

Public Health Accreditation Board



*Helping raise the standard
for public health.*

Voluntary Accreditation Goal

The goal of a voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of state and local public health departments.

Exploring Accreditation Final Report, p. 4

Benefits of Accreditation



Public Health Accreditation Board



- Established May 2007 in Alexandria, VA
- Governed by state and local public health officials and board of health members
- Health department involvement:
 - Board of Directors representation
 - Workgroups oversee development
 - Volunteer opportunities



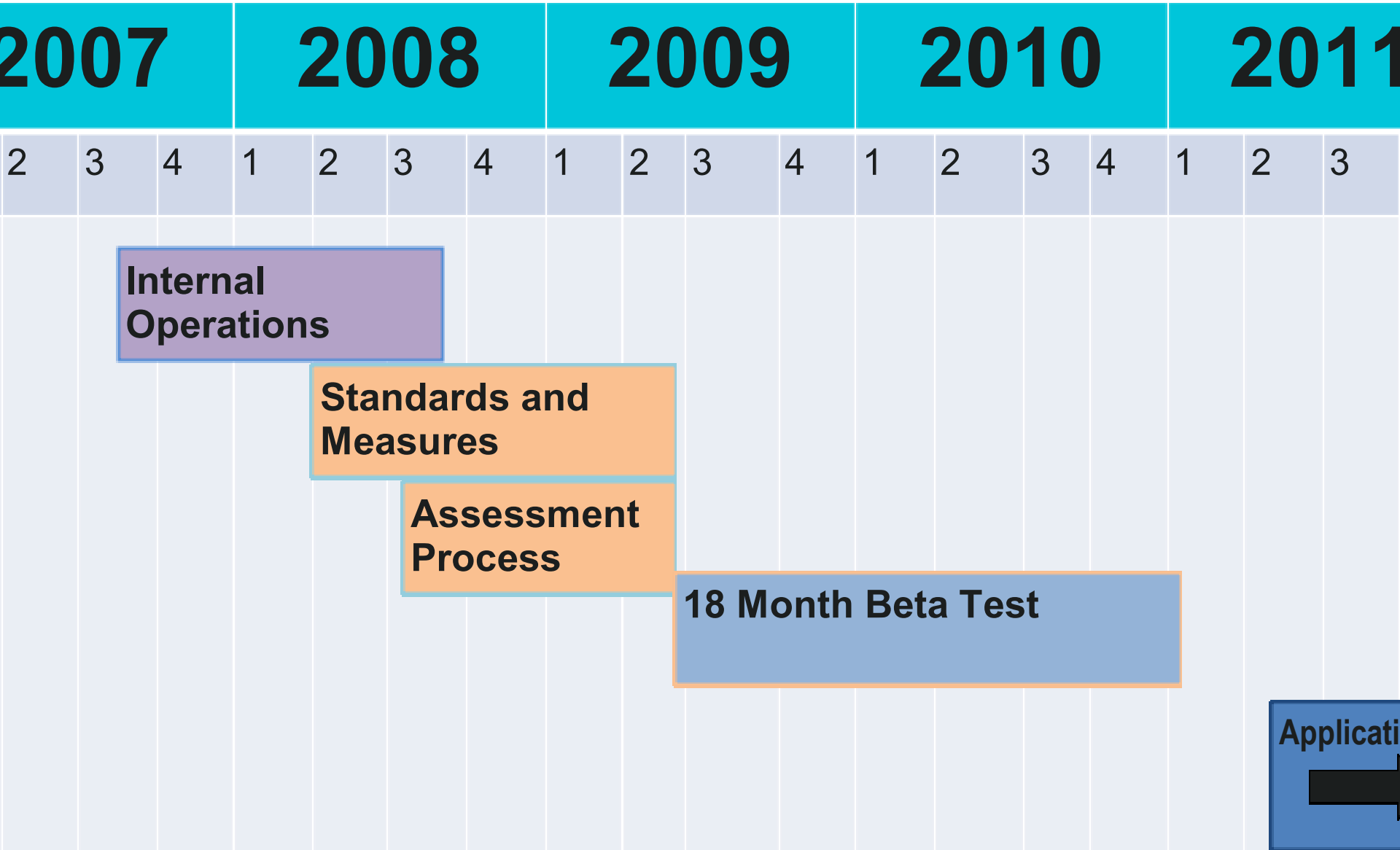
Funding Partners



Eligible Applicants

All variations of state, local, tribal and territorial health departments can apply for national accreditation

PHAB Timeline



Beta Test

- Beta Test launched November 3-4
- 30 health departments were selected
 - 8 State Health Agencies
 - 19 Local Health Departments
 - 3 Tribal Health Departments
- Beta test will evaluate the standards, measures, process, and written support documents
- No accreditation status

Standards Development Workgroup

Workgroup members - state & local HD leaders and BOH members

- Leah Devlin (NC): Co-Chair
- Carol Moehrle (ID): Co-Chair
- Terry Allan (OH)
- Rex Archer (MO)
- Tim Callahan (CT)
- Rick Danko (TX)
- Robert Fulton (MN)
- John Gwinn (OH)
- Mary Kushion (MI)
- Richard Morrissey(KS)
- Rita Parris (NE)
- Sylvia Pirani (NY)
- Joy Reed (NC)
- Stephen Ronck (OK)
- Jane Smilie (MT)
- Torney Smith (WA)
- Bonita Sorenson (CA)
- Jeffrey Stoll (CO)
- Susan Turner (FL)
- Kathy Vincent (AL)
- Harvey Wallace (MI)
- Christina Welter (IL)
- Barbara Worgess (AZ)

Collaborative, consensus, iterative process

Facilitated by consultant with standards development expertise - MCPP Healthcare Consulting, Inc

Standards and Measures Development

- Develop standards for all health departments
- Measures specific to local and state health departments
- Guidance for documentation and demonstration of department performance on meeting standards and measures
- Scoring and weighting methodology

Standards and Measures: Principles

- Advance the collective practice
- Be simple, reduce redundancy
- Minimize burden
- Reinforce local and state health departments' roles, demonstrate shared accountability
- Apply to all sizes and all forms of governance structure
- Based on American National Standards Institute principles

Principles continued

- Based on a body of existing work
 - Essential PH Services
 - NACCHO Operational Definition
 - National Public Health Performance Standards Program
 - State Experiences
 - ASTHO Survey Data
- Essentially all of the concepts in the Operational Definition and NPHPSP have been addressed

Standards Development Timeline

Draft standards and measures developed by workgroups	Feb 08-Feb 09
Alpha test/desk review	Oct 08-Nov 08
Public vetting	Feb 09-April 09
Revised based on feedback	May 09-June 09
PHAB Board approval	July 09

Beta testing

Nov 09 – Dec 10

Draft Standards Framework

11 Domains



31 Standards



>100 Measures



Documentation

Eleven Domains

Part A

Administrative Capacity and Governance

Part B

1. Conduct assessment activities focused on population health status and health issues facing the community
2. Investigate health problems and environmental public health hazards to protect the community
3. Inform and educate about public health issues and functions
4. Engage with the community to identify and solve health problems

Eleven Domains (cont.)

5. Develop public health policies and plans
6. Enforce public health laws and regulations
7. Promote strategies to improve access to healthcare services
8. Maintain a competent public health workforce
9. Evaluate and continuously improve processes, programs, and interventions
10. Contribute to and apply the evidence base of public health

main 1: Conduct assessment activities focused on population health status and health issues facing the community

Standard 1.1 B: Collect and Maintain Population Health Data	Collect and maintain reliable, comparable, and valid data that provide information on conditions of public health importance and on the health status of the population.		
Measure	Documentation and Scoring Guidance	Type of Measure	Type of Review
1.1 B: Assure a surveillance system is in place for receiving reports 24/7 and for identifying health problems, threats, and hazards	Documentation should address: <ul style="list-style-type: none"> Processes and protocols to maintain the comprehensive collection, review, and analysis of data from multiple sources, Processes and protocols to assure data are maintained in a secure and confidential manner Current 24/7 contact information, in the form of a designated telephone line or a designated contact person (which may be provided in rural areas via regional or state agreements) Reports of testing 24/7 contact systems, such as, internet, fax, page phone line, etc. 	Capacity	Health Department Level
1.2 B: Communicate with surveillance sites on at least an annual basis.	Documentation should address: <ul style="list-style-type: none"> List of providers and public health partners who may be surveillance sites 	Process	Health Department Level

For more information.....

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