

Early Preparation for Local Health  
Department Accreditation  
Clark, Delaware & Henry Counties  
Technical Assistance Session 1

Presented by the  
Indiana Public Health Association  
January 23, 2013

# INTRODUCTION

## Accreditation Support Initiative

- Funded through NACCHO by the Office for State, Tribal, Local & Territorial Support at the U.S. Centers for Disease Control & Prevention.
- Grants to LHDs & organizations to support LHDs to prepare for accreditation.
- December, 2012 through May, 2013

# IPHA's proposal

1. Statewide Orientation – Why, How & When to Apply for Accreditation
2. TA to Clark, Delaware & Henry Counties
  - Choose a model for Community Health Assessment (CHA)
  - Data resources & partnerships
  - Lay out work plan to complete application
3. Archive “products” for future use

# Today

- Quick review of application process
- Initial introduction of CHA models
- Introduction to resources for data

# February 6

## Working with Local Partners

- Who are essential partners in the CHA?
- “Community” involvement beyond agencies

## Role of the Board of Health in Accreditation

- References to & requirements of the “governing body” in accreditation

# On-site Sessions 1

- Select CHA tool
- Become familiar with its process & requirements
- Begin to identify locale specific required data & sources

February 20, 27 & March 6

# On-site Sessions 2

- Identify county-specific partners for CHA; strategy for resident involvement
- Define & plan for role of board of health

March 13, 20 & 27

# On-site Sessions 3

- Develop county-specific work plan & timeline to complete application

April 10, 17 & 24



# Applying for Accreditation Why, How & When

PHAB provides much  
of the following content

# Why Seek Accreditation

- Advance quality & performance within LHDs
- Improve service, value, & accountability to stakeholders
- Improve management, develop leadership
- Improve relationships with the community
- Encourage & stimulate quality & performance improvement

# Why - continued

- Document the capacity of the LHD to deliver the 3 core functions & 10 Essential Services.
- Declare that the LHD has & will continue to accomplish an appropriate mission & purpose
- Raise staff morale
- Educate & raise expectations of community & policy makers

# How – The 7 Steps

## **Pre-Application**

- Health department prepares and assesses readiness, completes online orientation, and informs PHAB of its intent to apply

## **Application**

- Health department submits application form and fee, and completes applicant training

## **Document Selection & Submission**

- Applicant selects documentation for each measure, uploads it to e-PHAB, and submits it to PHAB

## **Site Visit**

- Site visit of the health department is conducted by PHAB trained site visitors and a site visit report is developed

# 7 Steps - continued

- **Accreditation Decision**
- PHAB Accreditation Committee will review the site visit report and determine accreditation status of the health department
- **Reports**
- If accredited, the health department submits annual reports and fees for five years
- **Reaccreditation**
- As accreditation status nears expiration, the health department applies for reaccreditation

# Getting Started

- 1 Appoint an Accreditation Coordinator and department-wide team for review of the process
- 2 Review PHAB's Online Orientation
- 3 Review the documentation requirements for the measures; be sure that documentation is "up to speed".
- 4 Begin/refine work on the prerequisites
  - Community Health Assessment
  - Community Health Improvement Plan
  - Department Strategic Plan
- 5 Prepare documentation according to the guidance contained in the **PHAB Standards and Measures Version 1.0**.

# When? Several steps impact timeline

- Decision to seek accreditation
- Pre-application
  - Assess readiness (PHAB check lists)
  - Statement of Intent
  - Orientation scheduled by PHAB
- Complete or update CHA, CHIP & Agency Strategic Plan (CHA & CHIP might take 1½ -2 yrs)
- SUBMIT APPLICATION & FEE
- Select, gather & submit documentation (within 12 months of being put in queue)
- PHAB Site Visit
- PHAB board accreditation decision

# Community Health Assessments



# Systematic collection & analysis of data

- Provide the LHD and community with a sound basis for decision-making.
- Conduct in partnership with other community organizations
- Include collecting data on:
  - health status
  - health needs
  - community assets
  - resources
- Other determinants of health status

# Community Health Assessment PHAB- Standards and Measures

- Standard 1.1: Comprehensive community health assessment
- Community health assessments
  - Describe the health status of the population
  - Identify areas for health improvement
  - Determine factors that contribute to health improvement
  - Identify assets & resources that can be mobilized to address population health improvement

<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

# Measure 1.1.1 T/L

Participate in or conduct a Tribal/local partnership for the development of a comprehensive community health assessment of the population served by the health department

- Required Documentation

- Participation of representatives of various sectors of the Tribal or local community
- Regular meetings
- Description of the process used to identify health issues and assets

# Measure 1.1.2 T/L

## Complete a local community health assessment

### • Required Documentation

- A local community health assessment dated within the last five years that includes:
  - Documentation that data and information from various sources contributed to the community health assessment and how the data were obtained
  - A description of the demographics of the population
  - A general description of health issues & specific descriptions of population groups with particular health issues
  - A description of contributing causes of community health issues
  - A description of existing community assets or resources to address health issues
- Documentation that the local community at large has had an opportunity to review & contribute to the assessment

# Measure 1.1.3 A

Ensure that the community health assessment is accessible to agencies, organizations, and the general public

- Required Documentation
  - Documentation that the community health assessment has been distributed to partner organizations
  - Documentation that the community health assessment and/or its findings have been made available to the population of the jurisdiction served by the health department

# 5 Often-Used CHA models

- MAPP (2000) Mobilizing for Action through Partnership & Planning
- APEX PH (1989) Assessment Protocol for Excellence in Public Health
- PACE EH (2000) Protocol for Accessing Community Excellence Environmental Health
- NC-CHAI (2002) North Carolina Community Health Assessment Initiative
- PATCH (1985) Planned Approach To Community Health

**See Matrix Handout**

# Resources & Utilization of Data

# Primary & Secondary Data

Primary data are collected by or on behalf of the LHD. Examples:

- communicable disease reports
- healthcare provider reports of occupational conditions
- environmental public health hazard reports.
- community surveys
- registries
- vital records
- other methods of tracking chronic disease and
- injuries
- focus groups and other qualitative data



Secondary data published or collected in the past by other parties.

Examples:

- From other governmental depts, (e.g. law enforcement, EPA, OSHA)
- Graduation rates
- Census data
- Hospital discharge data,
- Behavioral Risk Factor Surveillance System  
academic research data.

# Community Health Information (CHI) Resource Guide

- Identifies appropriate resources for community health research and evaluation activities
- The resource guide has two volumes
  - Volume 1: Data
  - Volume 2: Data Tools

# CHI Resource Guide

## Volume 1: Data

- Three Sections
  - Section A: Questions to consider before seeking data
  - Section B: Basic Concepts associated with data management, collection and use
  - Section C: List of local and national data sources

# CHI Resource Guide

## Volume 2: Data Tools

- Array of data tools are available relevant to the assessment of community health
- Three Sections
  - Section A: Considering data tools
  - Section B: Concepts Associated with Tool Types and Uses
  - Section C: Data Tool Sources

# Indiana Prevention Resource Center (IPRC)

- IPRC's service known as PREV-STAT uses GIS software and data from a variety of sources for many Indiana Counties
- PREV-STAT provides data tables and maps on
  - Basic Demographics
  - Protective Factors
  - Family Risk Factors
  - Neighborhood and Community Risk Factors
  - Indiana County Health Rankings

# Indiana INdicators

- Free data resource
- Help perform CHAs,
- Guide development of CHIPs
- County Dashboards
- Health-related indicators
- Progress measurements
- News & promising practices

<http://indianaindicators.org/>

# Costs, Skills & Resources

# PHAB Fees/5 Years

Population Size	2011/2012 Total Fee
Less than 50,000	\$12,720
50,000 to 100,000	\$20,670
>100,000 to 200,000	\$27,030
>200,000 to 1 million	\$31,800
>1 million to 3 million	\$47,700
>3 million to 5 million	\$63,600
> 5 million to 15 million	\$79,500
>15 million	\$95,400



# Other Costs & Resources

## Discussion

# Thanks to our interns

- Clemesia Beverly
- Braden Adam Drake
- Irasema Rivera

~ all MPH students at the IU School of Public Health - Bloomington