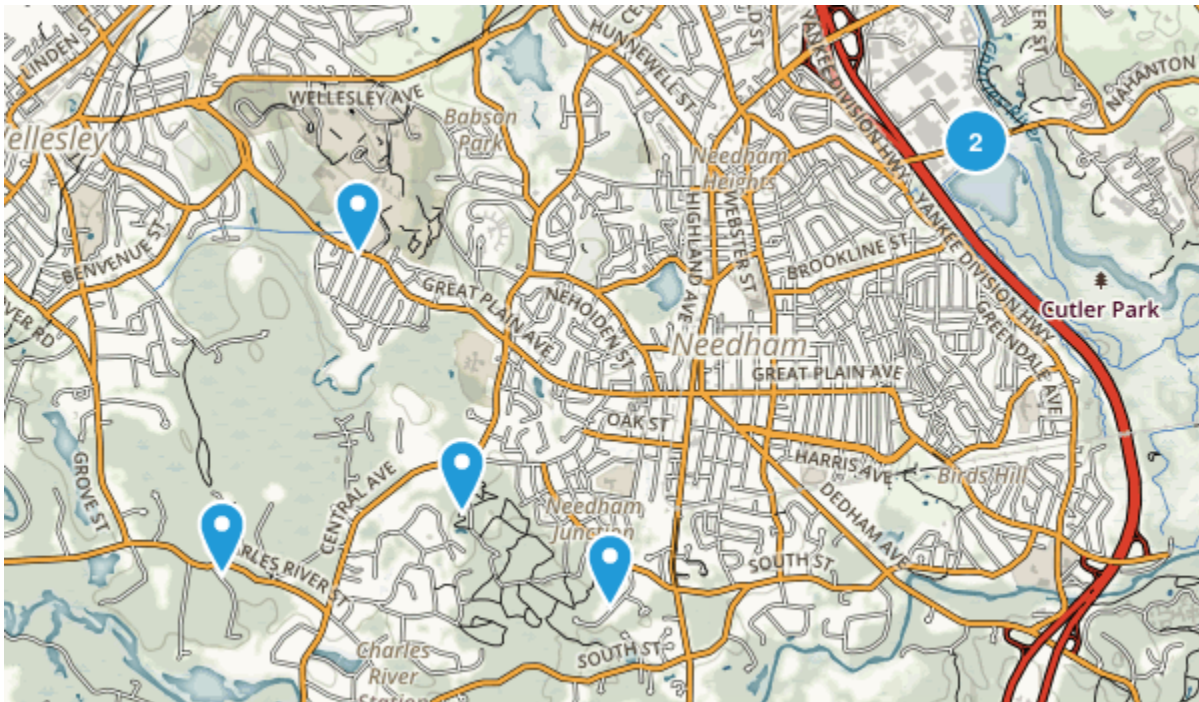# Needham Public Health Division

Road Map to Accreditation

May 31, 2018

Revised May 31, 2018
Lynn Schoeff

The Needham Public Health Division is working toward national accreditation from the Public Health Accreditation Board (PHAB). The preparation for accreditation is long and labor intensive but will, in the long run, enhance the performance and quality of services provided by the department.

Accreditation provides local health departments with the opportunity to strive for a set of quality standards with the goal of continuously improving department capacity, quality, and accountability. Achieving accreditation recognizes a public health department's successful completion of an intensive application and assessment process to ensure it meets PHAB standards.

Background

<u>Why Pursue Accreditation?</u>
Seeking voluntary accreditation through PHAB will enhance the Needham Public Health Division's ability to:

- Effectively and efficiently meet community needs with high quality essential services;
- Improve operational processes and protocols in the process of meeting requirements;
- Enhance management processes and develop leadership within the health department;
- Adopt quality improvement practices;
- Adopt performance management practices;
- Better understand and build on the health department's strengths and address areas in need of improvement;
- Improve competitiveness for funding;
- Strengthen relationships with community stakeholders and policy makers;
- Enhance the department's status both locally and nationally.

<u>The Challenges to Pursuing Accreditation</u>

Public Health accreditation was developed for much larger health departments (unlike in Massachusetts, most health departments in the US are county-based and have significantly greater scope, resources, and responsibilities). Most of the 150 health departments that have achieved accreditation did so by fully engaging staff members and by assembling "accreditation teams" to meet the Standards and Measures established by PHAB.

The health departments that are most likely to succeed in this process are those that have already embraced and incorporated Quality Improvement and Performance Management into department operations.

The process can take several years, even for large and well-resourced local health departments. Some communities in Massachusetts have spent five or more years working toward accreditation.

Needham's Road to Accreditation

Health departments typically divide the work toward accreditation into phases, although there are several ways to organize this thinking. We have chosen the following:

    I.   Pre-application preparedness
   II.   Organizational readiness
  III.   Quality improvement and performance management
  IV.   Document organization
   V.   Application pre-requisites
  VI.   Application
 VII.   Accreditation requirements
VIII.   Site visit

It should be noted that the process is not necessarily linear. Some of the work can be accomplished quickly with moderate effort while some standards and measures require adopting new ways of working and thinking and significant time commitments from staff members.

PHASE	ACTIVITY	DUE DATE and COMPLETION	
I. Pre-application Preparedness	During this initial phase the Needham Director of Health and Human Services and the Accreditation Coordinator will become thoroughly familiar with PHAB, the 12 Domains of Accreditation, Standards and Measures, application pre-requisites, and the resources necessary to achieve accreditation	**April 2018**	
	• Accreditation Coordinator and HHS Director review PHAB Standards and Measures	Jan 2017	Jan 2017
	• Orientation for staff and Board of Health	Jan 2017	Jan 2017
	• Assess Needham's readiness to undertake accreditation	Jan 2017	Jan 2017
	• Prioritize accreditation tasks	Feb 2018	Apr 2018
	• Join state and national accreditation networks	Jan 2018	Jan 2018
	• Develop an internal communication plan regarding progress toward accreditation	Mar 2018	Mar 2018
	• Complete formal readiness assessments using NACCHO and PHAB tools	Apr 2018	May 2018
	• Complete Roadmap to Accreditation	May 2018	May 2018
II. Accreditation Organizational Readiness	During this phase we will conduct organizational self-assessments of system readiness (using PHAB Standards and Measures) and of performance management readiness (using the Turning Point Performance Management Self-Assessment tool).	**September 2018**	
	• Establish Accreditation Team	Sep 2017	Dec 2017
	• Elaborate on and develop a plan to address deficiencies discovered in self-assessments	Jun 2018	
	• Initial identification of documentation available for each domain	Jan 2017	Jan 2017
	• Conduct performance management self-assessment	Aug 2018	
	• Identify strengths and weaknesses in performance management	Sep 2018	

III. Quality Improvement and Performance Management	During this phase Needham will train staff on Quality Improvement and Performance Management; will identify projects that will benefit from QI, will develop a comprehensive QI plan in the context of Performance Management program.	**November 2018**	
	• Identify a Quality Improvement Team	May 2018	
	• Train staff on QI concepts and tools	May 2018	
	• Establish a QI tracking system	Jun 2018	
	• Develop QI plan	Jun 2018	
	• Begin QI project	Jun 2018	
	• Train staff on Performance Management	Sep 2018	
	• Establish Performance Management system incorporating QI	Nov 2018	
IV. Document Organization	This phase includes assigning Domain Leaders[1] to identify existing documentation to meet PHAB requirements and documentation gaps. A documentation management system will organize, track, and facilitate PHAB submissions.	**September 2018**	
	• Develop documentation management system including tracking system with expiration alerts.	Jul 2018	
	• Assign staff members as Domain Leaders	Jul 2018	
	• Identify existing documentation	Aug 2018	
	• Identify documentation gaps	Aug 2018	
	• Develop plan to produce required documents	Sep 2018	
	• Assign staff to tasks	Oct 2018	
V. Application Pre-requisites	Needham produces the three pre-requisites for accreditation: Community Health Assessment (CHA); Community Health Improvement Plan (CHIP); Department Strategic Plan	**February 2019**	
	• Evaluate Beth Israel Deaconess Needham (BID-N) Community Health Needs Assessment for use in CHA	May 2018	May 2018
	• Develop plan to augment BID-N assessment	Jun-Jul 2018	
	• Engage community members	Jul-Aug 2018	
	• Develop Community Health Assessment Addendum	Aug-Oct 2018	
	• Gather additional data (survey, focus groups, etc.)	Sep-Oct 2018	
	• Draft Community Health Assessment	Oct 2018	
	• Finalize Community Health Assessment	Nov 2018	
	• Continue the CHA process into the CHIP	Jan 2019	
	• Finalize Division Strategic Plan	Mar 2019	
VI. Application	Having accomplished the pre-requisites, Needham will submit the Letter of Intent to PHAB	**April 2019**	
	• Submit Letter of Intent	Apr 2019	
	• Submit PHAB fee	Apr 2019	
	• Submit pre-requisites	Apr 2019	
VII. Meeting Accreditation	During this phase Needham will provide PHAB with all required documentation and respond to PHAB requests. Needham will also participate in all necessary training and orientation meetings.	**March 2020**	

---

[1] Larger local health departments establish Domain Workgroups to work with Domain Leaders. Given the size of the Needham Public Health Division staff, workgroups are unfeasible.

May 14, 2018

Requirements	• Accreditation Coordinator will attend necessary meetings and orientations at PHAB.	Jun 2019	
	• Assure that all required documentation meets PHAB requirements and date restrictions.	Apr '19 – Mar 2020	
	• Submit required documentation.	Apr '19 – Mar 2020	
VIII. **Site Visit** **Preparation**	A site visit team will be established and prepared during this phase.	**May 2020 or as determined by PHAB**	
	• Identify members of the site-visit preparation team including the Director of HHS.	May 2019	
	• Solicit consultation from accredited local health departments.	May 2020	
	• Conduct a mock site-visit	Apr 2020	

Pre-Application (April 2018)	Organizational Readiness (Sept. 2018)	QI and Performance Management Plans (Nov. 2018)	Document Organization (Sept. 2018)	Application Pre-requisites (Feb. 2019)	Application (April 2019)	Accreditation Requirements (March 2020)	Site Visit	Post Site Visit
Review Standards & Measures	Establish PHAB Team	Identify QI Team	Develop & implement doc management system	Evaluate value of BID-N Community Health Needs Assessment	Submit statement of intent	Attend necessary meetings at PHAB	Form site visit prep group	Announce accreditation decision
Orient staff and Board	Plan to address deficiencies	Train staff on QI	Assign Domain Leaders	Plan to augment BID-N assessment	Submit pre-requisites	Identify required documents	Solicit TA from accredited LHDs	Celebrate with staff and community
Assess readiness	Conduct self-assess against Standards & Measures	Establish QI tracking system	Identify existing documents	Engage community members	Pay fees	Assure timeframe for documents	Conduct mock site visit	Establish system for continued doc management
Prioritize tasks	Self-assessment on Performance Management	Develop QI plan	Identify and plan to address document gaps	Develop CHA addendum		Submit required documents		Assure ongoing performance management and QI program
Join networks	Identify PM strengths and weaknesses	Begin QI project	Assign staff to PHAB tasks	Gather more data				
Link with other LHDs		Train staff on PM		Write CHA				
Internal Comm Plan		Establish PM system		Develop CHIP				
Roadmap				Finalize Strategic Plan				

May 14, 2018