

2013-2014 Accreditation Support Initiative (ASI) for Local Health Departments

FINAL REPORT

1. **Community Description**

Briefly characterize the community(ies) served by your agency (location, population served, jurisdiction type, organization structure, etc.). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

Elkhorn Logan Valley Public Health Department is located in Northeast Nebraska and serves the counties of Burt, Cuming, Stanton and Madison. The largest city in the service area is Norfolk with a 2012 population of 24,332. The closest urban or suburban cities are Sioux City, Iowa and Lincoln, NE.

Demographics:

- **Population: 57,096**
- **Race: 93.6 White; .6% Other Race Non-Hispanic; .4% Multiracial Non-Hispanic; 5.4% Hispanic**
- **49.4% Males and 50.3% Females**
- **Approximately 24% of the population is under age 18; 58% of the population is between ages 19 and 64; and 18% of the population is age 65 and over.**

ELVPHD is led by a Board of Health and the Health Director who is hired by the Board. The Director is responsible for hiring management staff and oversees the hiring of additional staff members. The Board of Health, consisting of ten members that geographically represent all four counties of the service area, and the Health Director, Gina Uhing, serve as the cornerstones of the organization and oversee the actions of the Department. Board membership includes a County Supervisor or Commissioner and a community representative from each of the four counties as well as a physician and dentist. The governance of ELVPHD is mandated by state statute.

2. **Project Overview**

Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed between January 2014-May 2014 and the key activities engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others.

ELVPHD adopted the Core Competencies for Public Health from the Council on Linkages. Staff were categorized into Core Competency Tiers and given the corresponding Core Competency Assessment on 1/31/2014. All staff completed the assigned assessment by the due date of 2/7/2014. The results of the assessment were averaged by tiers, a high yield competency analysis was completed and priority areas were determined. ELVPHD decided to have all staff complete the Foundations of Public Health Course from the NYLearnsph.org website to increase individual

competency levels. ELVPHD staff is in the process of completing the 11 modules of this course. The completion deadline for staff is October, 2014.

The ELVPHD Training Committee is multidisciplinary and represents both management and line staff. The charge of the committee is to assure that educational programs for the benefit of all staff members are conducted internally. The committee duties include:

- Identifying training needs and updating the ELVPHD Training Matrix
- Arrange for in-house training at bi-weekly staff meetings
- Monitor and carry out the Workforce Development Plan

The Training Committee meets bi-weekly. The committee identified required trainings and developed a training matrix listing all trainings, whether they are mandatory or not, the frequency they need to occur, which staff is responsible for the training, and the resource for the training. The Training Committee also developed a Training Record Checklist so that mandatory trainings could be easily recorded in individual staff training record files. A Training Record form to record all other trainings was also created. Staff now submits documentation of trainings for recording in their training record file.

Other documentation was created by the Accreditation Coordinator and reviewed by the Training Committee to formalize the staff development and training process. This documentation includes a Staff Training Application form which will be completed by individual staff and submitted to their supervisor for approval when requesting training. A Staff Development/Training Plan form was created to identify individual staff training needs for a given year. Supervisors, along with the staff member, will complete this document at the time of the staff member's annual performance review during the coming year and it will be updated annually thereafter. The form will be completed on new hires at the time of their introductory period review.

A staff development and training policy was also developed and approved by the ELVPHD Board of Health to provide direction for staff.

The Accreditation Coordinator completed a Workforce Development Plan using the template created by the Ohio Public Health Training Center at the College of Public Health at the Ohio State University. This was an invaluable resource for putting this plan together. Input into the plan was provided by the ELVPHD Health Director and the Training Committee. The plan was submitted to the ELVPHD Board of Health for review and they approved it on May 19, 2014.

3. **Challenges**

*Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please **do** include*

them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

Even with the delay in receiving the contracts, ELVPHD remained on target with the timelines identified in the grant application. The Accreditation Coordinator was able to locate many resources for working on this category and did not encounter many challenges or barriers.

The ELVPHD Workforce Development Plan and Staff Development and Training Policy were approved by the Board of Health on May 19, 2014. With the project ending on May 30, 2014, not enough time was available to complete individual Staff Development / Training Plans. Supervisors are working on this and all staff will have a plan in their training files by the end of 2014.

4. **Facilitators of Success**

Describe factors or strategies that helped to facilitate completion of your agency's work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.

Receiving the ASI grant funding allowed the Accreditation Coordinator to devote the time necessary for completing the Workforce Development Plan. It may have taken longer to complete without the funding. The Health Director and Board of Health at ELVPHD is fully supportive of the accreditation process and allowing the Accreditation Team to move forward in this endeavor.

5. **Lessons Learned**

Please describe your agency's overall lessons learned from participating in the ASI. These can be things you might do differently if you could repeat the process and/or the kinds of advice you might give to other health departments who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

ELVPHD had already completed its community health assessment, community health improvement plan and strategic plan. ELVPHD also has a QI Plan in place. This made choosing a category to apply for funding easy for us. The Workforce Development Plan was the next logical step for us. Having a specific idea of what you want to do is helpful when applying for the funds.

6. **Funding Impact**

Describe the impact that this funding has had on your agency. How has this funding advanced your agency's accreditation readiness or quality improvement efforts?

As stated above, the ASI funding allowed ELVPHD to focus efforts on completing the Workforce

Development Plan. Without the funding it would have taken us longer to complete the plan. The funding also allowed ELVPHD to send the Accreditation Coordinator to the PHIT training in Atlanta. This would not have been possible without the funding.

7. **Next Steps and Sustainability**

What are your agency's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?

ELVPHD has completed all of its pre-requisites for submitting its application for accreditation. The plan is to submit our application to PHAB by the June 2 deadline to apply under Version 1.0. ELVPHD continues to implement quality improvement and performance management. ELVPHD will continue to offer training to staff on the core competencies for public health to assure a competent public health workforce. The ELVPHD Training Committee will continue to assure that mandatory trainings are scheduled and completed by staff. The Training Committee will update the Workforce Development Plan on an annual basis and assure that the training goals are carried out. Human Resources will assure that all staff has a Staff Development and Training Plan in their training files and that these plans are updated annually.