

National Public Health Accreditation

CDC Performance Improvement Managers Network Call

September 22, 2011

Today's Presenter: Kaye Bender, Public Health Accreditation Board

Moderator: Liza Corso, CDC/OSTLTS

Liza Corso: Welcome to the September Performance Improvement Managers Network call. I am Liza Corso with the Office for State, Tribal, Local and Territorial Support and I am joined here today by colleagues from OSTLTS.

We are delighted that you could join us for today's call. This is our eighth call in the monthly webinar series for the Performance Improvement Managers Network. The PIM Network is intended to be a forum to support all performance improvement managers in learning from each other as well as from partners and experts in the field. These calls are a way for members of the Network to get to know each other better, learn about best practices and quality improvement, performance management, and share information about resources and training opportunities. On today's call we'll learn more about the very recently launched National Public Health Accreditation program and have an opportunity for discussion and questions. I'll introduce our guest speaker shortly, but before I do allow me to review some of the technological features of today's call. For those of you who are not able to access the web portion of the call, you may refer to the slides that were emailed to you yesterday. For those of you on the LiveMeeting site, you will see the slides on your screen. You can also download these slides via the icon at the top right of your screen. It's the little icon that looks like three sheets of paper. And if you're on the web, you'll also be able to see the other participants in today's call by looking at the attendees list under the link at the top left. We have two ways to take questions today. First, of course, as always, you can type in your questions and ideas at any time using the Q and A box, which you can find by clicking the "Q&A" in the toolbar on the top of your screen. We are also planning to open the lines for live discussion at the end of the presentation. In anticipation of that, you'll probably want to mute your phone right now, just so that we don't have extra noise when we get to that point. Please note that we'll announce the identity of those submitting questions via LiveMeeting. If you prefer to remain anonymous to the group, you can do that by just typing "Anon" either before or after your question. Today's call is going to last approximately one hour. The call is being recorded and the full presentation will be published on the OSTLTS website on the PIM Network page.



We'll be conducting a few polls on today's call. We have our first poll right now. Our first poll will give us an idea of who is participating on the call today. Please indicate your affiliation. State, Tribal, Local, Territorial Health Department, National Public Health Organization, other, or if you just don't want to tell us you could. So, the poll is open. Cast your vote.

Great. Our next question will give us an idea on how many people are on the line today because we know several of you have multiple people in the room with you. So if you could answer the question, "How many people are in the room?" More than ten, more than five, three to five, two, or its just you. Okay as you can see we have a lot of folks calling in themselves, but we have some rooms where multiple people are listening in and that's great. Thank you for participating in these polls. We'll have another poll at the end of the call to get your thoughts on today's call. Please plan to answer that final question.

And now I have the distinct pleasure of introducing you to Dr. Kaye Bender, the president and CEO of the Public Health Accreditation Board. She has held this position part-time since January 2009 and full-time since June 2009. Dr. Bender has over twenty-six years of experience in public health. She has worked at both the state and local level within the Mississippi Department of Health where her last position there was as the Deputy State Health Officer. She also served for six years as the Dean of the School of Nursing and the Associate Vice Chancellor for Nursing at the University of Mississippi Medical Center. She also has been heavily involved in this work since some of its earliest roots and that she chaired the Exploring Accreditation Project which many of you might be familiar with. That was funded by us at CDC and the Robert Wood Johnson Foundation and served as the precursor to the establishment of the Public Health Accreditation Board. Dr. Bender also served on the Institute of Medicine Study Committee for the *Future of the Public's Health in the 21st Century* and *Who Will Keep the Public Healthy?* as well as the subcommittee for the study of Pre-Hospital Emergency Care in the U.S. Kaye, the floor is yours.

Kaye Bender: Thank you Liza and hello everyone. I am so pleased to be here with you today particularly since this is the first webinar that we've done since we are alive and well and actually open for accreditation business and it's great to be able to say that. I'm also pleased to be talking with you guys because I'm hearing from not only CDC, but several other people across the country what great work that the performance improvement managers have already started and are working toward improving what your health performance is doing. Kudos to you, for the work that you're doing.

We'll look at the next slide with the session objectives. And so today we're just going to talk about where PHAB is and for some of you this will be a little bit of a review. For others, it might be new. We'll talk a little bit about what we think the early benefits of accreditation are and how you might use some of that information to convince maybe some of the people you work with that it's a really cool thing to shoot for. Talk a little bit about some strategies, some processes that can help to work through the accreditation process and then my goal today is that when you leave the webinar and our Q and A session that you feel like you can see how your work with NPHII connects with public health department accreditation.



The next slide just is there, I won't go over it much, is to talk about what is this thing called accreditation anyway? And it is the measurement of the health department performance against nationally recognized objectives that were developed for the purpose of accreditation review. And then the issuance of recognition of the achievement of accreditation, and then ongoing development, revision, and distribution of the standards as evidence and practice changes. And actually here's a place within the circle that your work will form the future development, revisions and revision of the accreditation standards.

On the next slide we talk about who we are. We are a non-profit, voluntary accreditation organization just like most accrediting bodies in our country. Most of them are non-profit. Some of them are not voluntary, they are required. And our goal is to advance public health performance by providing that national framework of accreditation standards. We are located in Alexandria, Virginia just right outside of Washington DC.

The next slide talks about our goal and that is to improve and protect the health of the public by advancing the quality and performance of state, local, tribal, and territorial public health departments. The accreditation achievement, while it is great and we along with CDC will and other partners will celebrate accredited health departments that is actually not the goal that we're looking for. It is voluntary for a reason. It should be done when your health department is ready to do it because it's based on frameworks and principles around improving quality and performance; which makes it not something you check off the list, but an ongoing way of doing business there at the health department.

The next slide shows you the names of our Board of Directors. Because we are a non-profit, we are guided by a board of directors. You'll recognize some of those names. Probably some of you in the audience either work for or with some of these people. We have a great group of leaders who guide us in our work here at PHAB.

The next slide talks about our founding partners. The executive directors of ASTHO, NACCHO, APHA, and NALBOH served as our board of incorporators and helped to get us started. So in a way we had four parents, if you will, to start with at PHAB. We're real, real grateful for the work they did. And then, of course, as Liza's already shared with you, the initial work for PHAB and then the continuation of what we're doing today is funded by the Centers for Disease Control and the Robert Wood Johnson Foundation.

In the next slide we'll be given sections to talk about why your health department would even want to be accredited particularly since its voluntary; and how you might can convince others.

In the next slide we talk about early potential benefits of accreditation and these are benefits to the individual who works at the health department as well as for the health department collectively. And because we haven't been accrediting health departments to date, these benefits have been derived from research that has been done by others in other areas where accreditation has been in place for some time and/or by the early results documented from the state-based accreditation programs which I'm sure some of you in the audience live in those states where those programs exist. We believe



accreditation will increase the credibility, visibility, and accountability of health departments. It is my goal that when a health department is accredited that we arm you with the appropriate press releases and other bells and whistles that you need so that you can be on the front page of your hometown paper saying that your health department was accredited for the first time ever. And we think that helps with the image for public health. And we've got some evidence from other industries that talk about how it boosts morale. The potential access to new funds and the potential streamlined reporting are two areas that PHAB along with its partner organizations and with strong supporters at CDC are continuing to work on it. Of course the NPHII grants are among the first federal grants that really target performance and quality and improvement and access to funds in order to work on infrastructure issues. Down the road we hope that that will open up new opportunities with other funding sources for health department as well as acquit an opportunity for streamlined reporting for those health departments that are accredited. Of course, then the peer site review team, the access to knowledgeable peers for review and comment on performance and most of all, the opportunity to leave the health department better than you found it. Most of us probably do have good ideas about things we'd like to see done differently and most of the time all we need is a process by which to do that and access to appropriate consultants, if you will, who know our business understand it because they do it every day.

So let's move to the next slide and go through a series here to talk about materials, strategies, and processes for you to think about as you think about accreditation for your health department. And let me say, that again, what I would like to see you do is if your health department hasn't really decided if it wants to be accredited, that's fine. Again, it needs to be something that is done whenever your health department is ready. However, you can help educate the staff that you work with and the leadership in your health department by thinking all along the way of activities and strategies that you're using within your NPHII work that would prepare you for accreditation anyway. And so if you're going to do the work, you might as well park it somewhere where you can find it later and then see that you'll probably be closer to being ready to be accredited than you might otherwise be if you weren't working on the NPHII.

So the important accreditation materials are in the next slide. I'm not going to read these to you but these are just a few of the materials that are on our website that are available to you. And as I told a group yesterday, I think that my best advice would be if you could get familiar with the guide and a little bit familiar with the standards and measures then as you're working on your everyday activities, you'll more readily be able to identify those things that you're working on that would be useful for documentation when your health department is ready to apply for accreditation.

So let's talk about these tools a little bit. The next slide just shows you a picture of the cover of the guide for public health department accreditation. It's called "The Guide" for a reason; it's really the roadmap through the steps. And the next slide shows you the seven steps. These are pretty much the same steps that any other accrediting body would use because as a national accrediting organization we have to be credible in the way we do business so our approach needs to be very similar to any other accrediting



bodies. The pre-application is actually what a lot of health departments have been working on this week. And that is they've viewed our online orientation and they have submitted a statement of intent which formally tells us that they intend to apply. Now some of them were ready enough that they moved right on through that to the application stage. You don't have to do all that in the same week, we just had some health departments this week that were ready. The application stage is actually where the health department submits a formal application with the three pre-requisites that we'll talk about in a minute and the first fee payment. And then we'll schedule those applicants for the first in-person training. After the training, then the health department will be ready to upload their documentation. We have documentation selection and submission here, but actually we're aware that most health departments begin to look at their documentation long before they get to this step and that's a good thing. The training will just help them to feel good about what they have looked at and maybe fine-tune it a little bit if they had some questions. After the documents are all uploaded and the health department hits the final submit button, then PHAB will do a cursory review to make sure it's all there; that the documents that are supposed to be dated are dated and so forth. And then those will be assigned to a team of about three, in most cases, peer-reviewers who will review the documentation against the measures in the standards and we'll talk about those in a minute. After that's done, then a site visit will be scheduled and they will come to the health department to actually ask some questions, interview some staff, partners and governance representatives, and view the facilities. After that, they will submit a report to members of our accreditation committee and based on their work then the board will make a decision about accreditation status. Health departments that are accredited will be accredited for five years but we're not going away in that five years, because again, it's based on QI. So once a year we will ask for a short annual report that's submitted in the online system just to say for those QI teams or activities that were identified that you were working on, how you're coming just to give us a little bit of a progress report. Then you'll be ready for reaccreditation five years later.

The next slide talks about the prerequisites which most of you are probably very familiar with at this point. We are requiring that community, state, or tribal health assessment improvement plan and the strategic plan be submitted with the application. Those will be reviewed by PHAB staff just to see that they're complete. They won't review them for their quality and their content. Those will be reviewed by the peer reviewers assigned to the health department site, but those peer reviewers won't have a separate rule book or some kind of clues that the health department doesn't have. You can look at the criteria about which those will be reviewed because there are measures specifically included in Domain 1 for the community health assessment and Domain 5 for the improvement plan and the strategic plan.

Moving on to the next slide which is "Standards and Measures," that's what the cover looks like. And the next slide just simply talks about that we have standards that fall into domains based on the ten essential public health services. Plus we added one for administration and management of the health department and one for the relationship with governance. And then there are standards under each domain. The standards are really the level at which the health department will be assessed. And the measures are the criteria by which those standards are related and of course the documentation becomes the evidence.



I get asked from time to time is this about a paper trail and it really isn't at all, it's just that for PHAB to be able to award something as important as accreditation status, then we need to be able to have evidence that the health department actually met those measures. Especially for the nurses on the call, you know that if it isn't documented, you can't say it was done, so that same principle applies to accreditation. The next slide just reminds you about the twelve domains. I won't go over those because by this time, most of you are probably very familiar with those. And if you're not, then this is another tip you need to get very familiar; you need to be able to see how your work relates to those and again where the documentation might come into play.

So, where do you find all of that wonderful material? Well, the next slide shows our new and improved website. This was one of the things that actually went live on Monday of this week. It's new and improved: supposedly more user-friendly. This is just one screenshot, but on the website you can get access to all the documents and tools that you need: the standards, measures; it gives you an overview of accreditation; we'll post several webinars there; and other training that we will be developing over time.

For now, one of the most important things that you could go ahead and do without committing to anything is to review—can we go to the next slide—PHAB's Online Orientation to Accreditation. You just click on a button on our website under "education services" and then it takes you to CE Central, which is powered by the University of Kentucky HealthCare only because they're in that business to keep up with training of that sort.

The online orientation, if you look at the next slide, and I don't know how well you can see this. The online orientation is organized into four modules. Each module takes about twenty to thirty minutes each to watch and there is some redundancy in each of it. So that if you just want to look at module one and you just want to get a general overview, pretty much what I'm saying today, you got it right there. So you can use that with staff, with members of boards, with committees. The module two goes a little bit deeper into the accreditation process, but you don't have to watch module one to get to module two, you can pull it out. Module three is the nuts and bolts of the accreditation process. This was primarily put together for the accreditation coordinator, so it'd be very appropriate for the performance improvement managers to watch that as well, as well as any other staff who will be working on performance improvement, quality improvement, accreditation. And then module four really gets into the weeds with the standards and measures. So you can go there now and look at those and not commit to anything. If you do plan to apply, then you need to watch all four. Then at the end of that complete an evaluation and you get a number, which will go on your application.

The next slide we'll go to, that one, of whether the fees cover, we'll talk about accreditation fees. We are funded by CDC and Robert Wood Johnson, but we had planned all along to sustain that part of PHAB that has to do only with the review itself with appropriate fees. This is consistent; again, with the process that most accrediting bodies use and, again, PHAB is no different. This particular slide talks about what the fees cover. And I won't read that to you because you can read it, but these are the costs that are passed on to the health department through the fee structure.



The next slide shows you the fee schedule. We have used eight categories of population, because what we have learned is that population is a good proxy for the complexity of the work that a health department does and the complexity of the work actually then drives our cost. So it starts with a small health department category and then goes all the way up to the big one. You will need to add the fees for all five years. This is just one method of the way fees can be paid. Health departments this week that are applying are paying in various ways; some of them are paying in one lump sum and getting a discount. Some have asked to stretch their fees out over five years and we've got one health department this week that wanted to pay in the three-year increment. So we'll work with health departments however they wish to do that. I have had a question about why if you, somebody got really smart and was trying to figure the per capita costs of these fees and in doing so said that the category one pays more per capita than the category eight. And that could very well be true. Fees, as I said in the previous slide, PHAB fees were not set up based on per capita cost, they were based on the cost of PHAB and even the smallest health department incurs the same average cost of having those reviewers go to the health department of having the online system available to upload the documentation et cetera. And so there is a base cost to PHAB regardless of the size of health department.

The next slide talks about what a local health department should be doing to prepare for accreditation. Same thing could be said about state health department or tribal, that's just a placeholder slide to get actually to the next one where we talk about advice and this talks about appointing an accreditation coordinator, might be the performance improvement manager. I know that some of you are operating in those capacities as well. But somebody to shepherd and guide the process and also when you get to the formal application somebody, the one person that PHAB can be in communication with. And then review and educate, contact national organizations for technical assistance, that can help you with the process and with our tools, but we can't help you prepare for example your prerequisites because then we would be reviewing our work along with yours and that would be a little bit weird. And then we're going to talk about the readiness checklist in the next slide. On our website we do have a set of four readiness checklist. That sounds like a lot of documentation, but it's really only eight pages altogether. Those are lists of general expectations that PHAB defines for any health department considering applying for accreditation. And I believe the checklists are attached to the webinar information that you got as well. These are divided into four sections just as a way to help you get organized and I would strongly encourage those of you who are working with your NPHII work to get these out already even if you're not thinking about accreditation for a while yet, so that you can become familiar with how to get your health department organized and maybe you can use some of the work you're doing for dual purpose. The initial checklist just gives you some ideas about whether you're eligible; does your director and your appointing authority and governing entity support it; have you considered the cost of it; and at a low-hanging fruit level did the staff understand the ten essential services. Those are good places to start if you're really just now getting started. The second checklist is about the prerequisites and this and the following checklist are organized according to the task; the responsible staff person; and then whether the work has begun, not begun, it's underway, or if it's complete, the date it's completed. Again just a way to get you organized. The third checklist is about the process. And this just goes through the steps and talks about the essential tasks that a health department needs to have in place in



implementing processes to prepare for accreditation. And then the fourth one is about organizational readiness. These are questions that, you know, says, 'Has the health department reviewed the guide for accreditation, reviewed the standards?' In other words, is the team on board? This really is a team effort and is not best done at all by the work of one person.

The next slide is a reminder of what I said now I think four times in this webinar, to go ahead and begin to locate, identify, develop, and save your best documentation for each measure. It's a rare health department that has to start from scratch developing that documentation. So this is why it's a great reminder as you work through the work that you're doing already, that you look at what you have already and see if it fits because in most cases it probably will.

The next slide just shows you a sample standard. If you've had a chance to look at the document, you know this is the way it looks. If you haven't, every page has the domain listed one through twelve; the standard; the measure: that's the key, that as I said earlier, by which each standard will be measured, that's why it's called a measure. We added a purpose and a significance because it may help you to think about what is it that they're really trying to get at here with this measure. The things to pay close attention to at the bottom of that screen are the required documentation. That's what will be uploaded into the system that the reviewers will be looking at. And then the guidance is really sort of a cheat sheet about some suggestions about where a health department might go to look for some of that required documentation. The next slide just is a few documentation tips. And I won't go over those except these are pretty self-explanatory, but I would remind you that on our website also is about a ten-twelve page document that has an addition to this slide a little bit more on documentation guidance so I would encourage you to download that, take a look at it, and see where you think your health department might stand in terms of documentation.

In the next slide, and then we'll wrap this up and go to our Q and A. Our information system is called e-PHAB. That's real creative we thought. It's electronic PHAB. And there is a green button on our website that allows health departments to access e-PHAB through that system. We will accept documentation, statements of intent, applications, pre-requisites, only through that system. We will not be accepting paper. You can well imagine that would be a lot of paper for all the health departments in the country that seek accreditation. So we're very pleased to have that online system. We think that'll make it easier for health departments as well. So any reporting, any site visit reporting, annual reports, invoices for the fees, everything will be done through that system.

And so the last slide for me is to remember that as you work on the activities under your NPHII grant, stop and think, on a regular basis, 'Would this be something we can use for accreditation?' Because in most cases it probably would, especially given the requirements of the NPHII grant. And if that's the case, don't do like I have been known to do in the past, and that is to say that I'll come back to it later because you may not remember where you parked it. So go ahead and label it and park it on the share drive or somewhere, where you can find it. And my guess is, that on a regular basis, if you looked at it you would see you are well on your way toward getting ready for accreditation.



And with that, the next slide just gives you our contact information and our website address. And with that Liza I will turn it back over to you.

Liza Corso: Thank you so much Kaye. I think that was a very impressive presentation and it's just so amazing to see this actually be operational and see all the components and have everyone understand all the components that come together to make up what we know is going to be a pretty transformational accreditation program for public health.

We have a few questions coming in through LiveMeeting so we're going to get right to those, but in the meantime, in just a minute or two we'll of course open the lines. We did have a question that had been previously submitted prior to even the call so let me go ahead and ask you that because it's not anything you've covered. 'For states with centralized public health systems,' and for those who are not sure what I'm talking about, it's when local offices report to a state unit, 'will each local health office need to demonstrate each standard and measure, or one example for statewide application be sufficient?' And the question also included whether or not there were beta test sites that represented centralized states.

Kaye Bender: Good question! So yes, I'm happy to talk about that, let me answer the second one first. Yes, we had several states, well we only had eight states in the beta test, but we had one, two, three that represented centralized states in one way or another: one totally centralized and then a couple that were mostly centralized but had some autonomous health departments. Simultaneous with the development of the standards and measures and process at PHAB have been the work of a group of representatives, usually deputy director levels, from a sample of centralized states: some that were in the beta tests, and some others as well who've been advising PHAB about how to handle a situation where a local health department applies for accreditation in a centralized state. So they were helpful to us in that the definition that's in our system of a centralized state was developed by them and approved by our board. The categories for accreditation, which include, a local health department applying only by themselves but they have to have permission from the state or if the centralized state applies on behalf of all of its locals, or say some of its locals, like some centralized states have districts or regions. In order for the accreditation program to be credible, all health departments have to demonstrate conformity with each standard and measure, but there are various ways to do that. PHAB has said all along that a health department may submit documentation that's actually developed by and administered by a partner or another entity. In the case of a local health department in a centralized state, that other entity may very well be the state health department if that's where the primary responsibility lies. While we are accepting applications and before we actually do the first training for health departments, we will complete the alterations in the review procedures related to the question that's been asked so that we can be very clear what the specific health department that applies about which documentation they can rely on the state for and which they would need to demonstrate locally. So I hope that answers the question globally and also to let you know that in some cases it'll be based on how that centralized state operates and what the services that the local health department provides are.



LC: Thanks Kaye. We've got a few other questions coming in on LiveMeeting, and so I'm going to ask one more question that kind of merges a few and then we'll open the lines and then as we continue, I'll continue kind of throwing in some of these other questions.

The two different questions came in that relate to some additional materials that PHAB may have, PowerPoint materials that can be used to discuss accreditation with, for example, state boards of health, that came in from Valerie Cochran from Alabama. And from Jamie Dirksen in Chicago, the question of, for example, an Excel spreadsheet that includes the standards and measures so if you could just quickly mention maybe some of those, whether or not there are those additional materials.

KB: Yeah, we actually prefer that health departments who are educating staff, governance, or use those modules in the online orientation because they were developed for those audience with that purpose in mind. But we also realize that sometimes the setting or the meeting itself may not lend itself to doing so, we have a PowerPoint presentation that is part of what was used in the online orientation that we can make available to you if you will contact David Stone: that's dstone@PHABBoard.org. He is our education specialist and he'll be glad to help craft the PowerPoint presentation that you need for your particular audience. That's the first question.

The second question was about a spreadsheet. If you'll look on our website we do have a sample of how to organize your documentation. It is an Excel spreadsheet, you can look at that and see if that will help you with what you're asking for.

LC: Thank you so much, Kaye. Now we're actually going to transition into opening the lines. We have a few other questions that have come in through LiveMeeting, but let's open the lines so that folks actually have a chance to pipe up and talk with you directly.

Sarah (operator): This is the conferencing coordinator. All lines are now open. Please utilize your mute button.

LC: A further reminder, please press the un-mute and know that the operator can identify some of the loud lines and mute them. But now is your opportunity to speak up if you directly want to ask question or have some dialog with Kaye.

KB: Now remember, this is Kaye, the only really dumb question is the one you didn't ask, because we're still learning everyday by the questions that you ask, so please feel free to...

Question: Hello this is Laura Sawney-Spencer from Cherokee Nation.

KB: Hi.

Laura Sawney-Spencer: Hello, Kaye, again, I hope you can hear me. But I had a question, and I apologize because I've been going back and forth between several things here. So I apologize if you've covered this, but if you go ahead and start your application for this year and you find out you're going to need some more time and instead want to do it the next year, is that acceptable?



KB: Maybe. Once you submit your application, you have a year from the date that it's accepted to complete the process. After that, you have to start over.

LS: Okay. Okay. That's what I was needing to know.

Question: Kaye, this is Janie Cambron from Kentucky. Can you hear me?

KB: Hey, I can.

JC: We had a question about reaccreditation. What will be the fees for that?

KB: (*Laughs*) I'm sorry I don't mean to be laughing. I'm only laughing because the answer, honestly, is that I don't have a clue. And the reason is, hopefully, obvious. Here's what we know about reaccreditation. We know that it will be required after the five years. We know that about a year ahead of time we will send you a reminder and say that you need to be thinking about that. We know that we won't ask you to start over unless you've lost your accreditation for some reason, we will ask you to build on what you've given us already and submit changes that your health department may have undergone. What we haven't done just because we haven't had the time yet to do the work, in all honesty, hasn't been the priority yet for us. It is costed out what those kind of reviews would look like and in our effort to continue the principle of passing on to you only the cost that PHAB incurs until we have a little history under our belt and then we have some sense about what airline ticket cost would be and what hotel room cost would be five years from now. It's just too early for us to forecast those. I'm just being totally honest with you; I just don't know.

JC: Well we're saying the same things then. Thank you.

Question: Hi this is Drew Hatchett up in New York State. Can you hear me?

KB: Hi, yeah.

DH: Hi, how are you? I just had a follow-up question on the fees. Do you know if it would be allowable to use CDC funds to contribute to these fees for a state health department? For example NPHII carry over dollars that weren't spent in the year, can they be used to fund the fees?

KB: I'll tell you what; I'm going to defer that question to CDC since it's their money you're talking about.

DH: Right, I just didn't know, if you had come across that discussion with them or not.

KB: We have and I believe they're prepared to answer that.

DH: Okay. Thank you.

LC: Sure, this is Liza at CDC and actually in the room here with me is Dr. Craig Thomas, the Division Director here at OSTLTS and NPHII is under his purview. So I'm actually going to let him answer this question.



Dr. Craig Thomas: Certainly, thank you Liza. Good afternoon everyone. Yes, we have been working on this issue, especially with our Procurement and Grants Office, PGO, at CDC, as many of you are familiar with that office. We are developing a series of FAQs on how CDC can help with accreditation fees that will be distributed shortly in which will help clarify the constraints for supporting the fees. For example, we can confirm that it is allowable for NPHII funds to be used for fees. However, as an example of potential constraints, you must be ready to apply this year. You can't pay out of NPHII funds for an application that won't be submitted until next year, so that we know for sure. And clearly this is an issue that we want to be as supportive as possible to achieve accredited health departments.

DH: Great. Thank you.

LC: Let me just jump in here with another question that came in through LiveMeeting. Mark Miller from Michigan asked, 'Kaye, how are you going to be recruiting reviewers? Will they be paid? How much?' So just a little bit about the site reviewers.

KB: That's a great question, Mark. We actually had a meeting about that today. We are just now getting to that process and so what I can say to you about that is we're just beginning to work through how to address those issues and also to address concerns about interrater reliability and some of those. So if you'll keep a watch on our website, probably by early to mid-October you'll start to see some news about how we're going to handle that.

LC: Going back to the fees issue, actually there was another question and Drew has shared this question, but through LiveMeeting, so Drew we're going to come back to one that you had posed, 'If a state health department is accredited will its local health departments get a break on fees?'

KB: No, not just based on that. Because, again as I've talked about the fee development structure, we're passing on our cost to PHAB. So the bottom line cost is what it is, so that local health department still has to be in our system and we still have to do the review. Where there might be a change in the fee, and this will depend on what the review process looks like for centralized states, but it is in a centralized state it is a significant portion of the documentation has already been reviewed recently in the state health department review, then there may be some consideration of that if the complexity of PHAB's review is not as costly to PHAB for the local site. But remember a lot of those fees are based on information in the system. The site visitors actually come into the health department to look at facilities and to meet with partners and others and so some of those costs will remain the same. Whether some of the documentation cost and some of the review cost might be reduced or not, we just don't have enough experience yet to be able to say.

Let me comment, I realize with the last several questions that I've said we're still learning and we're under development and that is even though we've launched the program, we launched the program with all the materials that we had deliberately planned to have in place for the launch of the program. But in the spirit of PHAB operating its own QI, we do continue to work on other aspects of the program. We continue to work on the development of materials and tools and we intend to get better as we do that. And so I hope the audience will understand that when I say that I don't know or we don't know



that yet, we're working on it, it's in that spirit that we still have a lot of work to do on the accreditation elements in order to be where we need to be. But it's coming!

Question: Kaye, I was wondering how the glossary is coming?

KB: Oh the glossary! Well that's a great question. We are finishing up that rascal. That glossary's been around so many revisions it just would make your head swim. We're trying to make the glossary non-redundant, if that's a word, with other glossaries. We don't need to repeat what others have said better or as well as we could say it. We've tried to make it specific for PHAB accreditation only. And so in that regard it has undergone several major changes, but we're coming along with it and we should have it out shortly within the next few weeks.

Question: Hi, this is Jennifer from Dallas. Relating to resources, I think that you all's assessment tool via the CDC has been very helpful and I just wanted to know if you all were planning to partner to update it to align with the new version.

KB: That's a CDC question Liza?

LC: I think actually, Jennifer, were you talking about the CDC National Public Health Performance Standards Assessment tool?

Jennifer: Yes.

LC: There has been work going on to re-engineer those three assessment tools and Kaye and others from PHAB have been part of the process and there are also some folks who were part of PHAB workgroup as well as part of the National Performance Standards re-engineering workgroups. And so that work has been going on. In fact, there's some sights that are beginning to review and even do some testing with the new versions, starting about now. So we're eager to see that those have been re-engineered with the intention of complimenting and really decreasing the redundancy with what exists in accreditation. Because the value of those tools, of course, is in mobilizing partnerships and building that engagement and we don't need to be redundant with what's in the agency-specific standards and measures that of course PHAB should be the primary voice on.

Jennifer: Okay. Great. Thank you.

LC: Let me jump in with another question that came in through LiveMeeting. Mark Miller from Michigan, of course everyone knows Michigan's familiar with accreditation, so this is a great question. 'Do you need to meet every single measure to be accredited? If not, will you allow a period for corrective plans of action?'

KB: Thank you, Mark. That's a great question. If a health department actually met every measure a hundred percent then something would be wrong with our measures. They wouldn't be stretch enough. And I know, Mark knows that, because we've learned a lot from Michigan. So we don't expect every health department to have to meet in a highly successful way, every measure. We do expect that they



have to demonstrate activity towards meeting each measure. So there has to be something that either they're doing, or their state health department's doing, or partner's doing. Then there's a four point scale of largely demonstrated, demonstrated largely, partially demonstrated, or not demonstrated so there's continuum along the way. If there are significant number of measures that a health department submitted documentation for that would cause them to receive a ruling by our accreditation committee or recommendation by our accreditation committee to the board that the health department would not be accredited just based on the information they submitted, then that information would be passed back to the health department with a request for a corrective action plan. This is all in the guide, by the way, so for those of you who are listening to this and taking notes, if you'll go back and look at the Guide to National Public Health Department of Accreditation, and this is all in there. The health department will be given ninety days to submit that corrective action plan to PHAB. And then up to it, that same year in order to implement those corrective actions and resubmit the documentation. If a health department fails to submit the corrective action plan or fails to correct the actions they said they were going to within those time frames, then they would have to start over.

LC: Great. One other question that has come in through LiveMeeting from Kristin Adams: 'Kaye, what's your opinion on keeping an accreditation coordinator as a permanent position?'

KB: Well, what I really wish a health department would keep a permanent position is a performance improvement/quality improvement person who may handle the accreditation coordinator role during the time that the health department is actively working with PHAB on their accreditation. But remember, the ultimate goal here is not about accreditation; the ultimate goal is about quality and performance improvement. So what I would like to see is for health departments to integrate quality and performance improvement so much into their daily workload that accreditation activities are heightened if you will during the time the health department is initially being accredited or being reaccredited and the rest of the time they're doing a great job working on performance and quality improvement. Great question.

LC: Well, we probably have time for one more question from the line. I'll just see if anyone else wants to pipe in.

Question: This is Jeff Guzenhauser from Los Angeles. Can I ask a question?

LC: Go ahead Jeff.

JG: I was wondering about the evolution of-the idea is in healthcare transformation and reform there are major steps the healthcare system's trying to do, and I'm wondering how the accreditation board views how it designs its standards to try to move the whole public health community in new directions; particularly in alignment with the major changes that are going in the healthcare system. A lot of that is kind of outside of our domain but there's probably need to move into it, I was just wondering about how the accreditation board sees its role in helping the whole public health system move that way.



KB: That's a great question and so it's a bit of a complex answer. The first version, version 1.0 the standards and measures were designed to meet the field where the field is and also to provide some stretch. And quite honestly, for most health departments, that stretch appears to be occurring just in the development of good, solid, high quality pre-requisites for the CHA/CHIP and that sort of thing. Down the road though, just exactly what you're asking, the PHAB board has already begun to think about as healthcare reform or other changes that affect public health, does the accreditation standard need to also raise the bar, push the field just a little bit. How can we be a major player in doing that? And I think probably, this is only one example, and I'll just use this briefly. Probably a good example of that is in the whole area of informatics. As you all know, there's a lot going on related to electronic health records, health information exchanges and all of that. And when the PHAB standards version 1.0 were developed, the standards workgroup, we just didn't have enough evidence, if you will, to tell us where we needed to go in terms of what we required of health departments. But as that body of knowledge evolves, the PHAB board is already looking at what it would need to do in order to move the field forward. It will be doing that same thing in many other areas that are related to the changes in the healthcare industry that upset public health as well. So we're trying to stay reasonable, but also cutting edge in striking that balance.

LC: Well thank you so much Kaye. I realize we are kind of close to time now so I want to wrap this up and definitely want to thank you again. And I want to thank everyone who's on the line today for participating in today's call. The call will be posted on the PIM Network site. And there were just one or two questions that came in that didn't have time to be answered through Live Meeting; those will be answered and we'll get back to you and definitely get back to individual people to make ensure that they get a question, so we'll get those out.

KB: Liza, one more thing if I could say. We're also going to do a nuts and bolts session at APHA so if you're coming to APHA in Washington, you might want to look for that as well.

LC: That's a great thing to mention. And in fact, as we've done in previous years we're going to probably put together a summary of just some of the very most relevant APHA sessions occurring and showcase that. So there's also going to be a session about the PIM Network and a couple of our performance improvement managers are going to be speaking at that, Jeff Czarda from Virginia, Laverne Snow from Utah, and Jessie Baker from Vermont, in fact they're going to be speaking. So we're thrilled to look into that and some other things going on related to this initiative, accreditation, and all things performance improvement.

So, as you can see, we have a poll up. And I appreciate everyone jumping in and voting. If you would like to give us some additional feedback on this call or suggest topics for future calls, obviously, as always, email us at PIMNetwork@cdc.gov and we hope you'll plan to join us on October 27th for our next call. And we're going to be following up this call with some state and local government perspectives and insights on preparing for accreditation. Remember that you'll be able to view and download all calls from the PIM Network web conference call series at both the OSTLTS website. Thank you! Good-bye!

