

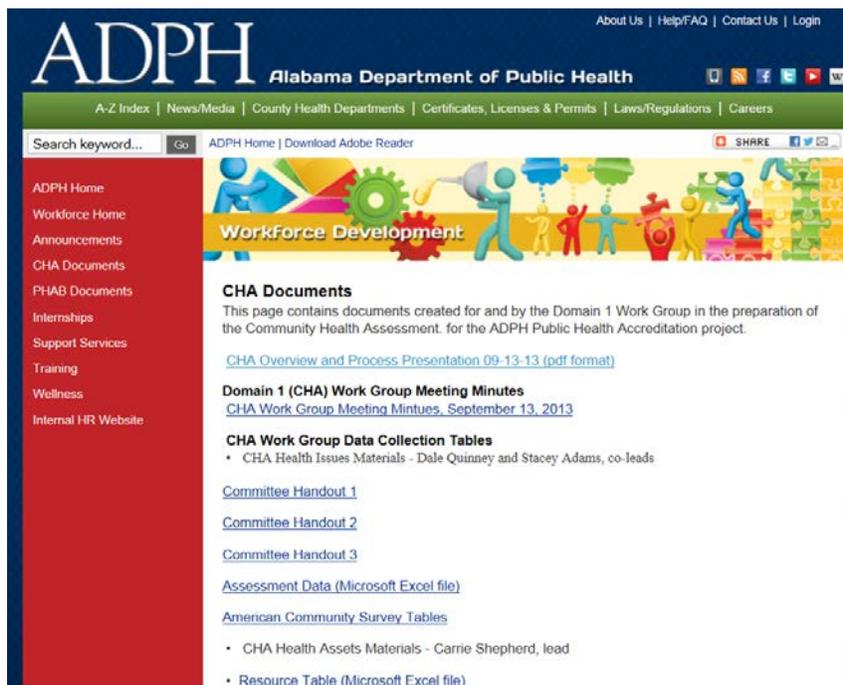
ADPH Workforce Development Webpage

<http://www.adph.org/workforce/>

Public Health Accreditation Board (PHAB) Documents Webpage

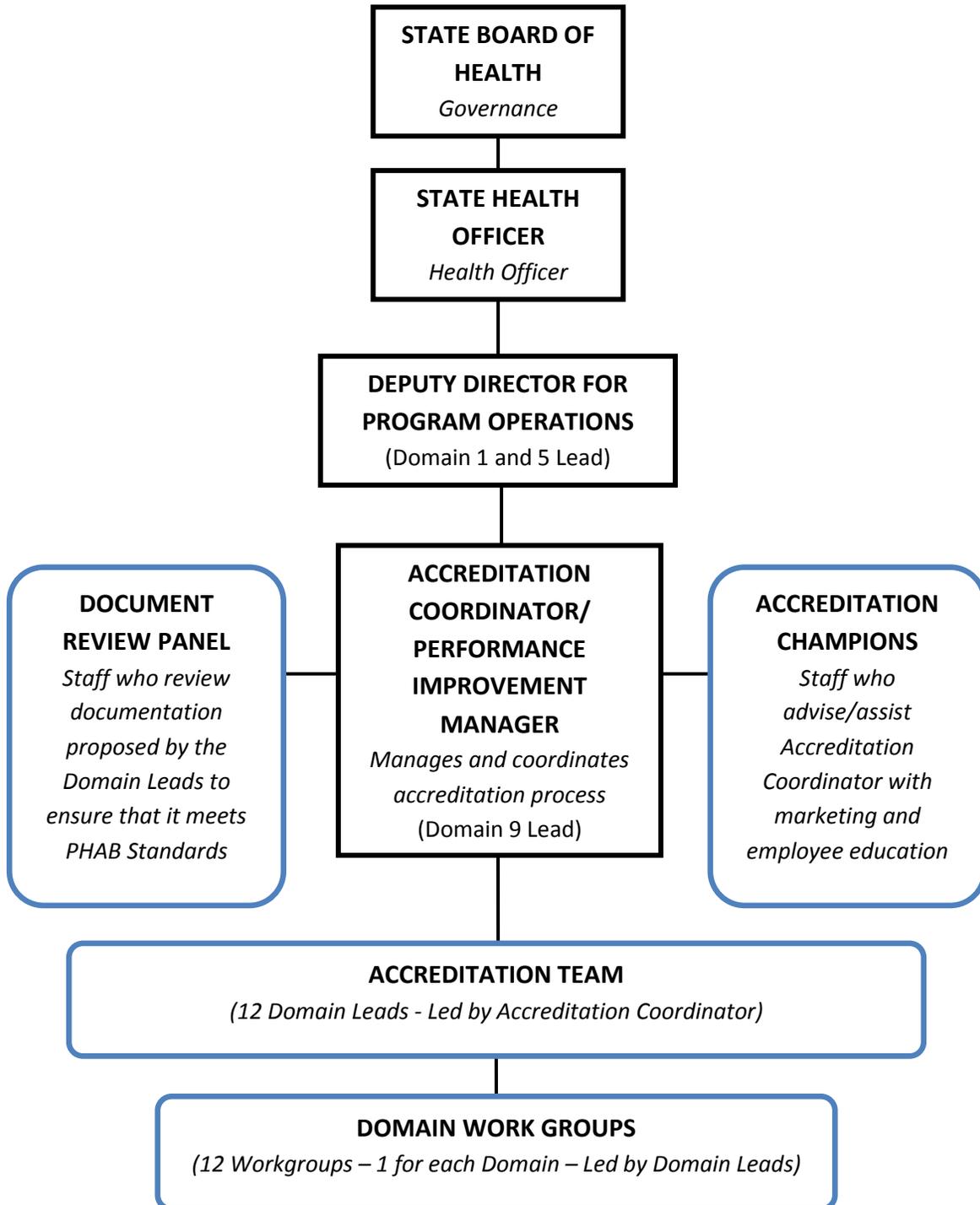


Community Health Assessment (CHA) Documents Webpage



ALABAMA DEPARTMENT OF PUBLIC HEALTH
Structure of Accreditation Leadership Team and Reporting

Adopted July 18, 2013



REPORTING: The Accreditation Coordinator tracks work of the Accreditation Team/Domain Workgroups, Document Review Panel, and Accreditation Champions to meet agency target dates and shares information with Deputy Director for Program Operations who informs the State Health Officer and State Board of Health regarding progress.

Alabama Department of Public Health
Public Health Accreditation Board (PHAB)
Accreditation Leadership Team Roster
Effective October 1, 2013

State Health Officer: Donald E. Williamson, MD

Deputy Director of Program Operations: Michele Jones

Accreditation Coordinator: Carol Heier

PHAB Accreditation Team (12 Domain Leads):

Domain 1 Leads – Conduct Assessment Activities	Stacey Adams Dale Quinney Michelle Jones
Domain 2 Leads – Investigate Health Problems	Mary McIntyre, MD Sherry Bradley
Domain 3 Leads – Inform and Educate about Public Health	Jim McVay, DrPA Sally Palmer
Domain 4 Leads – Engage with the Public to Solve Public Health Problems	Jim McVay, DrPA Chris Haag
Domain 5 Leads – Develop Public Health Policies and Plans	Andy Mullins Michele Jones Valerie Cochran
Domain 6 Leads – Enforce Public Health Laws and Regulations	Brian Hale Walter Geary, MD
Domain 7 Leads – Promote Strategies to Improve Access	Cathy Caldwell Jamey Durham Viki Brant
Domain 8 Leads – Maintain a Competent Workforce	Brent Hatcher Jamey Durham
Domain 9 Leads – Evaluate and Continuously Improve	Carol Heier Mary McIntyre, MD
Domain 10 Leads – Contribute to and Apply the Evidence Base for Public Health	Valerie Cochran Carol Mysinger
Domain 11 Leads – Governance	Jeffrey Wright Sandra Wood
Domain 12 Leads – Administration	Pat Ivie Michele Jones

Document Review Panel Leads: Debra Thrash
Thomas M. Miller, MD

Accreditation Champions: TBA

Office of Performance Management Staff: Patronya Sanks

Abbreviated ADPH Accreditation Checklists (as of 10-25-13)

1. Initial Checklist

1. Initial Checklist			
Place an "X" in the "No" or "Yes" box and note the date completed.			
Question	No	Yes	Date Completed
Is the health department eligible for PHAB accreditation? <i>(see definitions below)</i>	<input type="checkbox"/>	x	July 2011
Does the director of the health department support the health department's seeking PHAB accreditation?	<input type="checkbox"/>	x	10/24/11
Does the appointing authority for the health department director support the health department's seeking PHAB accreditation?	<input type="checkbox"/>	x	6/13/12
If there is a Board of Health or other governing entity, does it support the health department's seeking PHAB accreditation?	<input type="checkbox"/>	x	6/13/12
Has the director of the health department considered the costs of applying for PHAB accreditation and the implications for the department's budget?	<input type="checkbox"/>	x	6/13/12
Has staff of the department reviewed the ten essential public health services and determined that the department is providing all ten?	<input type="checkbox"/>	X	9/30/13
TOTAL			
<i>All items in this initial evaluation of readiness should be "yes" before moving forward.</i>			

2. Prerequisite Checklist

2. Prerequisite Checklist					
Place an "X" in the box that describes where your health department is currently with finalizing the prerequisites.					
Task	Responsible Staff	Not Yet Started	Underway	Complete	Date Completed
The health department has a community health assessment that is ready to submit with an application for PHAB accreditation.	Domain 1 Leads, UAB, AC	<input type="checkbox"/>	x	<input type="checkbox"/>	Click here to enter text.
The health department has a community health improvement plan that is ready to submit with an application for PHAB accreditation.	Domain 5 Leads, UAB, AC	<input type="checkbox"/>	x	<input type="checkbox"/>	Click here to enter text.
The health department has a department strategic plan that is ready to submit with an application for PHAB accreditation.	Domain 5 Leads, UAB, AC	<input type="checkbox"/>	x	<input type="checkbox"/>	Click here to enter text.
TOTAL PREREQUISITES COMPLETED AND CURRENT					Click here to enter text.
<i>All items in this prerequisites evaluation of readiness must be complete and current (within the past 5 years) prior to submitting an application for PHAB accreditation. An application will not be considered complete and will not be accepted by PHAB without these three prerequisites. For descriptions of these documents and the elements that they should include, see the PHAB Standards and Measures Version 1.0.</i>					

(Prerequisites are to be completed by September 2014)

3. Process Readiness Checklist

3. Process Readiness Checklist

Place an "X" in the box that describes the status of your health department in implementing processes to prepare for national public health department accreditation.

Task	Responsible Staff	Not Yet Started	Underway	Complete	Date Completed
Has the department designated an Accreditation Coordinator?	Valerie Cochran (Oct 2011) Carol Heier (May 2013)	<input type="checkbox"/>	<input type="checkbox"/>	x	10-21-11
Has the Accreditation Coordinator completed the PHAB online orientation?	Carol Heier	<input type="checkbox"/>	<input type="checkbox"/>	x	Valerie Cochran 10-9-12; Carol Heier 6-21-13
Has the director of the health department completed the PHAB online orientation?	Dr. Williamson	<input type="checkbox"/>	<input type="checkbox"/>	X	8-13-13
Has a department multidisciplinary accreditation team been established?	AC	<input type="checkbox"/>	<input type="checkbox"/>	x	10-24-11; newly organized 10-1-13
Have all members of the accreditation team completed the PHAB online orientation?	A-Team	<input type="checkbox"/>	X	<input type="checkbox"/>	Click here to enter text.
Is the appointing authority for the health department director engaged in the accreditation process?	Dr. Williamson	<input type="checkbox"/>	<input type="checkbox"/>	x	6-13-12
If there is a Board of Health or other governing entity, is it engaged in the accreditation process?	Board of Health	<input type="checkbox"/>	<input type="checkbox"/>	x	6-13-12
Does the department have the capability to produce electronic documentation?	IT	<input type="checkbox"/>	<input type="checkbox"/>	x	10-24-11
Does the department have the capability to establish an internal electronic filing system, with a separate file for each measure, to be a repository for documentation?	Document Library	<input type="checkbox"/>	<input type="checkbox"/>	x	4-12-13
Does the department implement a process to systematically review department policies and procedures and revise and date them, as needed?	BPSS	<input type="checkbox"/>	<input type="checkbox"/>	X	Confirmed 7-18-13
Is there evidence that collaboration with Tribal, state, or community partners and stakeholders is inherent in how the health department conducts planning, develops policy, and completes its work?	ADPH Staff	<input type="checkbox"/>	<input type="checkbox"/>	X	Confirmed 7-18-13

Please note that the items listed on this checklist are key activities but that this list is not an all-inclusive list of activities for the preparation for accreditation. Each health department that is considering applying for national public health department accreditation needs to develop its own unique work plan to ensure that it is ready for national public health department accreditation.

4. Organizational Readiness Checklist

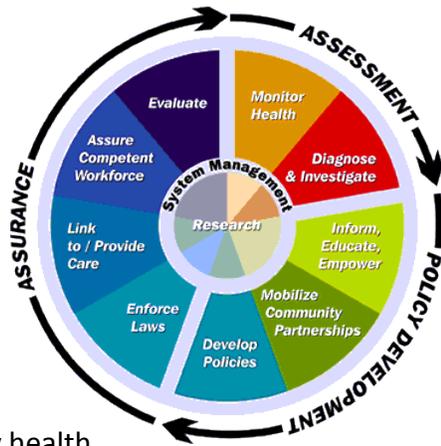
4. Organizational Readiness Checklist

Place an "X" in the box that describes the status of your health department in completing tasks to prepare for accreditation.

Task	Responsible Staff	Not Yet Started	Underway	Complete	Date Completed
Has the department accreditation team begun to meet to discuss tasks and how to organize the work?	A-Team and AC	<input type="checkbox"/>	<input type="checkbox"/>	x	Organized 10-24-11; reorganized A-Team met 10-25-13
Has the department established an internal electronic filing system, with a separate file for each measure, to be a repository for required documentation?	Document Library	<input type="checkbox"/>	<input type="checkbox"/>	x	4-12-13
Has a process been developed to select potential program documentation that is the most relevant for each measure and the best example for the department?	Domain Leads, Document Review Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7-18-13
Has the department accreditation team reviewed the Guide to National Public Health Department Accreditation?	A-Team	<input type="checkbox"/>	<input type="checkbox"/>	x	May 2011
Has the department accreditation team reviewed the PHAB Standards and Measures?	A-Team	<input type="checkbox"/>	<input type="checkbox"/>	x	May 2011
Has the department considered the timeframes required for each piece of documentation?	A-Team and AC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Has the department reviewed department documents and dated and signed them, as needed?	A-Team and AC	x	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Has the department completed an initial "self-study" or review of the standards, measures, and required documentation to determine areas of strength and opportunities for improvement?	A-Team and AC	x	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Has the department developed and begun implementation of plans to address identified opportunities for improvement?	A-Team and AC	x	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Has the department sought and secured technical assistance to address opportunities for improvement?	PHF Q/ITT	<input type="checkbox"/>	<input type="checkbox"/>	x	July 2013; September 2013
Has the department identified a target date for submitting a Statement of Intent to PHAB?	AL-Team	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
<p>Please note that the items listed on this checklist are key activities but that this list is <u>not an all-inclusive list of activities</u> for the preparation for accreditation. Each health department that is considering applying for national public health department accreditation needs to develop its own unique work plan to ensure that it is ready for national public health department accreditation.</p>					

Results of the 10 Essential Public Health Services Scan Does ADPH provide all of these?

9-30-13



Core Function 1 - Assessment

Assessment, monitoring, and surveillance of local health problems and needs, and of resources for dealing with them

1. Monitor health status to identify and solve community health problems.

- Identification of threats to health and assessment of health service needs

Comment: Cancer

- Timely collection, analysis, and publication of information on access, utilization, costs, and outcomes of personal health services

Comment: Family Planning (FP)

- Attention to the vital statistics and health status of specific groups that are at higher risk than the total population

- Collaboration to manage integrated information systems with private providers and health benefit plans

- Fetal Infant Mortality Review (FIMR)

- MCH Block Grant Reports

- Cancer Registry

- Lead

- ABS/PREP

- Breast Feeding

- Health Child Care

- Oral Health

2. Diagnose and investigate health problems and health hazards in the community.

- Informing the public about an epidemiological outbreak investigation in the community

Comments: D2 Control/EPI

- Epidemiologic identification of emerging health threats

Comments: D2 Control/EPI. Registry, FIMR

- Public health laboratory capability using modern technology to conduct rapid screening and high volume testing

Comments: D2 Control/BCH

- Active infectious disease epidemiology programs

Comments: D2 Control/BCD

- Technical capacity for epidemiologic investigation of disease outbreaks and patterns of chronic disease and injury

Comments: D2 Control/BCD. Cancer Programs, FP, Disease Control

Core Function 2—Policy Development

Policy development and leadership that fosters local involvement and a sense of ownership that emphasizes local needs and that advocates equitable distribution of public resources and complementary private activities commensurate with community needs

3. Inform, educate, and empower people about health issues.

- Health education and health promotion to prevent heart disease

Comments: Chronic D2 & Health Promotion, FP, Obesity

- Social marketing and targeted media public communication (e.g., Toll-free information lines)

Comments: Facebook announcements

- Providing accessible health information resources at community levels (e.g., free, mobile health screening initiatives)

Comments: in collaboration with partners & key stakeholders, health fairs etc. Area 7 & 9 screenings - Men's Health

- Active collaboration with personal health care providers to reinforce health promotion messages and programs; and

Comments: Alerts, Press Releases, St. Vincent's March 12, 2013, Grand Rounds Presentations on Diabetes

- Joint health education programs with schools, churches, and worksites (e.g., stress reduction seminars; parenting support groups for enhancing mental health; and health fairs)

Comments: Areas 7 & 9 have done health fairs; they have worked with community leaders to put in walking trails.

- Educate families – Healthy Child Care AL

- PT + 3/FP, WIC, Breast Feeding

- Smoking Cessation, Diabetes, Chronic Disease Self Management

Comments: Multiple ADPH areas at Relay for Health & Wellness Mt. Gilliad July 27, 2013 (article sent). Dept. of Education Mega Conference, School Nurses, Mobile July 16-18, 2013. STD's/TB Outbreaks

4. **Mobilize community partnerships and action to identify and solve health problems.**

Convening and facilitating community groups and associations, including those not typically considered to be health-related, to undertake defined preventive, screening, rehabilitation, and support programs

Comments: Chronic D2 & Health Promotion. CVD2, Asthma, Stroke Task Force

Skilled coalition-building ability in order to draw upon the full range of potential human and material resources in the cause of community health

FIMR, FP Advisory Council, SPAC, RPACS

Comments: Oral Health Coalition, Strategic Health Alliances

5. **Develop policies and plans that support individual and community health efforts.**

Leadership development at all levels of public health

Systematic community-level and state-level planning for health improvement in all jurisdictions

Comments: Obesity Task Force, FIMR

Development and tracking of measurable health objectives as a part of continuous quality improvement strategies

Comments: Diabetes. FIMR

Joint evaluation with the medical health care system to define consistent policy regarding prevention and treatment services

Development of codes, regulations, and legislation to guide the practice of public health

Comments: Expedited Partner Therapy- Collaboration with key stakeholders on legislation & regulations, Disease Control & Prevention met with AL Board of Pharmacy, AL Nursing Board & AL Medicaid Board. Ongoing with ADPH STD & Legal, Planning for 2014 Legislation. We have documentation of meetings, notes & dates.

FIMR/Breast Bill (2013)

COIIN

Core Function 3—Assurance

Assurance that high-quality services, including personal health services, needed for protection of public health in the community are available and accessible to all persons; that the community receives proper consideration in the allocation of federal, state and local resources for public health; and that the community is informed about how to obtain public health, including personal health services, or how to comply with public health requirements

6. **Enforce laws and regulations that protect health and ensure safety.**

Maintenance of a sanitary restaurant environment for public well-being

Full enforcement of sanitary codes, especially in the food industry;

Full protection of drinking water supplies;

Comments: ADEM Issue

Enforcement of clean air standards;

Comments: Only in indoor air, extensive ADEM Issue. More cities adopting smoke free restaurants and campuses

Timely follow-up of hazards, preventable injuries, and exposure-related diseases identified in occupational and community settings;

Monitoring quality of medical services (e.g., laboratory, nursing homes, and home health care); and

Comments: New Born Screening. L&C –Dr. Geary

Timely review of new drug, biologic and medical device application

Comments: EMS Ambulance Inspections

Enforcement Notifiable Disease Rules

WIC Rules

Lead

Technical services (Suite 1510) does plan review of new hospitals and nursing homes to ensure facility meets life safety codes

7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.

Promoting enrollment in a federally subsidized health insurance program

Comments: CHIP, Medicaid application process

Assuring effective entry for socially disadvantaged people into a coordinated system of clinical care

Culturally and linguistically appropriate materials and staff to assure linkage to services for special population groups

Comments: HIV/AIDS focus on low income, minority, MSM, Peer Education

Ongoing “care management”

Comments: For Plan 1st

Transportation services

Comments: I don't think we actually transport but in some places we assist with transportation needs.

Targeted health information to high risk population groups

Comments: STDs/ HIV & AIDS, MSM, Sex Men (MSM), Cancer

Technical assistance for effective worksite health promotion/disease prevention programs

Comments: PSA's

- Family Planning Clinic
- Hot line (3 in Family Health Services)

8. **Assure competent public and personal health care workforce.**

- Education and training for personnel to meet the needs for public and personal health service

Comments: Cross Training STD DIS to assist with TB. EPI Training of State & County Staff DETECT, TEST REPORT

- Efficient processes for licensure of professionals and certification of facilities with regular verification and inspection follow-up

Comments: Fluoridation, H2O. Licensure and certification of facilities

- Adoption of continuous quality improvement and life-long learning within all licensure and certification programs

Comments: NP's & RN's

- Active partnerships with professional training programs to assure community-relevant learning experiences for all students

Comments: Abstinence & PREP, Nursing, Social Work & Nutrition

- Continuing education in management and leadership development programs for those charged with administrative / executive roles

Comments: less now than in the past.

9. **Evaluate effectiveness, accessibility, and quality of personal and population-based health services.**

- Ongoing evaluation of health programs based on analysis of health status and service utilization data, to assess program effectiveness and to provide information necessary for allocating resources and reshaping programs

- Bureau of Clinical Labs Efficiency Project brought in outside contractors to assist. Lean Six Sigma Project Charter

- MCH Block – Part of Reporting

Core Function 4—System Management

10. **Research for new insights and innovative solutions to health problems.**

- Continuous linkage with appropriate institutes of higher learning and research

- An internal capacity to mount timely epidemiologic (e.g., outbreak investigations) and economic analyses (e.g., cost-benefit studies)

Comments: EPI

- An internal capacity to conduct needed health services research (e.g., survey design; conducting interviews and facilitating focus groups; conducting clinical trials; and accessing and using public records)

ADPH IRB/DOAR Committee reviews, approves & denies works stakeholders, surveys, studies etc.

MCH Block Needs Assessment

Dental Needs Assessment

Respondents:

- Victor Hunt
- Dr. Mary McIntyre
- Sherry Bradley
- Pat Ivie
- Sandra Wood
- Chris Haag
- Dr. Grace Thomas
- Brian Hale
- Debra Thrash
- Dr. Jim McVay
- Dr. Walter Geary
- Valerie Cochran

Resource: The Community Tool Box, a service of the [Work Group for Community Health and Development](#) at the University of Kansas.

PUBLIC HEALTH ACCREDITATION BOARD (PHAB) ORIENTATION

- The four-part online orientation training is free and provides a foundation of understanding about national public health department accreditation.
- **All members of the Accreditation Leadership Team should complete the PHAB on-line orientation by _____.**
- The orientation is on CE Central, the University of Kentucky Health Care professional development website. Below is the web address to access the training directly:

<http://www.cecentral.com/phab>

It is also accessible by links from the PHAB Website.

- The four modules will each take from 30-45 minutes to complete. They can be completed at the same time or at different times and can be paused as needed. PHAB recommends completing them in order.
- After viewing each module, click on the “Get Credit” button. After completing a few questions and an evaluation, an electronic Certificate of Completion for the module will be generated.
- Please forward a copy of all four electronic Certificates of Completion to Carol Heier by email.
- As of October 25, 2013, all four Certificates of Completion are on file in the Office of Performance Management for the following members of the Accreditation Leadership Team:
 - Brian Hale
 - Debra Thrash
 - Dr. Donald Williamson
 - Jamey Durham
 - Dr. Mary McIntyre
 - Pat Ivie
 - Sherry Bradley
 - Stacey Adams
 - Valerie Cochran
 - Carol Heier
 - Viki Brant

PHAB Accreditation Team Meeting October 25, 2013

Overview of PHAB Accreditation, the
Application Prerequisites &
Domain Roles and Responsibilities

Overview Goals

- Present a brief overview of the PHAB Accreditation process
- Present an overview of Community Health Assessment (CHA) process
- Present an overview of the Community Health Improvement Plan (CHIP) process
- Present an overview of the Strategic Planning (SP) process
- Establish Domain roles and responsibilities
- Organize and develop timelines

Accreditation Overview

3

What is Public Health Accreditation?

- The measurement of health department performance against a set of nationally recognized, practice-focused and evidenced-based standards
- The issuance of recognition of achievement of accreditation within a specified time frame by a nationally recognized entity
- The continual development, revision, and distribution of public health standards

4

Goal of Accreditation

The goal of the national public health department accreditation program is to improve and protect the health of the public by advancing the quality and performance of tribal, state, local, and territorial public health departments.

5

Accreditation Process Steps

- Step 1 – Pre-Application
- Step 2 – Application
- Step 3 – Documentation Selection and Submission
- Step 4 – Site Visit
- Step 5 – Accreditation Decision
- Step 6 – Reports
- Step 7 – Reaccreditation

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Accreditation Organization

Part A Governance/Administration (Domains 11 - 12)

Part B

Domain 1 - Conduct assessment activities

Domain 2 - Investigate health problems

Domain 3 - Inform and educate about public health

Domain 4 - Engage with the public to solve public health problems

Domain 5 - Develop public health policies and plans

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Accreditation Organization

Domain 6 - Enforce public health laws and regulations

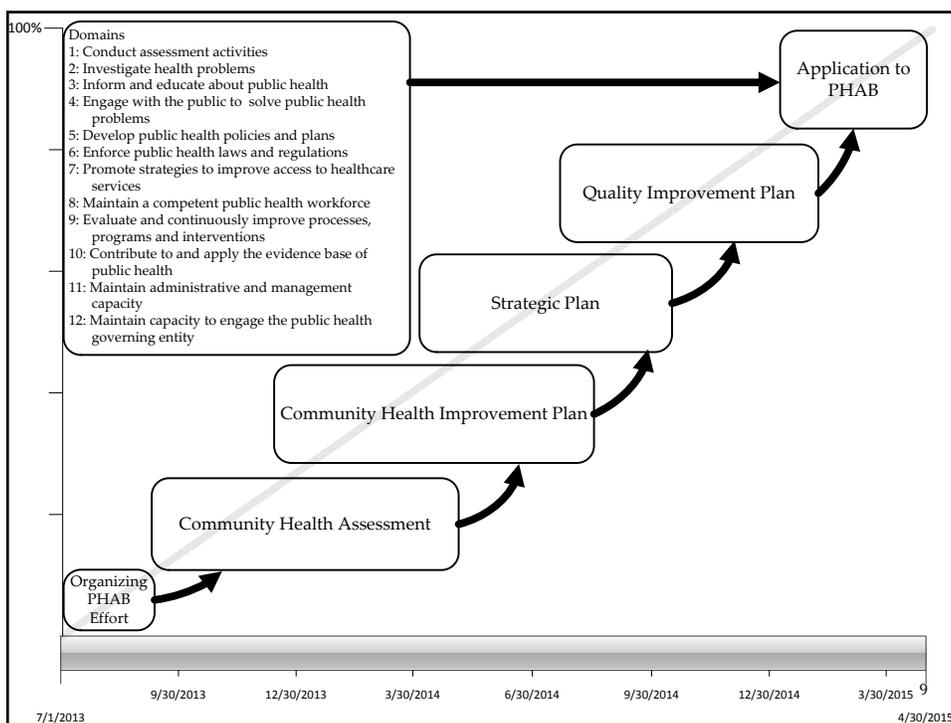
Domain 7 - Promote strategies to improve access

Domain 8 - Maintain a competent workforce

Domain 9 - Evaluate and continuously improve

Domain 10 - Contribute to and apply the evidence base for public health

8



Statement of Intent (SOI)

- Must be submitted by a health department with interest in applying for accreditation
- Submission does not commit the health department to applying
- After receipt and acceptance by PHAB, health department will be granted access to the application

Standards & Measures Version 1.0

The standards and measures can be used to:

- Review and revise processes, procedures, and programs
- Develop capacity and performance excellence
- Guide the internal development of quality
- Prepare for documentation selection and submission and site visit

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Standards and Measures, Version 1.0

The Standards and Measures are organized into:

- Domains
- Standards
- Measures
- Required Documentation

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Standards and Measures

The Standards and Measures, Version 1.0, are currently under review and will be revised in 2013. The new version will be released on January 1, 2014 and will be effective July 1, 2014.

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The Site Visit

- The site visit lasts 2-3 days
- The health department's documentation is reviewed by team of peer public health professionals prior to the on-site visit
- The site visit team, usually three individuals, will then conduct an on-site review
- The Site Visit Report is written by the full Site Visit Team and is due to PHAB two weeks after the site visit concludes

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Accreditation Decision

- The Accreditation Decision is made by the Accreditation Committee based upon the report of the Site Visit Team. The Accreditation Committee, a committee of the Board of Directors, is composed of board members and non-board members.
- Decisions of the Accreditation Committee are reported to the full board. Accreditation Decisions will be sent in writing and by email to applicants.

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The Three Prerequisites

- Community Health Assessment - Standard 1.1
- Health Improvement Plan - Standard 5.2
- Department Strategic Plan - Standard 5.3

Submitted with the application

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Overview of the ADPH Community Health Assessment Process

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Community Health Assessment

The purpose of the Community Health Assessment (CHA) is to learn about the community (state): the health of the population, contributing factors to higher health risks or poor health outcomes of identified populations, and community resources available to improve the health status.

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CHA Required Documentation

- ▣ Participation of various sectors
- ▣ Regular meetings or communications with partners
- ▣ Description of the CHA process
- ▣ Data and information from various sources
- ▣ Population demographics
- ▣ Health issues and distribution
- ▣ Special population health issues
- ▣ Contributing causes of health challenges
- ▣ State assets and resources

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Health Issue Focused Approach

A Health Issue Focused Approach is a multiple data source, participative process that identifies population demographics, health issues, special population health needs and issues, contributing causes of health issues, and health assets and resources by geographic location (Public Health Areas).

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Health Issue Focused Approach

Locale	Demo-graphics	Health Issues Identified	Special Populations with Health Issues	Contributing Causes of Health Issues	Description of Assets to Address Health Issues
PHA 1	Sources of data	Sources of data Input from stakeholders			
PHA 2	Sources of data	Sources of data Input from stakeholders			
PHA 3	Sources of data	Sources of data Input from stakeholders			
• • •	• • •	• • •	• • •	• • •	• • •
PHA 11	Sources of data	Sources of data Input from stakeholders			
State	Sources of data	Sources of data Input from stakeholders			

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CHA Guidelines for PHA Administrators

- PHAs receive county and Area health issues statistics from the CHA committee (11/07/13)
- PHAs receive relevant categories for listing Area health improvement assets and resources (11/07/13)
- PHAs develop a preliminary listing of Area health issues using CHA committee information and additional Area specific information
- PHAs develop a listing of Area health improvement assets and resources

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CHA Guidelines for PHA Administrators

- ▣ PHAs identify representative community members, partner organizations and other stakeholders (e.g., neighborhood groups, public safety, etc.)
- ▣ PHAs convene community members, and groups to obtain input, comment, and perspectives on health issues and health improvement assets and resources
- ▣ PHAs prioritize Area health issues
- ▣ PHAs provide the CHA committee with a list of Area health issues, the prioritized issues, list of health improvement assets and resources , and DOCUMENTATION of the PHA process (02/15/14)

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CHA Hand-off to the CHIP - 02/15/14

- ▣ List of Health Issues by PHA
- ▣ Vetted by Area Stakeholder/Partners
- ▣ Documentation of Stakeholder Participants
- ▣ List of Health Improvement Assets and Resources by PHA

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Overview of the ADPH Community Health Improvement Plan Process

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Community Health Improvement Plan

A Community Health Improvement Plan (CHIP) is a long-term, systematic plan to address issues identified in the CHA. The purpose of the CHIP is to describe how the health department and the community it serves will work together to improve the health of the population.

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Community Health Improvement Plan

- Long-term effort
- Address issues from the
Community Health Assessment
- Broad participation
- Set community priorities

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CHIP Required Documentation

- Description of the CHIP process
- Broad community participation
- Information from the CHA
- Issues and themes (CHA)
- Identification of state assets and
resources
- A process to set priorities

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CHIP Required Documentation

- A state improvement plan
 - Statewide health priorities, measureable objectives, improvement strategies and timeframes
 - Needed policy changes
 - Organizations that have accepted responsibility for implementation
 - Measurable health outcomes
 - Alignment with local and tribal plans
 - Reports of actions taken, monitoring of performance, progress related to health indicators

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Health Priority Focused Approach

- Statewide health priorities, measureable objectives, improvement strategies and timeframes
- Needed policy changes
- Organizations that have accepted responsibility for implementation
- Measurable health outcomes
- Alignment with local and tribal plans
- Reports of actions taken, monitoring of performance, progress related to health indicators

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CHIP Process

- Set state-wide health improvement priorities using prioritization methodology, based on CHA results
- Set improvement objectives, strategies, timeframes, and measurable outcomes employing state assets and resources
- Define organizational /partner roles and responsibilities and align with local and tribal plans
- Report results of program monitoring and progress related to outcomes

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CHIP Hand-off to the SP – 08/01/14

- List of State-wide Health Issue Priorities
- Plan for Community Improvement
- Vetted by State-wide Stakeholder/Partners
- Community Organizations Engaged in Community Health Improvement
- Documentation of State-wide Stakeholder Participants
- List of Health Improvement Assets and Resources by PHA

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Overview of the Strategic Planning Process

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Strategic Planning

Strategic planning (SP) is a process for defining and determining an organization's roles, priorities, and direction. The SP sets forth what an organization plans to achieve, how it will achieve it, and how it will know if it has achieved it. It is a guide for making decisions, allocating resources, and taking action.

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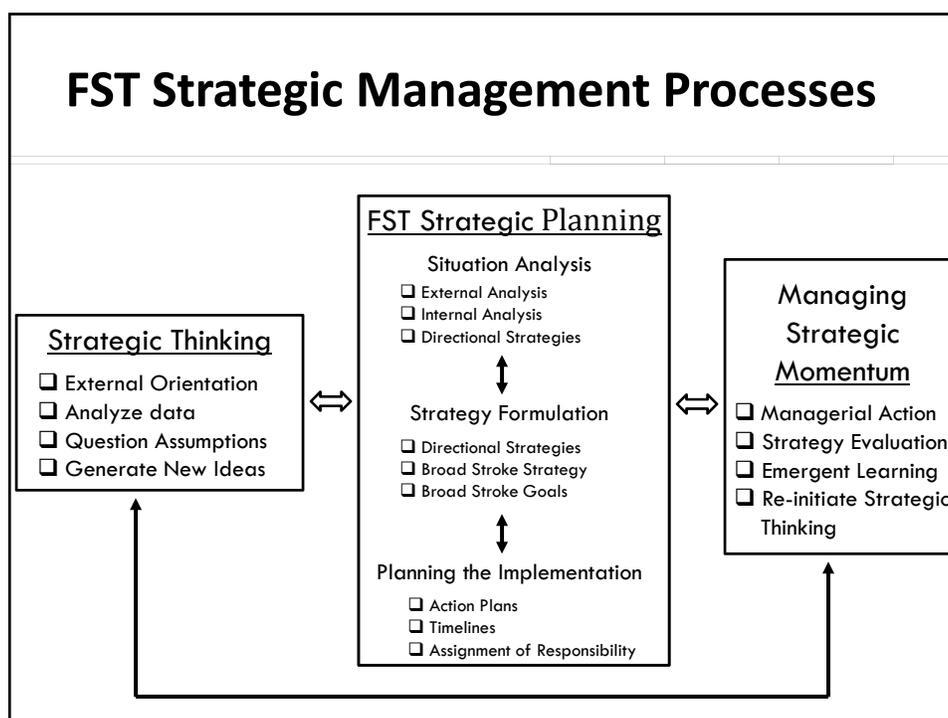
SP Required Documentation

- Description of the planning process
- Leadership participation
- Mission, vision, guiding principles/values
- Strategic priorities
- Goals and objectives and timeframes
- External trends and issues
- Assessment of strengths and weaknesses
- Link to CHIP
- Implementation plan
- Reports of progress

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Focused Strategic Thinking

Focused Strategic Thinking (FST) concerns strategic thinking, strategic planning, and managing the strategic momentum of organizations.



SP Process

- Identify non-health related trends and issues, identify ADPH strengths and weaknesses, identify critical factors for success
- Develop or reaffirm mission, vision, and values
- Set ADPH strategic priorities, goals, strategies, and timeframes, with input from the CHA and CHIP
- Develop implementation plans and intergrade with quality improvement plan

Outcomes of the SP Process – 10/01/14

- ▣ Identification and prioritization of key external issues
- ▣ Identification of key stakeholders and their relationship
- ▣ Identification of the critical factors for success
- ▣ Assessment of the organization's current strengths and weaknesses
- ▣ Determination of the organization's resources and other strengths needed to achieve its mission and critical success factors
- ▣ Organizational mission, vision, and value statements
- ▣ Organization statement of strategy
- ▣ Organizational goals
- ▣ Identification of the strategies (activities) necessary to achieve the goals (an action plan)
- ▣ Development of timelines for strategies (activities) and goal achievement
- ▣ Identification of a unit or person responsible for completing each activity

Domain Roles and Responsibilities

Domain Roles and Responsibilities

- Form Domain workgroup
- Develop Domain workgroup plan
- Complete “turn-key” documentation submitted to Document Review Committee
- Revision of the Domain documentation based on review
- Prepare and submit final Domain documentation

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Organization and Timelines of the Domain Processes

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Organizing the Domain Processes

- Identify format/content of final product
- Assign responsibilities
- Develop meeting schedules
- Develop timelines for data gathering and analysis
- Documentation of Domain content activities
- Documentation of workgroup activities

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Alabama Department of Public Health Accreditation Leadership Team Charter

Background:

The Alabama Department of Public Health (ADPH) is a grantee of CDC's National Public Health Improvement Initiative (NPHII) which was formed in 2011. This grant supports accreditation and provides ADPH an opportunity to voluntarily apply for accreditation through the national Public Health Accreditation Board (PHAB). Accreditation provides a means for a department to identify performance improvement opportunities, improve management, develop leadership, and improve relationships with the community.

ADPH is qualified and well positioned to attain national public health accreditation. The Accreditation Team is composed of internal ADPH subject matter experts assigned to one of PHAB's 12 Domains. The Accreditation Team will help guide the accreditation process and will lead collection and evaluation of the department's documentation and readiness to apply for accreditation.

Vision Statement: The value of ADPH and the vision of the Accreditation Team are to demonstrate that ADPH provides caring, high quality, and professional services for the improvement and protection of the public's health through disease prevention and the assurance of public services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

Mission: The mission of the Accreditation Team is to submit the ADPH application and all supporting documentation for accreditation to PHAB by September 30, 2015.

1. Roles and Responsibilities:

State Health Officer

- Complete PHAB orientation
- Be knowledgeable regarding the steps and timeline to attain accreditation for ADPH
- Interact with the Governor's Office, State Board of Health, Deputy Directors, Bureau Directors, Area Administrators, and state level public health partners in support of the department's accreditation process
- Help ensure that department staff understand the importance of PHAB accreditation
- Ensure that essential personnel and financial resources are available to support accreditation efforts

Deputy Director for Program Operations

- Complete PHAB orientation
- Be well versed regarding the steps, timeline, and progress made to attain accreditation for ADPH
- Interact with the State Health Officer, Bureau Directors, Area Administrators, Accreditation Team, Accreditation Coordinator and state level public health partners in support of the department's accreditation process
- Ensure that Bureau Directors are actively involved in the accreditation process, as needed
- Provide final approval of required documentation selected for submission to PHAB
- Help spread awareness of ADPH accreditation efforts when interacting routinely with staff, community partners, and governance

Accreditation Coordinator

- Complete PHAB orientation and related training regarding the accreditation requirements and process
- Conduct assessments of the health department's readiness to seek accreditation
- Coordinate the development and implementation of the department's internal plan to educate and engage staff in the accreditation process; lead the Accreditation Champions
- Help to engage partner organizations and community partners in the accreditation process
- Facilitate the Accreditation Team meetings and activities and monitor/report progress made to attain accreditation for ADPH
- Provide support and maintain status information regarding the work plans of the Domain Leads and Workgroups
- Manage the selection process for documentation for the PHAB measures
- Develop and maintain a document management process for proposed and selected documentation for the PHAB measures
- Complete/submit required applications, documents, and applicable fees to PHAB
- Schedule, prepare for, and manage the PHAB Site Visit
- Coordinate the department's review and response to the Site Visit Report
- Manage the development and submission of required annual reports and fees to PHAB
- Interact with PHAB, CDC, UAB Project Team, and other partners regarding accreditation activities
- Explore and help access educational and technical assistance resources in support of accreditation activities
- Help spread awareness of ADPH accreditation efforts

Domain Leads

- Complete PHAB orientation
- Serve as an active member of the Accreditation Team
- Participate in the development and completion of a timeline to attain accreditation for ADPH
- Enlist members of the respective Domain Workgroup
- Plan and direct activities of the respective Domain Workgroup
- Develop, facilitate, and monitor the work plan of the respective Domain Workgroup; periodically report progress
- Be well-informed regarding PHAB documentation guidance and requirements

- Serve as a subject matter expert for the respective Domain during the accreditation process and be knowledgeable regarding the related documentation
- Serve as the document provider for the respective Domain; collect documentation and/or develop and implement a creation strategy and submit the best potential documentation for review/selection per established procedure
- Identify opportunities for improvement within the respective Domain and participate in quality improvement initiatives to address them, when and as applicable
- Generate and maintain respective Domain Workgroup meeting agendas, sign-in sheets, and minutes following standard format
- Help spread awareness of ADPH accreditation efforts

Domain Workgroup Members (One Workgroup for each Domain)

- Participate in the development and completion of the respective Domain work plan
- Be familiar with the PHAB accreditation process and PHAB documentation guidance and requirements
- Be well-versed in the required documentation for the respective Domain Standards and Measures
- Serve as the document finders for the respective Domain; determine the status of required documentation and help collect and/or develop the documentation for the respective Domain
- Participate in quality improvement initiatives to address opportunities for improvement within the respective Domain, when and as applicable
- Help spread awareness of ADPH accreditation efforts

Document Review Panel Leads

- Complete PHAB orientation
- Attend Accreditation Team meetings and periodically report on progress of the Document Review Panel
- Enlist Document Review Panel members
- Plan, direct, monitor, and maintain documentation regarding the activities of the Document Review Panel
- Serve as PHAB documentation expert for the accreditation process
- Function as a Document Review Panel Member for purposes of reviewing and selecting documentation for submission to the Deputy Director for Program Operations for final approval
- Work with applicable Domain Leads to resolve questions or concerns regarding documentation routed to the Document Review Panel for review and selection
- Assist with staff training regarding PHAB documentation guidance and requirements and the departmental review and selection process, when needed
- Assist Accreditation Coordinator to monitor Accreditation Team progress regarding documentation selection and adherence to the timeline to attain accreditation for ADPH
- Help spread awareness of ADPH accreditation efforts

Document Review Panel Members

- Be well-informed regarding PHAB documentation guidance and requirements
- Review and rate potential documentation submitted to the Document Review Panel for content and completeness to ensure it satisfies the applicable PHAB standard/measure and complies with PHAB and departmental documentation requirements
- Help spread awareness of ADPH accreditation efforts

Accreditation Champions (Led by the Accreditation Coordinator)

- Be familiar with the PHAB accreditation process
- Assist the Accreditation Coordinator to develop and implement the Department's internal plan to educate and engage staff in the accreditation process
- Assist the Accreditation Coordinator to engage partner organizations and community partners in the accreditation process

2. Meeting Structure

Purpose of Meetings

- To move through and stay informed regarding the accreditation process
- To stay up-to-date regarding PHAB guidance
- To progress through work plans and stay updated on documentation status
- To collaborate with Team/group/panel members

Attendance

- Domain Leads are expected to attend Accreditation Team meetings. Document Review Panel Leads are encouraged to attend Accreditation Team meetings to provide updates, participate in discussions or accomplish related tasks.
- At least one Lead is required to be in attendance for each group meeting. Leads may not send a substitute to fulfill this requirement.
- Meetings will be conducted and decisions will be made when a quorum is present. A quorum consists of at least fifty percent (50%) of the group members plus one (1) Lead.

Decision-making

- Majority rules for decision making
- Member must be present to vote
- The vote of the Accreditation Coordinator will be the tie breaker

3. Documentation Submission:

Submission and Approval Process

- The Domain Leads and Workgroups will identify and collect or will work with others to create the documentation required to support each measure within the respective Domain. Domain Leads will format and submit the best documentation for review by way of the documentation management system.
- The Accreditation Coordinator will carry out an initial completeness review of the submitted documentation to confirm that basic elements are met: all required elements complete, legible, properly labeled, correct page numbers, appropriate file type for ePHAB system

- The Document Review Panel Leads and members will read submitted documentation for content to ensure the document clearly satisfies the PHAB standard and measure. The Document Review Panel Leads and will work with Domain Leads to resolve any weaknesses or deficiencies identified.
- The Deputy Director for Program Operations will issue final approval on documentation selected for upload to PHAB

Documentation Management System

- The Accreditation Coordinator will develop and maintain the system
- The Accreditation Team, Domain Workgroups, and Document Review Panel will be trained on use

Documents Structure

- Domain Leads should submit 2 examples per measure requirement unless otherwise stated
- Documentation must be dated within last 5 years from date of submission to PHAB, unless otherwise stated in the PHAB Standards and Measures
- Domain Workgroups should have back-up examples, if applicable to measure, in case they are needed
- Domain Workgroups will rank their documents and submit to the documentation management system accordingly

4. Work Plan

- Each Domain Workgroup will create and monitor a work plan to organize and track their responsibilities consistent with the Accreditation Timeline established by the Accreditation Team
- Domain Leads will provide updates regarding the work plan upon request

5. Marketing and Promotion

- The Accreditation Coordinator and Accreditation Champions will lead efforts to spread awareness across ADPH staff, community partners, governance and residents regarding ADPH accreditation activities. Others involved in the process will also help with this effort.
- The vision of marketing is to have ADPH employees to understand the value of achieving accreditation and enthusiastically contribute to our department's successful application
- Marketing is done through means such as publications, one-on-one information exchanges, trainings, staff meetings, email alerts, and the department website and social media

**PHAB Domain Leads/Work Group Member Nominations
(October 1, 2013)**

DOMAIN/STANDARDS	LEADS	WORKGROUP MEMBERS
<p>1. ASSESS: Conduct assessments focused on population health status and health issues facing the community</p> <ul style="list-style-type: none"> • Standard 1.1: Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment • Standard 1.2: 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 • Standard 1.3: Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health • Standard 1.4: Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions 	<p>Stacey Adams Dale Quinney Michele Jones</p>	<ul style="list-style-type: none"> • Albert Woolbright • Dr. Jim McVay (Health Promotion) • Sondra Reese (Communicable Disease) • Chris Haag (FHS) • Ricky Elliott (Area 9) • Janice Cook (BPSS) • Krishona Lee (FHS) • Tammie Yeldell (FHS) • William Duncan (FHS) • Carrie Shepherd (Rural Health) • Chris Sellers (CHIP) • Renae Carpenter (Social Work)
<p>2. INVESTIGATE: Investigate health problems and environmental public health hazards to protect the community</p> <ul style="list-style-type: none"> • Standard 2.1: Conduct Timely Investigations of Health Problems and Environmental Public Health Hazards • Standard 2.2: Contain/Mitigate Health Problems and Environmental Public Health Hazards • Standard 2.3: Ensure Access to Laboratory and Epidemiologic/Environmental Public Health Expertise and Capacity to Investigate and Contain/Mitigate Public Health Problems and Environmental Public Health Hazards • Standard 2.4: Maintain a Plan with Policies and Procedures for Urgent and Non-Urgent Communications 	<p>Dr. Mary McIntyre Sherry Bradley</p>	<ul style="list-style-type: none"> • Harrison Wallace (Disease Control) • Kelly Stevens (Communicable Disease) • Tina Pippin (Communicable Disease) • Ron Dawsey (Environmental) • Tim Hatch (CEP) • Jackie Holiday (Area 7) • Sharon Massingale (Lab) • John Guarisco (Toxicologist)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
<p>3. INFORM AND EDUCATE: Inform and educate about public health issues and functions</p> <ul style="list-style-type: none"> Standard 3.1: Provide Health Education and Health Promotion Policies, Programs, Processes, and Interventions to Support Prevention and Wellness Standard 3.2: Provide Information on Public Health Issues and Public Health Functions Through Multiple Methods to a Variety of Audiences 	<p>Jim McVay Sally Palmer</p>	<ul style="list-style-type: none"> Samarria Dunson (Legal) Jamey Durham (BPSS) Jennifer Sumner (Health Promotion) Arrol Sheehan (Health Promotion) Danny Doyle (Health Promotion) Cindy Lesinger (Health Promotion) Michael Smith (Video and Distance Learning) Takenya Taylor (Risk Communications) Bob Hinds (Health Promotion) Gloria Boyd (CHIP) Jonathan Edwards (Health Promotion) Kathryn Chapman (Cancer)
<p>4. COMMUNITY ENGAGEMENT: Engage with the community to identify and solve health problems</p> <ul style="list-style-type: none"> Standard 4.1: Engage with the Public Health System and the Community in Identifying and Addressing Health Problems Through Collaborative Processes Standard 4.2: Promote the Community's Understanding of and Support for Policies and Strategies That will Improve the Public's Health 	<p>Jim McVay Chris Haag</p>	<ul style="list-style-type: none"> Bob Hinds (Health Promotion) Ken Reid (Chronic Disease) Tim Hatch (Emergency Preparedness) Dawn Ellis (FHS) Kathryn Chapman (FHS) Ricky Elliott (Area 9) _____ (Nutrition) Carolyn Bern (Rural Health) Gloria Boyd (CHIP) Viki Brant (CHIP) Dr. Grace Thomas (FHS) Sally Palmer (Communications and Marketing)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
<p>5. POLICIES AND PLANS: Develop public health policies and plans</p> <ul style="list-style-type: none"> Standard 5.1: Serve As a Primary and Expert Resource for Establishing and Maintaining Public Health Policies, Practices, and Capacity Standard 5.2: Conduct a Comprehensive Planning Process Resulting in a Tribal/State/Community Health Improvement Plan Standard 5.3: Develop and Implement a Health Department Organizational Strategic Plan Standard 5.4: Maintain an All Hazards Emergency Operations Plan 	<p>Michele Jones Andy Mullins Valerie Cochran</p>	<ul style="list-style-type: none"> Jane Reeves (CEP) Teela Carmack (CHIP) Tim Hatch (CEP) Dianne Sims (FHS) Cindy Ashley (FHS) Dr. Mary McIntyre Disease Control) Carolyn Bern (Rural Health) Diane Beeson (Tobacco)
<p>6. PUBLIC HEALTH LAWS: Enforce public health laws and regulations</p> <ul style="list-style-type: none"> Standard 6.1: Review Existing Laws and Work with Governing Entities and Elected/Appointed Officials to Update as Needed Standard 6.2: Educate Individuals and Organizations On the Meaning, Purpose, and Benefit of Public Health Laws and How to Comply Standard 6.3: Conduct and Monitor Public Health Enforcement Activities and Coordinate Notification of Violations among Appropriate Agencies 	<p>Brian Hale Dr. Walter Geary</p>	<ul style="list-style-type: none"> William Allinder (Environmental) Pat Ivie (Legal) Charlie Thomas (Pharmacy) Sherry Bradley (Environmental) Mia Sadler (Health Provider Standards) Mark Sestak (Environmental) Phyllis Mardis (Environmental Protection) James (Nate) Horsley (Legal) Dr. Karen Landers (Area 1 Health Officer)
<p>7. ACCESS TO CARE: Promote strategies to improve access to healthcare services</p> <ul style="list-style-type: none"> Standard 7.1: Assess Health Care Capacity and Access to Health Care Services Standard 7.2: Identify and Implement Strategies to Improve Access to Health Care Services 	<p>Cathy Caldwell Jamey Durham Viki Brant</p>	<ul style="list-style-type: none"> Julia Sosa (Rural Health/Minority Health) Elana Merriweather (Minority Health) Ricky Elliott (Area 9) Annie Vosel (FHS) Beth Nichols (FHS) Laurie Stout (FHS) Beth Allen (Montgomery County) Dr. Walter Geary (Health Provider Standards) Chuck Lail (Primary Care/Rural Health) John Hankins (Nursing) Carolyn Bern (Rural Health) Rena Carpenter (Social Work)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
<p>8. WORKFORCE: Maintain a competent public health workforce</p> <ul style="list-style-type: none"> Standard 8.1: Encourage the Development of a Sufficient Number of Qualified Public Health Workers Standard 8.2: Assess Staff Competencies and Address Gaps by Enabling Organizational and Individual Training and Development 	<p>Brent Hatcher Jamey Durham</p>	<ul style="list-style-type: none"> Jora White (BPSS) Sandra Wood (Human Resources) Valerie Cochran (Nursing) Thresa Dix (Nursing) Marilyn Knight (Nursing) Renae Carpenter (Social Work) Charlene Thomas (Lab) Mia Sadler (Health Provider Standards) Dennis Blair (EMS) Dr. Robert Meador (Oral Health) Jamey Durham (BPSS)
<p>9. QUALITY IMPROVEMENT: Evaluate and continuously improve processes, programs, and interventions</p> <ul style="list-style-type: none"> Standard 9.1: Use a Performance Management System to Monitor Achievement of Organizational Objectives Standard 9.2: Develop and Implement Quality Improvement Processes Integrated Into Organizational Practice, Programs, Processes, and Interventions 	<p>Carol Heier Dr. Mary McIntyre</p>	<ul style="list-style-type: none"> Grover Wedgeworth (Finance) Stacey Neumann (WIC) Annie Vosel (FHS) Nancy Wright (FHS) Bernard Linzy (Communicable Disease) Jamey Durham (BPSS) Patronya Sanks (OPM) Albert Woolbright (Health Statistics) Janice Smiley (FHS)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
<p>10. EVIDENCE-BASED PRACTICES: Contribute to and apply the evidence base of public health</p> <ul style="list-style-type: none"> Standard 10.1: Identify and Use the Best Available Evidence for Making Informed Public Health Practice Decisions Standard 10.2: Promote Understanding and Use of Research Results, Evaluations, and Evidence-based Practices With Appropriate Audiences 	<p>Valerie Cochran Carol Mysinger</p>	<ul style="list-style-type: none"> Thresa Dix (Nursing) John Heitman (IT) Dr. Grace Thomas (FHS) Dr. Mary McIntyre (Disease Control) Harrison Wallace (Communicable Disease) Dr. Tom Miller (Medical Affairs) Sondra Reese (Chronic Disease) Marilyn Knight (Nursing) Renae Carpenter (Social Work) John Hankins (Nursing) Sherri Davidson (Communicable Disease) Jessica Hardy (Women’s Health) Laurie Stout (FHS) Chris Haag (FHS) Dianne Sims (FHS)
<p>11. ADMINISTRATION AND MANAGEMENT: Maintain administrative and management capacity</p> <ul style="list-style-type: none"> Standard 11.1: Develop and Maintain an Operational Infrastructure to Support the Performance of Public Health Functions Standard 11.2: Establish Effective Financial Management Systems 	<p>Jeffrey Wright Sandra Wood</p>	<ul style="list-style-type: none"> Jamey Durham (BPSS) Samarria Dunson (Legal) Elana Merriweather (Minority Health) Victor Hunt (Facilities) John Hankins (Nursing) John Heitman (IT) Chris Haag (FHS) Brent Hatcher (Human Resources) Joseph Osenton (Finance) Daniel Opichka (Finance) Dr. Tom Miller (Medical Affairs) Mary Gomillion (Area Administrator)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
<p>12. GOVERNANCE: Build a strong and effective relationship with governing entity</p> <ul style="list-style-type: none"> • Standard 12.1: Maintain Current Operational Definitions and Statements of the Public Health Roles, Responsibilities, and Authorities • Standard 12.2: Provide Information to the Governing Entity Regarding Public Health and the Official Responsibilities of the Health Department and of the Governing Entity • Standard 12.3: Encourage the Governing Entity's Engagement In the Public Health Department's Overall Obligations and Responsibilities 	<p>Michele Jones</p> <p>Pat Ivie</p>	<ul style="list-style-type: none"> • Brian Hale (Legal) • Harrison Wallace (Communicable Disease) • Chris Haag (FHS) • Dr. Don Williamson (State Health Officer) • Teela Carmack (CHIP) • Wendy Dale (FHS) • Pam Moody (Nursing) • An Area Administrator • Dr. Jim McVay (Health Promotion) • Grover Wedgeworth (Finance) • Brian Hale (Legal) • Dr. Tom Miller (Medical Affairs) • Arrol Sheehan (Health Promotion) • Ricky Elliott (Area 9)
<p>DOCUMENT REVIEW PANEL</p>	<p>Debra Thrash</p> <p>Dr. Tom Miller</p>	<ul style="list-style-type: none"> • Valerie Cochran (Nursing) • Rachel Parrish (Facilities Management) • Diane Beeson (Tobacco Control) • Janice Cook (BPSS) • Christopher Sellers (CHIP) • Harrison Wallace (Communicable Disease) • Dr. Sharon Massingale (Lab) • Stacy Neumann (WIC) • Dianne Sims (FHS) • Carolyn Hall (Communicable Disease) • Lisa Jones (Human Resources) • Sherrie Davidson (Epidemiology) • Sherry Bradley (Environmental) • Teela Carmack (CHIP) • DeeAnn White (CHIP) • Becky Leavins (BHCS) • Annie Vosel (FHS)

DOMAIN/STANDARDS	LEADS (Central Office)	WORKGROUP MEMBERS (Central Office or Area)
ACCREDITATION CHAMPIONS	<p><i>(Nominations)</i></p> <p>Carol Heier</p> <p>Michele Jones</p> <p>Jamey Durham</p> <p>Chris Haag</p>	<ul style="list-style-type: none"> • Dr. Tom Miller (Medical Affairs) • Dr. Mary McIntyre (Disease Control) • Dr. Donald Williamson (State Health Officer) • Dr. Jim McVay (Health Promotion) • Debra Thrash (Program Integrity) • Charlie Thomas (Pharmacy) • Dennis Blair (EMS) • Valerie Cochran (Nursing) • Carolyn Bern (Rural Health) • Sally Palmer (Communications and Media)

Accepted Program Areas for PHAB Documentation

December 2012

PHAB's public health department accreditation addresses a range of core public health programs and activities, including but not limited to:

- Access to clinical services
- Chronic disease prevention and control
- Communicable disease
- Community health
- Environmental public health governance
- Health education
- Health promotion
- Injury prevention
- Management /administration of public health programs and activities
- Maternal and child health
- Public health emergency preparedness
- Public health laboratory services

When choosing programmatic examples to submit to PHAB, select documentation from programs that directly address the core public health functions and ten essential public health services. These program areas form the basis for PHAB's authority to accredit health departments in the country.

PHAB's scope of accreditation authority does not extend to the following areas:

- Primary Care
- Dental Clinics
- Home Health
- Social Services
- Mental Health Services
- Substance Abuse Services
- Domestic Violence Services
- Primary Care
- Dental Clinics
- Home Health
- Social Services

Documentation from these program areas will not be generally accepted for public health department accreditation.



PHAB accredits governmental public health departments operated by Tribes, states, local jurisdictions, and territories. However, PHAB's accreditation authority does not extend to all program areas that might be administered by some health departments. PHAB will not accept and consider documentation from programs that are outside of PHAB's authority or for whom other accreditation/credentialing/oversight entities exist.

PHAB will accept documentation from programs that are:

- Population based,
- Directly address the core public health functions and ten essential public health services, and
- Not under the authority of other national organizations or federal agencies that have oversight or accreditation authority.

PHAB's scope of accreditation authority does not extend to the areas listed below. Documentation from these program areas will not be generally accepted or considered for public health department accreditation.

A. PHAB's public health department accreditation not address individual or personal health services, for example:

- Primary Care
- Dental Clinics
- Home Health
- Social Services
- Mental Health Services
- Substance Abuse Services
- Domestic Violence Services

For example, PHAB will accept documentation from a public health education program that informs the public of the need for dental hygiene; PHAB will not accept documentation from a dental clinic that provides individual dental services.

B. PHAB's public health department accreditation not address programs that have existing accreditation or oversight bodies, for example:

- Health care facilities licensure and certification
- Licensing programs for professionals
- Long term care licensure and certification
- Health insurance, payment, benefits certification, or health care financing systems (e.g., Medicaid)
- Emergency Medical Services

Health care facilities have an existing accreditation process available through the Joint Commission. State licensure laws vary in their requirements for health care worker licensure and health care facilities. CMS oversees the administration of the Medicaid program and the inspections for long-term care. The Accreditation Association for Ambulatory Health Care (AAHC) accredits community health centers and primary care. The Accreditation Commission for Health Care (ACHC) accredits home health and behavioral health. The Council on Accreditation (COA) accredits behavioral health and child welfare. The Commission on Accreditation of Rehabilitation Facilities (CARF) accredits aging services, behavioral health child and youth services. The Emergency Management Accreditation Program (EMAP) accredits emergency services.

Alabama Department of Public Health PHAB Accreditation Timeline (Draft 10-25-13)

Steps in the PHAB Accreditation Process

Step 1 – Pre-Application

Step 2 – Application

Step 3 – Documentation Selection and Submission

Step 4 – Site Visit

Step 5 – Accreditation Decision

Step 6 – Reports

Step 7 – Reaccreditation

