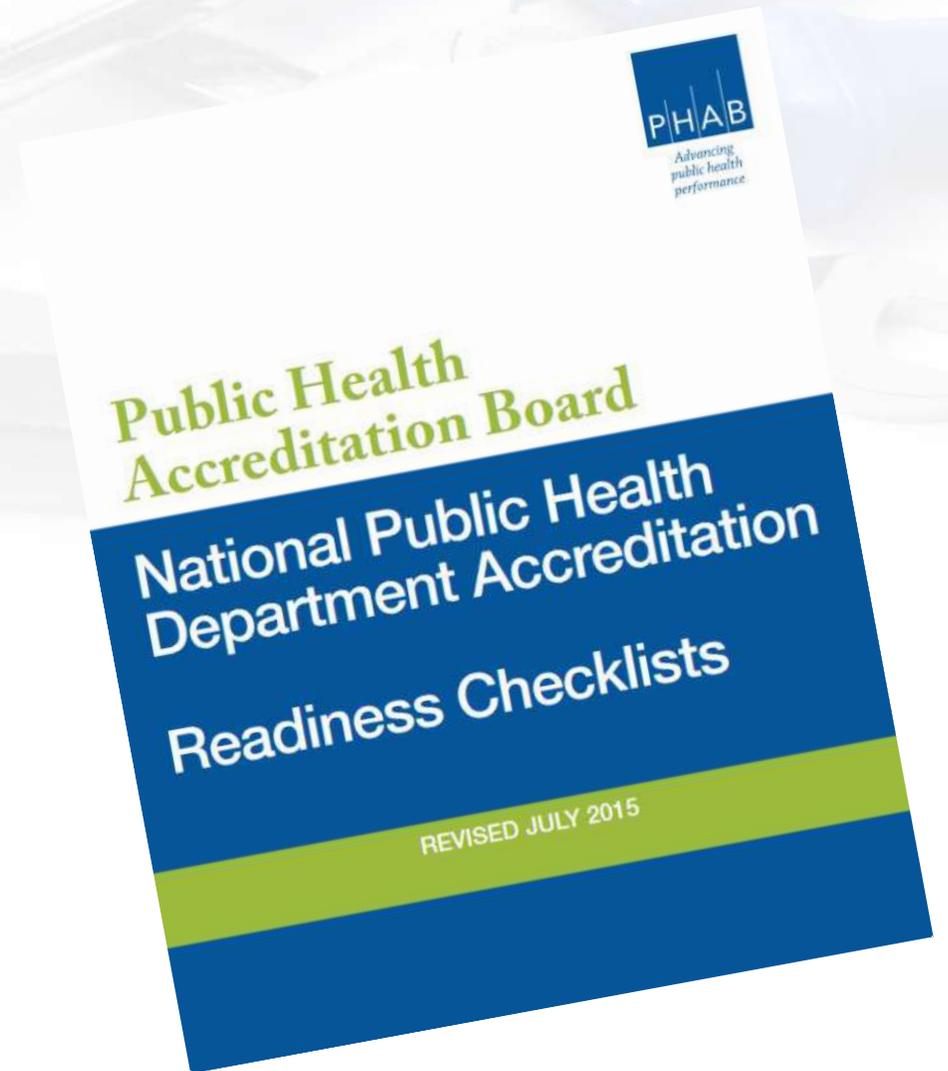
Assessment



Planning Tool



Modify





2. Registration and Application



Registration in *e*-PHAB



Submit Application



Send Fee



Attend In-person Learning Event



3. Documentation



Gather or Create Documents



Assess and Select Documents



Submit Documentation



Completeness Review



4. Site Visit

-  Site Visit Team (SVT) Assigned
-  SVT Conducts Pre-site Visit Review
-  Measures Reopened if Necessary
-  SVT Conducts Site Visit
-  SVT Submits Site Visit Report



5. Accreditation Decision



Accreditation Committee



Accreditation Status:

- Accredited (5 years)
- Action Plan
- Not Accredited



6. Annual Reports

-  Part 1: Continued Accreditation Status
Including Measures that must be worked on
-  Part 2: Continuous Quality Improvement
-  Part 3: Outcomes Reporting (Reaccreditation)



7. Re-Accreditation



Different Requirements, Standards & Process



Builds on Initial

- Demonstrate Capacity
- Build on Quality and Performance



Check Point

What step in the process gives you the most stress?



The Fifth Tool

the Standards



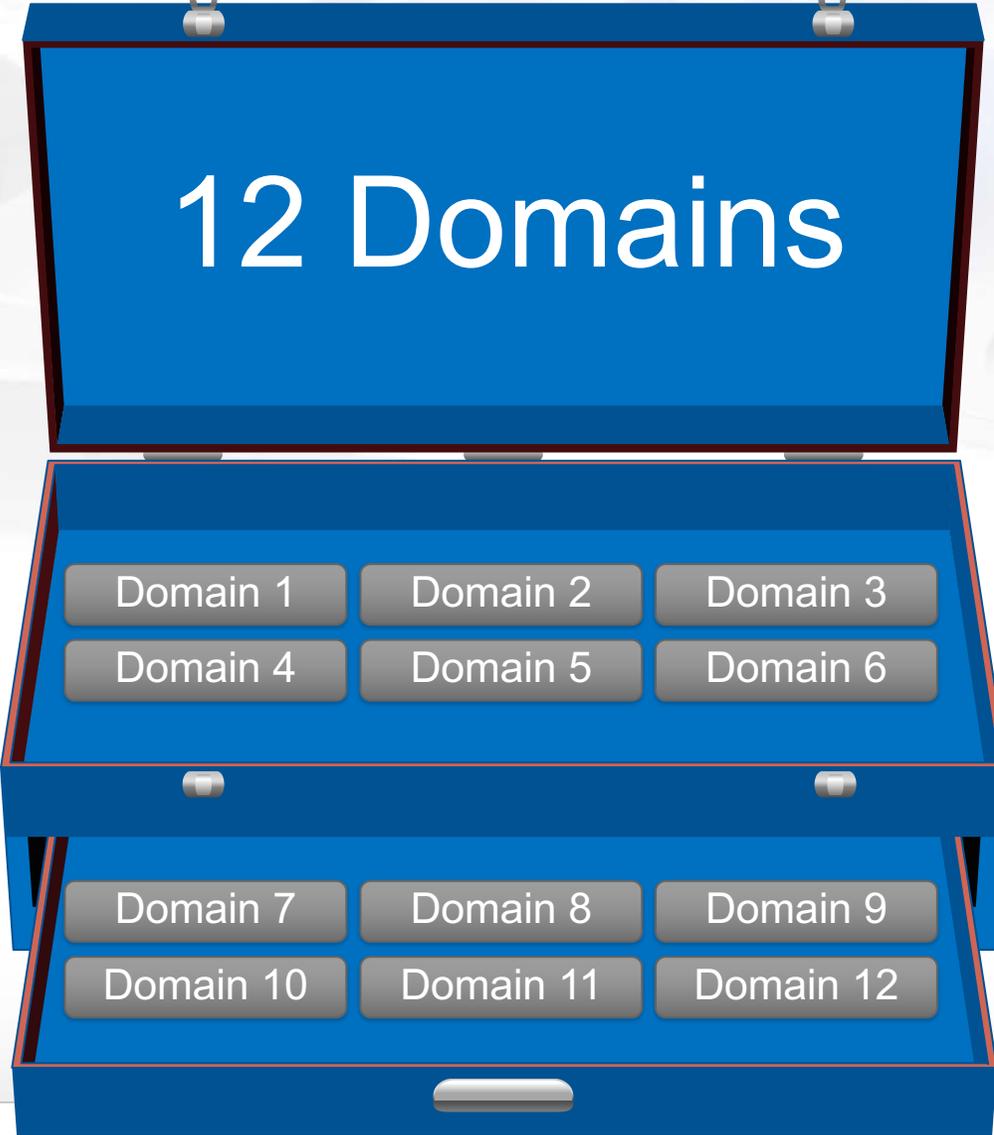


Apply the principles of standards to all of government departments and agencies to ensure consistency and clarity in standards and to promote partnerships



PHAB Standards & Measures

- Domain 1: Conduct Assessments
- Domain 2: Investigate
- Domain 3: Inform and Educate
- Domain 4: Community Engagement
- Domain 5: Policies and Plans
- Domain 6: Enforce Laws
- Domain 7: Improve Access to Care
- Domain 8: Competent Workforce
- Domain 9: Evaluate and Improve
- Domain 10: Evidence Base
- Domain 11: Administration
- Domain 12: Governance



12 Domains

Domain 1

Domain 2

Domain 3

Domain 4

Domain 5

Domain 6

Domain 7

Domain 8

Domain 9

Domain 10

Domain 11

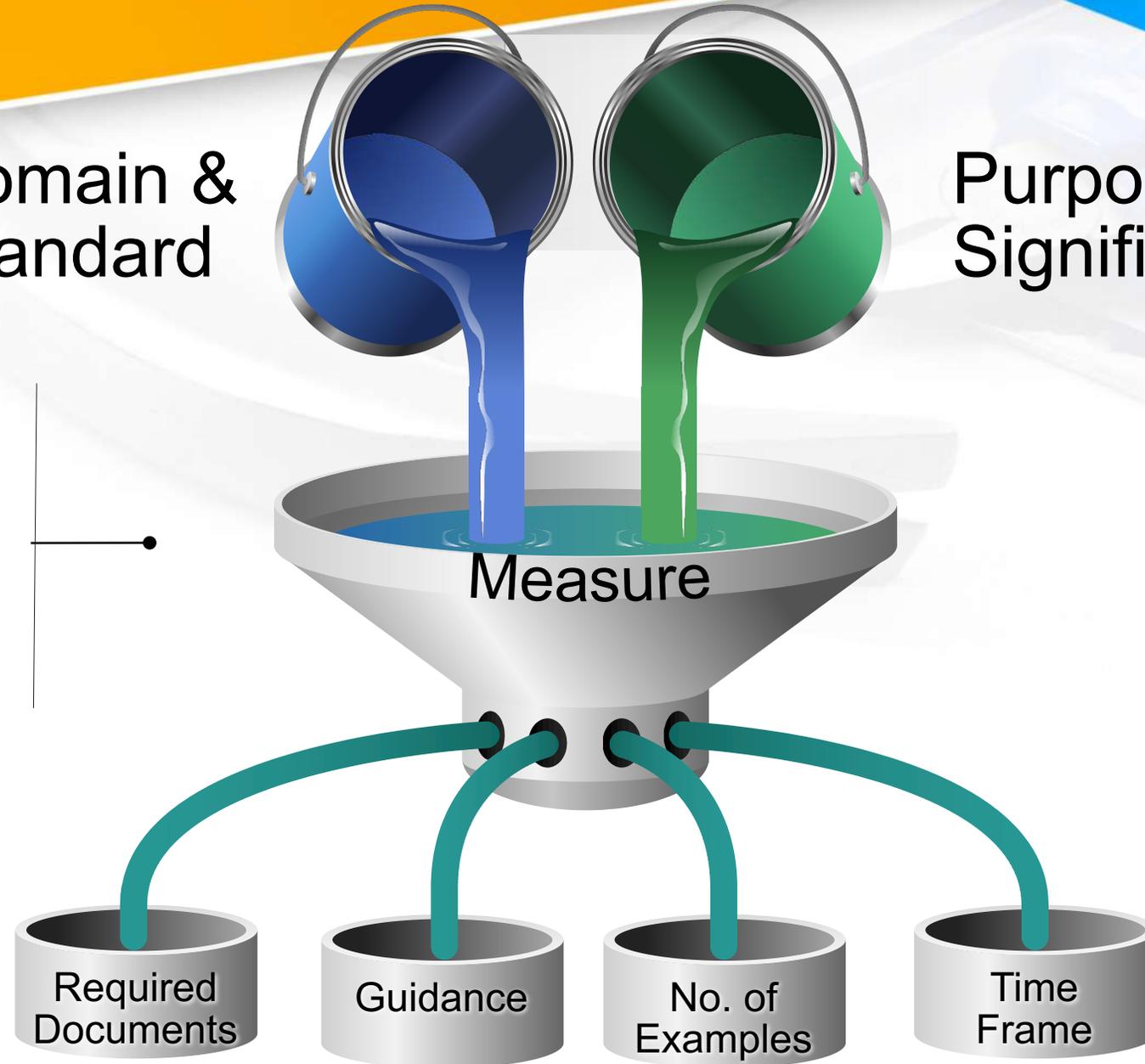
Domain 12



Domain &
Standard

Purpose &
Significance

The Standards Framework



Standard 5.2: Conduct a comprehensive planning process resulting in a Tribal/state/community health improvement plan.

MEASURE	PURPOSE	SIGNIFICANCE	
<p>Measure 5.2.1 T A process to develop a Tribal community health improvement plan</p>	<p>The purpose of this measure is to assess the Tribal health department's collaborative community health improvement planning process and the participation of stakeholders.</p>	<p>While the Tribal health department is responsible for protecting and promoting the health of the population, it cannot be effective acting unilaterally. The health department must partner with other sectors and organizations to plan and share the responsibility for health improvement. Other sectors of the community and stakeholders have access to additional data and bring different perspectives that will enhance planning. A collaborative planning process fosters shared ownership and responsibility for the plan's implementation. The community health improvement process is a vehicle for developing partnerships and for understanding roles and responsibilities.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p>1. Tribal community health improvement planning process that included:</p>	<p>1. The Tribal health department must document the collaborative community health improvement process. The process used may be an accepted national model; state-based model; a model from the public, private, or business sector; or other participatory process model. When a specific model is not used, the key steps undertaken that outline the process used should be described.</p> <p>National models include, for example, Mobilizing for Action through Planning and Partnerships (MAPP) (developed for local health departments but can be used in Tribal health departments), Association for Community Health Improvement (ACHI) Assessment Toolkit, Assessing and Addressing Community Health Needs (Catholic Hospital Association of the US) (http://www.chausa.org/docs/default-source/general-files/cb_assessingaddressing-pdf.pdf?sfvrsn=4), and the University of Kansas Community Toolbox (http://ctb.ku.edu/en/node/9).</p> <p>Examples of tools or resources that can be adapted or used as part of the community health improvement planning process include NACCHO's Resource Center for Community Health Assessments and Community Health Improvement Plans, Community Indicators process project, Asset Based Community Development model, Tribal Accreditation Readiness Guidebook and Roadmap, Inter Tribal Council of Arizona's Tribal CHA Toolkit, National Public Health Performance Standards Program (NPHPSP), Assessment Protocol for Excellence in Public Health (APEX/PH), Guide to Community Preventive Services, and Healthy People 2020.</p>	<p>1 process</p>	<p>5 years</p>



Check Point

What domain is the most problematic for you?



The Sixth Tool

the Process Documents





Action Plans

July 2014

ACTION PLAN FORMAT

THE ACTION PLAN MUST BE SUBMITTED ON THE PHAB ACTION PLAN TEMPLATE

Action Plan Template

The health department will complete one template form that will include all of the measures that are required to be included in the Action Plan. The health department will upload the Action Plan in e-PHAB as one upload document.

- Using the template, list Objectives and Actions the health department plans to take that will demonstrate conformity with the measure. List as many Action Plan Objectives and Actions as are needed for the health department to achieve conformity with the measure.
- For each objective describe one or more pieces of documentation that you plan to submit after you have implemented the Action Plan. You may submit additional documentation after the Plan's implementation, if you wish.

The Action Plan should be direct and specific. The Accreditation Committee is not looking for long narratives. Health Departments should make it clear what steps they plan to take.

QUALITY IMPROVEMENT

The purpose of the Action Plan is to provide the health department with an opportunity for quality improvement. The health department may already have the documentation that is required. PHAB does not recommend that the health department simply say that the documentation existed at the time of the Site Visit and it will be provided as documentation for the Action Plan. The plan should indicate efforts for improvement.



When the PHAB Accreditation Committee reviews a Site Visit Report for consideration of a health department's accreditation status, they have two status options: Accredited or Accreditation Action Plan Required. The requirement for an Action Plan means that the accreditation decision has been deferred until the health department completes additional work and documentation is submitted and reviewed. The health department's status in the e-PHAB system remains confidential, as the health department is still in the accreditation process.

Action Plan Process

- The health department will be notified by email that they must submit an Action Plan. The notification will list the specific measures selected by Accreditation Committee that must be addressed in the Action Plan.
- The health department director must accept the Action Plan status in e-PHAB.
- The health department should submit a draft of the Action Plan to their Accreditation Specialist for informal review and technical assistance. Please allow up to two weeks for your Accreditation Specialist's feedback.
- The Health Department must submit the Action Plan through e-PHAB within 90 days of receipt of notification that an Action Plan is required. (If the Plan is not submitted in 90 days, the health department's status will be Not Accredited.)
- The Accreditation Committee will review the Action Plan and approve or reject it.
- If the plan is rejected, the health department must submit a revised Action Plan. The revised Action plan must be submitted within 60 days of notification that a revised plan is required. (If the Action Plan is rejected a second time, the health department's status is Not Accredited.)
- The health department has up to one year from receipt of notification that the Plan has been approved to implement the Action Plan and submit documentation of its implementation. (If the documentation is not submitted within the year, the health department's status is Not Accredited.)
- PHAB trained Site Visitors will review the documentation against the approved Action Plan and will assess each measure.
- The Site Visitors' assessments will be reviewed by the Accreditation Committee. The Committee will make a final decision - Accredited or Not Accredited.

Guidance for the Development of the Action Plan

- Address each of the measures identified by the Accreditation Committee; do not omit any measures.
- Review the Standards and Measures for those measures that are required in the Action Plan. Review the standard, measure, requirements and guidance.
- Review the Site Visit Report Conformity Comment for guidance concerning what was missing and the Opportunity for Improvement Comment for suggestions about what needs to be different or completed.
- Identify specific opportunities for improvement based on the Standards and Measures and the Site Visit Report.
- Develop plans to address each of the measures. Clearly describe what actions the health department will take. The actions may be consecutive or concurrent.
- Identify what documentation the health department plans to submit to provide evidence that the plan has been implemented. Additional documentation may be submitted, but the minimum of documentation that will be provided must be indicated in the plan.
- Do not use examples from programs that are outside of PHAB's scope of authority.



Public Health Accreditation Board

Acronyms & Glossary of Terms

VERSION 1.5
Adopted December 2013



Public Health Accreditation Board

Guide to National Public Health Department Initial Accreditation

ADOPTED JUNE 2015



Check Point

What tip sheets or guidance would be most helpful to you?



The Seventh Tool

the Documentation





Plans & Systems

Community Health Assessment

Community Health Improvement Plan

Strategic Plan

Quality Improvement Plan

Workforce Development Plan

Emergency Operations Plans

Performance Improvement System

Organizational Branding Strategy

Risk Communication Plan



6. That the Applicant has an adopted and current (dated within the last five years) community health assessment, community health improvement plan, and department strategic plan.
7. That the Applicant has in place a current (dated within the last five years) or has substantially developed and is near completion of the following plans: a workforce development plan, a public health emergency operations plan, and a quality improvement plan.
8. That the Applicant has in place or has substantially developed a performance management policy/system and an organizational branding strategy, and agrees to provide copies of any documents evidencing or describing such policy, system and strategy.



Documentation Review Process

Review
Set up
Gather
Select
Assess
Prepare
Create
Upload



PHAB Expectations

-  Basic Requirements Are Met
-  AC Has Reviewed Uploads Prior to Submission
-  Clearly Marked and Ready for SV Review
-  Intent of Measure Is Met in the Documents



Tell Your Story

You know who you are, what you do and how you do it.

- Look at the documents like Site visitors do not.
it's the "first time"
Connect the dots for the SV.
- Explain the context
- Identify the requirements
- Package the example





Not Prescriptive

Standards state what must be in place...

...NOT how it's done or who does it

– You Determine



Assessing Documentation



Stuff  Evidence



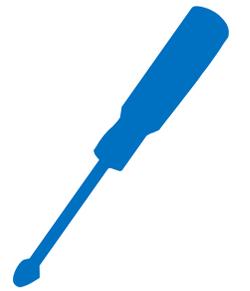
Assessment Process

— Four Questions

1. What do I have?
2. How does it demonstrate conformity?
3. What do I want this to say?
4. How would it be assessed?



David's Top 10 Documentation Tips

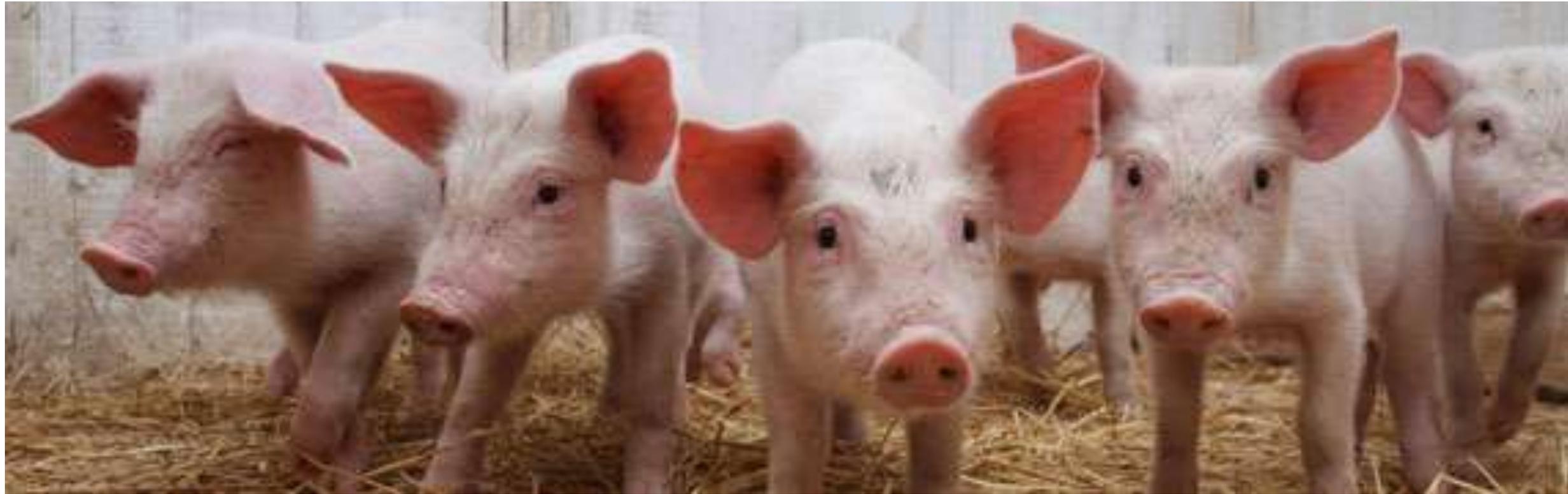


1. Follow the Goldilocks Principle





2. Slop is for Hogs - Not Your Uploads

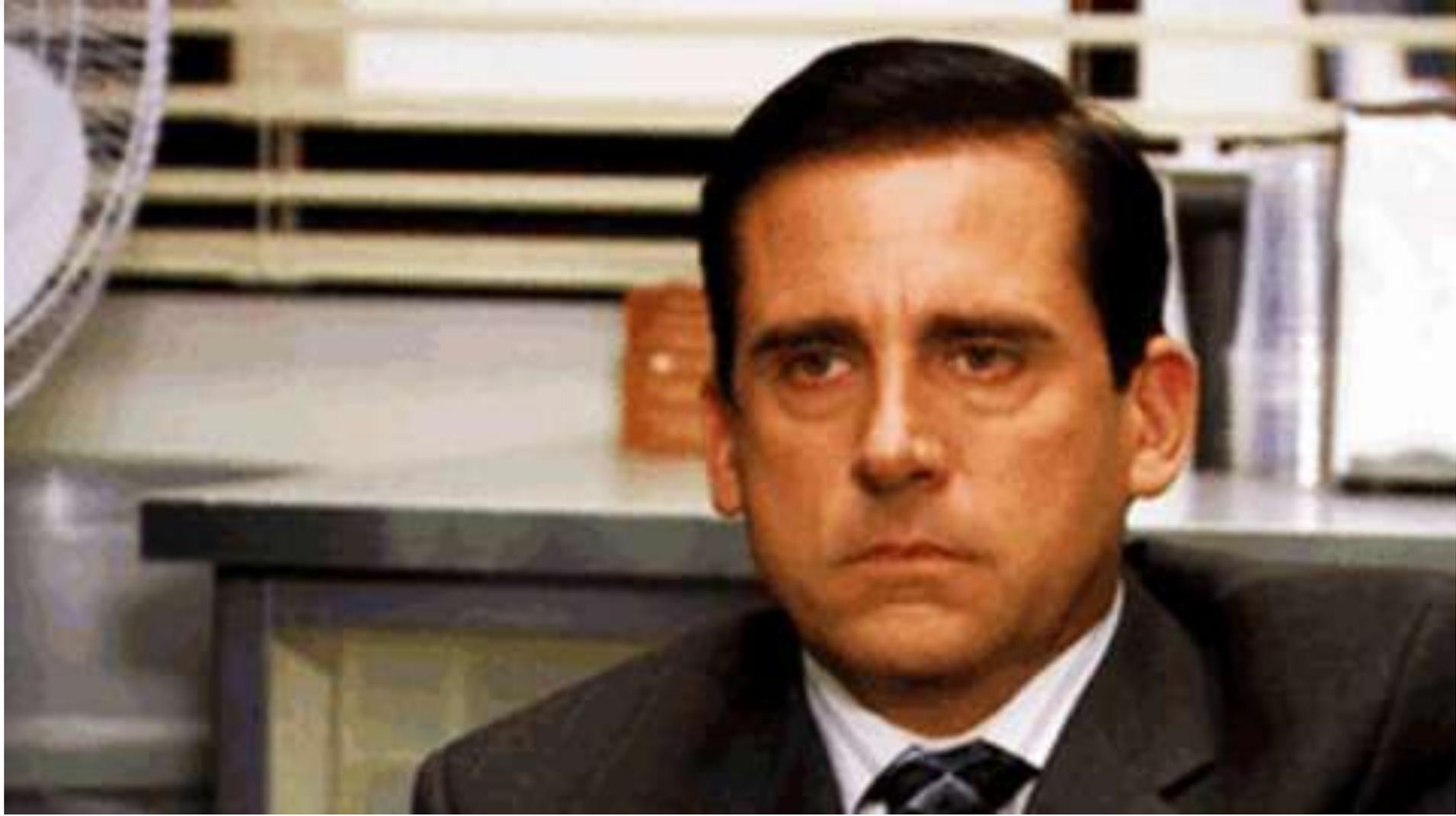


3. Don't Confuse or Frustrate Your Site Visitors





4. Get Rid of that Blank Stare





5. Draft Root Beer is OK – Draft Documents are Not





6. Wear out Your Yellow Highlighter



7. Become a Master Storyteller

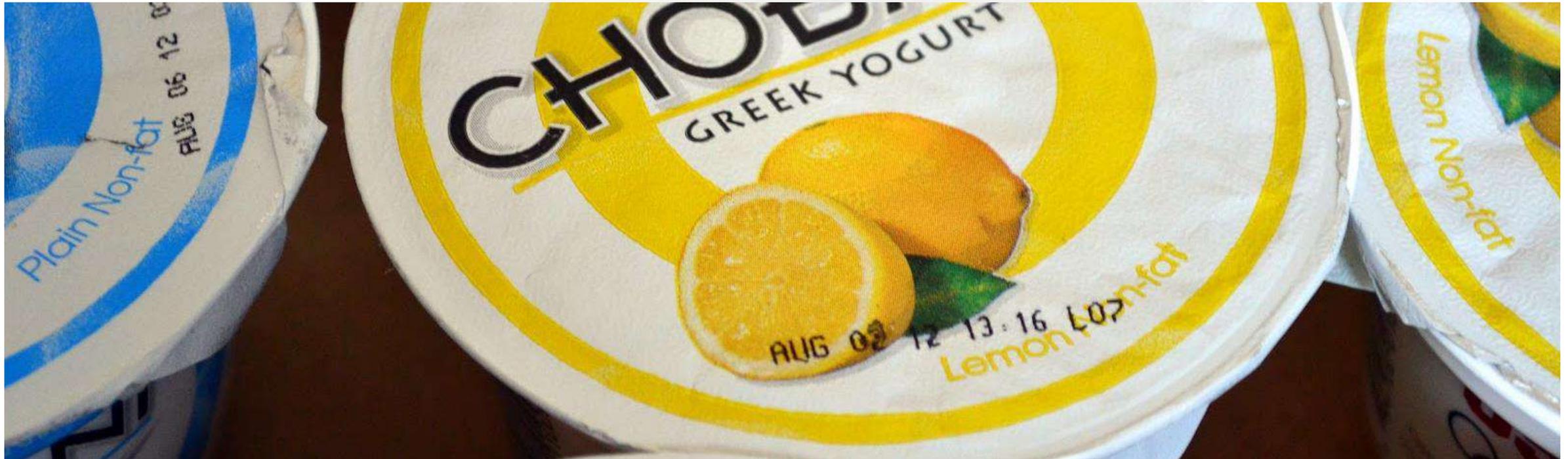




8. No Highly Inappropriate Actions



9. If your Yogurt needs a date,
so does your Document





10. Lather, Rinse and Repeat and Repeat...



Lather, rinse and repeat. Avoid eye irritation. In case of eye contact,



Check Point

What documentation is available to you for meeting the measures?



The Eighth Tool
the Help





What PHAB Does

- ✓ Answer questions about:
 - Intent & interpretation
 - Types of documentation
 - Scope of examples
 - Accreditation process and timing
 - PHAB materials
 - e-PHAB
- ✓ Provide process support



What PHAB's Partners Do

Resources, Templates, Advice, Consultation, workshops, preparation





Sources for Assistance

PHAB:	www.phaboard.org
Seven Directions	indigenousphi.org
ASTHO:	www.astho.org
NACCHO:	www.naccho.org
NALBOH:	www.nalboh.org
NIHB:	www.nihb.org
NNPHI:	www.nnphi.org
PHF:	www.phf.org
PHQIX:	www.phqix.com
PHPIN:	www.nnphi.org/phPIN



Check Point

What my next steps?

Give me a call! Send me an email!

David Stone

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