



2015-2016 Accreditation Support Initiative (ASI) for 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.

Guam is a U.S. Territory located in the Western Pacific about 3,800 miles from the State of Hawaii and 6,000 miles from San Francisco. The population is 159,358 according to the 2010 Census and the current estimate for 2016 is around 167,742. The three major ethnic groups of Guam are Chamorro, Filipino, and Other Pacific Islander.

The Department of Public Health and Social Services (DPHSS) is an agency of the government of Guam and is located in the central village of Mangilao, Guam. DPHSS is comprised of five divisions: Division of General Administration, Environmental Health, Public Health, Public Welfare and Senior Citizens. DPHSS also operates the Northern and Southern Region Community Health Centers (FQHCs).

DPHSS is one of the major providers of health and social services to the island residents. The population served include the underserved, low income, uninsured, medically indigent population, citizens of the Freely Associated States, elderly/aging population, and women, infant and children. Other divisions also serve consumers in need of particular services.

The five divisions provides programs and services to include administering benefits such as: Medicaid to 12,500 households; Medically Indigent Program (MIP) to 4,200 households; Cash Assistance to 2,000 households; Supplemental Nutritional Assistance Program (SNAP) benefits to 15,300 households; and Child Care Development Fund (CCDF) to 600 households. Other programs include foster care homes; child protective services; administration of health and sanitary certificates; immunizations; dental; issuance of birth and death certificates; marriage licenses; prevention of communicable diseases; services for women, infant and children; and administration of aging programs to include Title III Older Americans Act Services; Adult Protective Services; and Medicare Assistance.

2. **Project Overview:** Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period 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.

The key areas for the ASI project period was to focus on the following:

- Progress towards completing Documentation for PHAB Measure 9.2.1 A**
- Examples of QI/PM educational materials created to be used during presentations and training to include online training, QI/PM refresher training, and the development of the QI Newsletter.
- Plan for how PHIT findings will be disseminated to others in the agency
- Plan for how the updated QI plan will be implemented

Key Activities included:

- Identifying QI Council members to attend the CDC sponsored Public Health Improvement Training from June 15-17, 2016 in Baltimore, MD.
- Attending monthly meetings with the DPHSS QI Council to discuss QI activities such as: Updating QI Plan for FY 2016; identifying QI/PM online/in person training opportunities; development of a QI electronic newsletter, reviewing customer satisfaction surveys, and working on deliverables identified in the 3-year agency strategic plan specific to priority #3: Improve Organizational Structure and Processes.
- Working meetings also scheduled (as necessary) to discuss ongoing QI activities and provide updates on deliverables.
- Sharing of free QI/PM online resources provided by NACCHO
- Discuss plans for return of QI Council and sharing of resources; development of educational materials to be used during presentations; and discuss how PHIT findings will be disseminated.

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.

In December 2015, the Department of Public Health and Social Services (DPHSS) started planning for the 12th Festival of Pacific Arts (FestPac) Guam 2016. FestPac was scheduled from May 22 to June 4, 2016 with over 3000 participants confirmed to attend from 27 countries. Some of these countries are currently experiencing an outbreak of Conjunctivitis, Influenza-like-illness, Dengue, Zika and Chikungunya. As part of our planning and preparation efforts, the following teams were activated to address any potential public health issues and/or emergencies that may arise (medical team, epidemiology and surveillance, vector control program, and risk communications aka: event community health outreach). Monthly and weekly meetings were held with the various teams to address and develop risk communication and public health messaging specific to FestPac. The early preparation and planning was key to ensure that DPHSS and its partners were prepared to respond to any infectious disease threats. DPHSS also took action in advance of FestPac to reduce the threat of Zika and other mosquito-

related illnesses. DPHSS collaborated with the U.S. Centers for Disease Control and Prevention (CDC) to conduct insecticide application at FestPac lodging venue sites.

Due to FestPac activities, QI meetings and activities had to be rescheduled to a later date. The impact to the ASI project deliverables were not significant but timelines had to be adjusted and/or extended.

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.**

Members of the DPHSS QI Council continued to meet monthly to address issues specific to QI activities outlined in the agency 3-year strategic plan and deliverables identified in the ASI project. Although timelines were adjusted, the ASI project deliverables were addressed and will continue even after the project period.

5. **Impact of ASI:** To what extent do you feel your health department was more prepared for accreditation at the end of the ASI5 project as compared to the beginning? What specifically changed during that time that made your agency more prepared for accreditation? How did the ASI5 contribute to your health department's progress?

The ASI project provided an opportunity for DPHSS to continue to increase its readiness for public health accreditation as a long term goal.

6. **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.

Ensure that deliverables are realistic and achievable in the timeframe allowed under the ASI contract.

7. **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?

The funding provided was helpful since it will be used for QIC members to attend the CDC sponsored PHIT 2016. Staff will be able to gain valuable QI/PM knowledge and

resources at PHIT and will have an opportunity to network with other public health partners engaging in QI/PM.

8. **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?

The DPHSS QI Council will continue to meet monthly to address QI activities as identified in the 2016 QI Plan and ASI project. The Council will also will provide technical assistance to other staff members in developing QI projects.

QI will continue to be promoted within the agency and QI training will be conducted to all staff.

Resources developed will be used to educate staff on QI/PM.

QI electronic newsletter will be developed and distributed to staff.