

Preserving and Protecting the Public's Health



**Public Health Accreditation Board (PHAB)  
Accreditation Leadership Team (ALT) Meeting**

**Meeting Arrangements:**

Date: Thursday, January 22, 2015  
Scheduled Time: 10:00 – 11:30 AM  
Meeting Location: The RSA Tower, Conference Room 1770, 17<sup>th</sup> Floor

Attendance in Person:

**ADPH:**

Andy Mullins	Jim McVay
Bob Hinds	Mary McIntyre
Brent Hatcher	Nancy Wright
Brian Hale	Pat Ivie
Carol Heier	Sherry Bradley
Carolyn Bern	Stacey Adams
Chris Haag	Thomas Miller
Dale Quinney	Viki Brant
Debra Thrash	Walter Geary
Jeffrey Wright	

Absent:

**ADPH:**

Carol Mysinger	Michele Jones
Cathy Caldwell	Sally Palmer
Jamey Durham	Valerie Cochran

Attendance via Conference Call:

None

Meeting Chair: Carol Heier  
Call to Order: 10:05 AM  
Adjournment: 11:40 AM  
Approved: February 26, 2015

**Welcome and Review of Agenda - Carol Heier**

Carol Heier welcomed members of the ALT, thanked them for their attendance, and referred them to Handout 1, the meeting agenda. Today, the ALT begins a process to look more closely at the documentation examples that Domain Workgroups have been unable to submit to the Document Review Panel (DRP) for some reason. The intention of the gap analysis is to enlist help from other ALT members to identify, develop, or update documentation examples to fill the gaps. Leads from Domains 2, 6, 11 and 12 were enlisted to begin this process. These Domains have submitted the majority of their documentation examples to the DRP and are prepared to

discuss their gaps with the ALT during this meeting. Time can be made available during the February and March meetings for other Domain Leads to have this same opportunity.

Documents:

- Handout #1 - Meeting Agenda

Conclusions:

- No questions, objections or assignments for this discussion.

**Agenda Item 1: Review/ Approval of the Minutes of December 1, 2014**

On January 8, 2015, Carol Heier distributed the draft version of the ALT meeting minutes of December 1, 2014 by email and posted them in the PHAB Documents section of the Employee Documentation Application (EDA) under PHAB Accreditation Leadership Team Meetings. She also distributed them as meeting Handout #2. Carol asked if there were any additions or corrections needed. Viki Brant noted that on page 4, the minutes needed to reflect that *7 of the* 17 documents from Domain 7 have been uploaded for review by the DRP. No other additions or corrections were requested. Dr. Mary McIntyre made a motion to approve the minutes as amended and Andy Mullins seconded the motion. By vote, the motion carried and the minutes as amended were approved unanimously by the ALT members present.

Documents:

- Handout #2: Draft Meeting Minutes of December 1, 2014

Conclusions:

- Carol Heier will post the approved meeting minutes of December 1, 2014 in the EDA and on the ADPH Accreditation website with handouts from that meeting.

**Agenda Item 2: Old Business – Carol Heier**

**Accreditation Leadership Team Charter/Roles and Responsibilities - General Updates:**

Carol reported that PHAB issued a news release on December 15, 2014 to announce that six more public health departments have achieved accreditation. Among them is another state health department – California Department of Public Health. A total of 60 health departments have been awarded PHAB accreditation. The number of accredited state health departments is up to 7. They are as follows:

1. California
2. Florida
3. Minnesota
4. New York
5. Oklahoma
6. Vermont
7. Washington

She also shared that because of the ALT's success with our self-assessment, Alabama was able to provide some technical assistance to our sister state, Mississippi, to assist with their self-assessment for accreditation. Mississippi has chosen to use the same tool we used that was developed for us by the Institute for Wisconsin's Health, Inc., and they will use our scoring system as a model for their own.

Documents

- None

Conclusions:

- No questions, objections or assignments for this discussion.

**Agenda Item 3: Old Business – Carol Heier and Domain/Workgroup Leads**

Review of PHAB Accreditation Documentation Tracker - Carol referred ALT members to Handout 3 - PHAB Accreditation Documentation Tracker. She explained that she pulled information from the Document Management System (DMS) on January 8 to create the spreadsheet for her use to track the status of the documentation selection process. She shared it with Jamey Durham and Michele Jones and wanted to share it with the ALT.

She applauded the ALT for the good progress made by the Domain Leads, Workgroups, and the Document Review Panel to select documentation examples for accreditation. Of the 364 documentation examples needed for our accreditation application, 206 (57%) have been submitted and 32 (9%) have been approved by the Document Review Panel (DRP). The goal was to have all documentation examples submitted to the DRP by January 1 and that goal was not met, but the ALT has made some good progress. Everyone involved with the process has learned a lot about the PHAB standards and measures, the documentation requirements, and techniques to prepare documentation for review by the Site Visitors. The progress report should improve significantly in the coming months.

Workgroup/Panel Member Updates

**Domain 1 – Conduct Assessment Activities:** Dale Quinney reported that the Domain 1 Workgroup has changed their target date to complete the Community Health Assessment (CHA) document to February 2015. All of the data has been collected, but they have faced challenges with taking on additional work and with competing priorities for staff involved in the process. Originally, the CHA was to include 25 indicators for the 13 health concerns identified, but that number has grown to 52 to represent additional interests. They have learned a lot in the process. One of the biggest concerns is that there are few health care related issues that are not a big deal in Alabama due to the poor health status of our state.

Carrie Allison and Stacey Adams have been working on locating the other documentation needed from the Domain 1 Workgroup. Most of the activities that are referred to in the Domain 1 standards are being done, but the exact documentation required for the measure is not available. Stacey reported that 7 of the 58 required documents have been submitted to the DRP. A meeting was held earlier that morning with Janice Cook, the Domain 1 representative on the DRP, and they received some good recommendations. Stacey thanked Jim McVay for the assistance from his staff and from him to locate some of the documents needed for Domain 1 measures.

**Domain 2 – Investigate Health Problems:** Dr. Mary McIntyre reported that 70% of the documents required for Domain 2 have been submitted to the DRP. Forty-three of the 51 have been identified, but not all have been submitted. Thirty-six of the 43 identified have been loaded. The Domain 2 Workgroup was divided into four teams. Each team was given the task to locate the documentation for one of the standards in Domain 2. The teams assigned Standards 2.1 and 2.4 have identified all of their documentation examples. The remainder of the Domain 2 report focused on Standards 2.2 and 2.3.

Dr. McIntyre and Andy Mullins engaged in conversation about the need to clarify in the EOP/All Hazards Emergency Operations Plan when it will be implemented. This is to address the documentation needs for Measures 2.2.2.1.1 and 2.2.2.2.1. Andy said that most every Domain has a connection to the EOP and it is currently being reviewed to ensure that it will meet all of these accreditation requirements. Even the review process is being conducted differently so that the required accreditation documentation can be generated. Dr. McIntyre discussed the need to modify the Investigation Protocol as well as to define

cluster evaluations and to identify when the All Hazards Plan has to be implemented for cluster evaluations. This is needed to address the required documentation for Measure 2.2.2.3.1. Dr. McIntyre and Andy will work together to make these modifications. Dr. McIntyre will also work with Kelly Stevens to make the changes needed in the ADPH Investigation Protocol.

Measure 2.2.3.1.1 addresses the department's process for when an event reaches the significance to require After Action Reports (AAR). Discussion was held between Dr. McIntyre and Andy regarding this need. The department needs to clarify within existing protocols when events rise to significance for the development and review of an AAR. Measure 2.3.3.2.1 requires 1 list of significant events. Currently, this list does not exist. Discussion continued regarding design of the list and the need to pull information from several sources. The list must include, at a minimum, the name, dates, and time of the emergency operation and it must include events from the last five years. Lists of AAR exist in the Center for Emergency Preparedness (CEP), Epidemiology and possibly elsewhere, but the department does not have a combined list. EPI has the information to create a list for the last 4 years. Carol said that the department is using the date of November 30, 2015 as the target date to submit documentation to PHAB; therefore, when the events are added for 2015, the list would cover a 5 year period. Andy noted the need to define the events that would be included on the list. He also noted that numbers are used as the "name" of an event in CEP and he wondered how these might be identified on the list. Carol was asked to seek out some examples of event lists from other accredited health departments to inform the creation of the required list at ADPH. Dr. McIntyre and Andy will work together to meet these documentation needs.

Measure 2.3.1.3.1 requires a list and description of contracts, MOA/MOUs, or mutual assistance agreements that define access to resources to assist in 24/7 capacity for emergency response. Brian Hale responded that Legal can provide a list of contracts/MOUs from Automated Contract Entry System (ACES). He was uncertain about whether the system includes any special designation to identify the contracts/MOUs that are related to emergency response, however. Darlene Smith with the ADPH IT department manages ACES and can generate the list upon request. She would also be the person to modify ACES to flag contracts/MOUs that are related to emergency response to help maintain this list for the future. Carol asked if her assistance was needed to coordinate a meeting that included the individuals who can produce this documentation. Dr. McIntyre and Brian indicated that it was not necessary. They would coordinate efforts to meet this documentation requirement.

Charlene Thomas is responsible for providing the documentation needed for Measure 2.3.2.2.1. This documentation exists, but needs to be provided for submission. Dr. McIntyre will follow-up with Charlene.

Measure 2.3.3.3.1 requires a document detailing the availability of equipment for surge capacity to address public health problems/hazards when response needs of the health department exceed normal capacity of health department staff. Andy indicated that he can provide this.

Measure 2.3.4.1.2 requires evidence of collaboration with the Tribal, state and local levels to build capacity and share resources to address public health problems and environmental public health hazards. Debra Thrash suggested that Dr. McIntyre contact Jamey Durham regarding a Domain 8 document that may meet this documentation requirement as well.

**Domain 3 – Inform and Educate about Public Health:** Jim McVay reported that the Workgroup has made changes to all 34 of the Domain 3 documentation examples that were submitted to and returned by the DRP. One has been approved by the DRP. They have resubmitted all of the other required documents except for 5 that they are still working on.

**Domain 4 – Engage with the Public to Solve Public Health Problems:** Bob Hinds reported that all 16 documents needed for Domain 4 were submitted to the DRP and 15 were returned. They have resubmitted 14 of these. They are working through Ricky Elliott, the department’s representative to the Poarch Band of Creek Indians, to develop the documentation needed for measure 4.1.2.1.2. Information regarding methods of collaborative community engagement was developed and Ricky delivered it to the tribal organization. The Workgroup is awaiting confirmation that they received it.

**Domain 5 – Develop Public Health Policies and Plans:** Carolyn Bern reported that Andy Mullins sent the Emergency Operations Plan (EOP) to Valerie to help meet some of the Domain 5 documentation needs. The Domain Workgroup has the majority of the Domain 5 documentation that is needed. Work is continuing to finalize the Community Health Improvement Plan (CHIP). Conference calls are being held with the three stakeholder workgroups to review the respective goals and objectives before they are finalized, consider the assets and resources listed, the discuss plans to share approaches to address goals, objectives, and outcomes. A conference call was held with the Access to Care stakeholder workgroup on January 9 and 18 stakeholders participated. In spite of the technical issues with the call, the stakeholders provided good feedback and suggestions. The conference call with the Nutrition and Physical Activity workgroup was held on January 14 and the call with the Mental Health and Substance Abuse workgroup is scheduled for next week. Carolyn and Stacey are very pleased with the response from the community partners. They are truly “stepping up” and engaging in the CHIP process. One of the biggest challenges of the CHIP process is keeping up with the documentation. The process is moving fast and the stakeholders are providing a lot of input. She requested some clarification regarding the availability of clerical support to help and Carol agreed to discuss it further with her. In the meantime, Stacey and Carolyn will work on completing the minutes of these conference calls. Carolyn acknowledged that Sally Palmer had requested some documentation regarding the CHIP process to meet a documentation need for Domain 3, and this will be provided as soon as possible.

**Domain 6 – Enforce Public Health Laws and Regulations:** Brian Hale reported that documentation is still needed to demonstrate compliance with Measure 6.1.1.1 because the activity is still being completed. Activities being done related to quarantine and Ebola are expected to generate the documentation needed for this measure. The Workgroup has responded to 3 or 4 of the documents returned by the DRP and they have submitted several additional documents since the tracking form was created on January 8. They met with Sherry Bradley who provided some documents from Environmental to meet Domain 6 measures and these have been submitted to the DRP.

**Domain 7 – Promote Strategies to Improve Access:** Viki Brant reported that the Domain 7 Workgroup submitted some additional documentation to the DRP today about the Community Assessment for Public Health Emergency Response (CASPER) study in Baldwin County. She will contacting Carolyn Bern about some of the CHIP documentation that may be used for a Domain 7 measures. Documentation is needed to demonstrate involvement in a collaborative process to reduce barriers to health care access or gaps in access.

**Domain 8 – Maintain a Competent Workforce:** Brent Hatcher reported that the Domain 8 Leads met with the DRP in December and received some valuable feedback. The DRP review helped to identify some documents that they do not need to use because some better documents exist. The Workforce Development Team is continuing to work with Lisa McCormack at the University of Alabama-School of Public Health (UAB SOPH) regarding the Workforce Development Plan. Some progress has been made. Funding for this collaboration is through a

Health Resources and Services Administration (HRSA) grant to the UAB SOPH as the Region IV Public Health Training Center (PHTC).

**Domain 9 – Evaluate and Continuously Improve:** Carol reported that no Domain 9 documents have been submitted to the DRP to date, but progress continues on the activities needed to generate the required documents. She met with Melissa Hornsby (ADPH IT) and Nancy Wright (Domain 9 Lead) on December 7 to continue work on getting the Performance Dashboard ready for use to track performance measures. Melissa and IT staff are working to get a production version of the Dashboard ready. An unsuccessful attempt was made to hold the first meeting of the Performance Dashboard Design Team in December. Another attempt will be made as soon as possible. Carol has had several contacts with staff from the Delaware Division of Health and the North Kentucky Health Department who have also chosen to use the Performance Dashboard for their performance management IT application. A conference call was held with Delaware on December 9 and a users group has been established. These two health departments have had challenges similar to ours with getting the program running and functional.

The QI Council met on December 17 to do some additional work on the department's QI Plan. Several of the Domain 9 measures address the department's need for a performance management system to monitor the performance of public health processes, programs, interventions, and other activities. The standards also require our department to have a Performance Management Team that is responsible for implementing the system. The QI Council voted to serve as the department's Performance Management Team and they adopted the Turning Point Model as the basis for the department's ADPH performance management system. The system includes the components of performance standards, performance measurement, reporting progress and quality improvement. Decisions are pending on the activities of the Performance Management Team and how the Turning Point Model will be applied at ADPH.

**Domain 10 – Contribute to and Apply the Evidence Base for Public Health:** No report.

**Domain 11 – Governance:** Jeff Wright reported that documentation for Measure 11.1.2.1 is under development. Samarra Dunson is finalizing an ethics policy for the department and that policy will be the required documentation for this measure. Documentation for Measure 11.2.1.1.2 will not be available until April 2015 when the FY 2014 audit report regarding financial statements is available. For Measure 11.2.1.3.1, Jeff is working with Dr. Miller to get a letter from Dr. Williamson indicating that ADPH is not a high-risk grantee. Domain 11 has submitted 46 documents and 31 of them have been approved by the DRP. Twelve have either not been reviewed again by the DRP or the Domain is still working on the corrections.

The tracking form shows that Domain 11 has been the most successful with getting documentation approved by the DRP. Prior to the meeting, Carol had asked Jeff if he would share some tips with his fellow ALT members. Jeff shared that most of the Domain 11 documents originally submitted to the DRP were rejected. Some documents have been rejected 2-3 times, but he is not offended by this nor does he take it personally. He appreciates the good feedback and suggestions that the DRP has provided and realizes that the selection of documentation is a process. One just has to keep working at it. Persistence and good Workgroup members have contributed to their success. As the Domain Lead, Jeff has worked closely with the Workgroup members to identify their strengths. He has also reached out to others to help and has done follow-up with them. He tries to dedicate time every day to accreditation, even if it is only a few minutes.

**Domain 12 – Administration:** Carol informed ALT members that Michele Jones had planned to provide the report for Domain 12, but she was unable to attend the meeting. She will discuss Domain 12 documentation gaps during the February meeting.

**Document Review Panel (DRP):** Debra Thrash reported that the DRP met on January 16<sup>th</sup> to discuss Domain 10 documents. All but 2 of the Domain 10 documents were submitted to and reviewed by the DRP. Debra is drafting the response sheets regarding that review. The next scheduled meeting for the DRP is January 30<sup>th</sup> to review Domain 2 documents. There are approximately 35 Domain 2 documents that have been loaded for review by the DRP. Debra is drafting the invitation to Domain 2 Leads to attend the meeting. Progress is being made on Domain 11 documents. Documents from Domains 4 and 12 are still in the review process. February dates for DRP meetings to review documents have been set, but the Domains Leads who will be asked to participate have not been selected.

**Accreditation Champions:** Carol had no updates to report for this workgroup.

#### Documents

- Handout #3 – PHAB Accreditation Documentation Tracker – 1-9-15

#### Conclusions:

- Carol will reach out to some other accredited state health departments and ask for examples of the documentation they used for Measure 2.2.3.2 that requires a list of significant events that occurred, including outbreaks and environmental public health risks, in the last 5 years.
- Carol Heier will follow-up with Carolyn Bern regarding her need for some clerical support to help with the CHIP documentation.

#### **Agenda Item 4: Next Meeting**

Carol thanked the ALT members for their participation in this productive meeting. Carol asked ALT members to let her know if they would like some additional time on the February agenda to discuss documentation gaps they have identified in their respective Domains.

Date and Time: Thursday, February 26, 2015, 10-11:30 AM

Meeting Location: Training Room 980, 9th Floor, the RSA Tower

#### Proposed Agenda Items:

- Update on ADPH Accreditation Process
- Accreditation Leadership Team Reports
  - Updates on specific documentation that is pending submission to the DRP