**Chippewa County**

**Department of Public Health**

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**Chippewa County Department of Public Health**

**2017-2018 Accreditation Time Line**

**REQUIREMENTS FOR VOLUNTARY ADDREDITATION:**

* Agency strategic plan 2017-2020
* Community Health Assessment within last 5 years, using comprehensive data and including community partners to determine priority health issues. 2014-2015-CHA complete. 2017-2018 CHA in progress
* Community Health Improvement Plan (CHIP) that outlines implementation of evidence based strategies to impact on the priority problems 2016-2018
* Documentation related to the domains and standards with the self-assessment document
* Development and use of a performance management system including continuous quality improvement. (VMSG)

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| STEP | ACTIVITY | COMPLETED/DUE DATE |
| Accreditation Organizational Pre-Planning | NACCHO grant awarded Sept 29, 2017  NACCHO contract signed by both parties-Oct. 16, 2017  Accreditation Fiscal management meeting 1st invoice created & submitted to NACCHO  Accreditation Coordinators appointed  Director & Accreditation Coordinators complete Online training  Director & Accreditation Coordinators read AC Book & AC Coordinator books  Accreditation Coordinators set meeting dates & times  PHAB Letter of Intent Requirements:   1. Community Health Assessment 2014-2015 complete  * Community Health Assessment 2017-2018 in progress  1. Community Health Improvement Plan 2016-2018 complete 2. Agency Strategic Plan 2017-2020 complete 3. Health Officer & Accreditation Coordinators complete PHAB online training-Complete   Complete Accreditation Application Roadmap  Accreditation presentation to Agency Leadership/Management team  Accreditation update during December 2017 Board of Health meeting | **Complete**  **Complete**  **Jan. 1, 2018**  **Complete**  **Dec. 20 2017**  **Oct 19, 2017**  **Oct. 19, 2017**  **Feb. 21 2018**  **Oct. 24, 2017**  **Dec. 31, 2017**  **Complete**  **Dec 21, 2017** |
| Accreditation Planning | Organized meetings for domain self-assessment with each domain team | **Completed** |
| Accreditation Team Planning | Set up Domain Team Lead meeting to do PHAB online training  Accreditation presentation during All -Staff meeting in December 2017 | **Dec 7, 2017**  **Dec. 20, 2017** |
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| Meeting of accreditation domain team leads   * Overview of accreditation * Review of the self-assessment tool * Discussed an internal system for organizing documentation (template) * PHAB online training * Domain binder * Accreditation timeline | **December 7, 2017** |
| Meet monthly with the domain leads  Meet monthly all staff –giving updates to all staff | **March 2018** |
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| Complete the Self-Assessment Tool for each domain | Domain self-assessment meetings:   * Do self-assessment for selected domain * Delegation of domain team tasks and set meetings * Review internal system for organization documentation on Q-drive * Score measures based on documentation | **January/February 2018** |
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| Review completed Self-Assessment of all Domains | * Meet with AC coordination team to review the self-assessment * Meet with Domain team to discuss self-assessment * Identify strengths and weakness and prioritize tasks | **March 2018** |
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| Revise, review, and implement PM/QI, WFD, CP | * AC coordinators review plans and make recommendations to domain leads and strategic planning teams * Plans updated and implemented * Staff education about the plans presented at all staff meetings | **2018** |
| PHAB Accreditation Application Process | * Accreditation team will complete the required PHAB online orientation * Complete the PHAB statement of intent | **Oct 2017**  **Feb 21, 2018** |
| Receive and complete the online application for accreditation | **March 21,2018** |
| Upload required documentation into the PHAB online accreditation system | **2018-2019** |
| If PHAB deems the documentation to be complete, a site visit is scheduled | **2018-2019** |