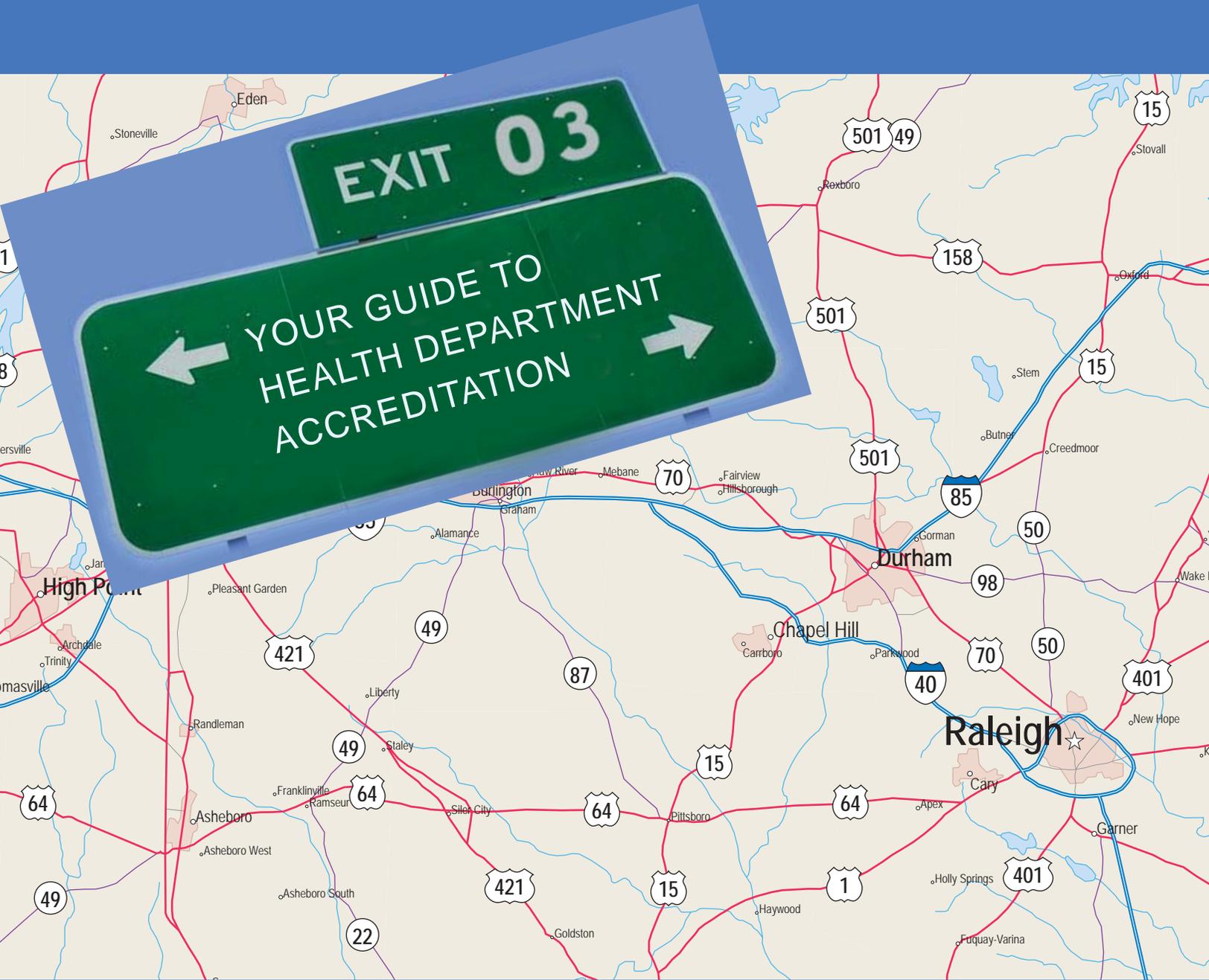


ACCREDITATION ROAD MAP



**NORTH CAROLINA ACCREDITATION
LEARNING COLLABORATIVE**

The Accreditation Road Map is a product of the North Carolina Accreditation Learning Collaborative funded by the Robert Wood Johnson Foundation.

Contributors and Collaborators

Multi-state Learning Collaborative

Les Beitsch, MD, JD

Lee Thielen, MPA

North Carolina Division of Public Health

Joy F. Reed, EdD, RN

North Carolina Institute for Public Health

Edward L. Baker, MD, MPH, MSc

Mary V. Davis, DrPH, MSPH

Craig Michalak, MBA

Rachel Stevens, EdD, RN

For more information about the North Carolina Accreditation Learning Collaborative please contact:

Mary V. Davis, DrPH, MSPH

Director, Evaluation Services

North Carolina Institute for Public Health

University of North Carolina School of Public Health

mvdavis@email.unc.edu

Table of Contents

1	Introduction
2	How to Use the Road Map
2	Technical Assistance
3	Phase I: Planning
5	Phase II: Enhancing Partnerships and Communications
6	Phase III: Creating the System
9	Phase IV: Piloting the System
11	Phase V: Implementing the System
13	Glossary
16	Sources

Introduction

Accreditation of state and local public health agencies is on the national radar. In light of this development, the Robert Wood Johnson Foundation supported the National Network of Public Health Institutes and the Public Health Leadership Society to advance the efforts of 5 states already conducting systematic performance and capacity assessments or accreditation programs of their local public health agencies through the Multi-State Learning Collaborative Performance Capacity Assessment of Public Health Departments (MLC).

States participating in the first year of this collaborative were Illinois, Michigan, Missouri, North Carolina, and Washington. To enhance existing processes, these states engaged in specific projects, contributed to the national Exploring Accreditation project, and shared lessons learned with each other. One of North Carolina's Accreditation Collaborative projects in the MLC was to create this Accreditation Road Map.

In 2002, the North Carolina Division of Public Health and the North Carolina Association of Local Health Directors with support from the North Carolina Institute for Public Health (NCIPH) undertook an initiative to develop a mandatory, standards-based system for accrediting local public health departments throughout the state. In 2005, the NC legislature enacted a mandatory program requiring all 85 local health departments to be accredited by 2014. As of July 2007, 30 health departments have been awarded accreditation status by the North Carolina Local Health Department Accreditation Board.

Establishing an accreditation program requires more than creating an agency self-assessment instrument and developing a process. A successful program requires support from a variety of stakeholders, such as local health departments, state health officers, and political leaders. The NC MLC partnership, which includes the state Division of Public Health, the North Carolina Association of Local Health Directors and NCIPH, has compiled a list of elements recommended for creating and implementing a successful accreditation program. This check-list of elements has been organized into an "accreditation readiness and implementation tool" that states can use to successfully initiate and implement an accreditation program.

How To Use The Road Map

The purpose of this tool is to provide public health partners with a check-list of issues to consider when thinking about creating a new accreditation system for local and/or state public health agencies. We identified 5 phases of accreditation readiness: Planning, Enhancing Partnership and Communication, Creating the System, Piloting the System, and Implementing the System. Each phase contains elements that public health partners should consider and work through to establish a successful accreditation system. There is no set order for the elements within a phase; some steps may need to come before others in your state's situation. We do, however, recommend that you work through the phases in the order provided.

Within each phase, the elements are presented as a checklist with "Yes" (the element is completed), "In Process" (public health partners are working through completing this element), "No" (the element has not been started), or "Not Applicable" (this element does not apply to this situation) as possible response choices. We suggest that nearly all applicable elements within a phase be completed before moving to the next phase. Key words used throughout the tool are defined in the Glossary.

Technical Assistance

NCIPH will provide technical assistance to states using this tool and answer questions about phases and elements. We will also serve as a gateway to the resources available through the North Carolina Local Health Department Accreditation program. Should states have questions that go beyond the NC experience, we will seek information from other MLC states. Finally, we will compile the experiences of states that use this tool both to improve it and expand our understanding of how accreditation systems develop.

"The Road Map is one of the most useful tools produced by the Multi-State Learning Collaborative. It is already being used and modified by other states."

Lee Thielen, MPA
Executive Director

CALPHO and the Public Health Alliance of Colorado

Phase I: Planning

Definition: Public health leadership group in a state (at state or local level) is considering an accreditation system. This phase involves identifying and creating the necessary support for an accreditation system.

A. Leadership

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
1. Shared Vision				
a. Is there a shared vision or state plan for the state's public health system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does this vision specifically address the role for local public health agencies in your state?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does this vision support the concept of an accreditation system?				
a. Is the aim or goal of the accreditation system clear?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is accreditation viewed as the "solution" to a particular problem?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Do state public health leaders support an accreditation system?				
a. State health officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. State commissioner for health and human services or similar agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do local public health leaders support an accreditation system?				
a. Local health officials association or state association of city and county health officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. State public health association/other professional associations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Local board of health officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other local public health directors/leaders (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the environment amenable to accreditation?				
a. Have leaders identified changes needed to enable accreditation to succeed (i.e. policies, funding, program requirements, politics)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Have leaders committed to making these changes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Has the local leadership for accreditation process been identified and supported?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Has a strategy to gain political support for an accreditation system been created?				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase I: Planning (continued)

“The Road Map makes it clear that getting accreditation to really accomplish the goals requires a 360 degree coordinated campaign plan - that means engaging public health directors and staff, board of health members, mayors, county commissioners, state legislators, governor's staff, media and the public - to understand the value and commit the resources to having a strong and effective public health system that will protect and promote the health of its people.”

Pamela Russo, MD, MPH
Senior Program Officer, Team Leader Public Health
Robert Wood Johnson Foundation

B. Options

1. What type of performance improvement systems are viable in your state?

- Accreditation System
- Other quality improvement process

2. Which system will your public health stakeholders and partners support?

3. For which system could your state gain political support? (specify)

C. Contextual Factors

1. Are there gubernatorial or legislative Quality Improvement initiatives?

2. Is there a push for accreditation by state or local government or Boards of Health (BOH)?

Phase II: Enhancing Partnerships and Communications

Definition: Public health leadership has expressed support for an accreditation system. During this phase, public health and other stakeholders should be included in the process and communications strategies developed.

A. Partnership

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
1. Have partnerships between state and local public health agencies been established around the concept of an accreditation system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Have partnerships with other stakeholders who can be champions for this issue been identified and established?				
a. County commissioners or other local elected officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Boards of Health (State and Local)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Legislators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. District/regional public health officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. State governing board body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other health profession associations (e.g. medical society, nurses association)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Schools or Programs in Public Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Health systems, hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Other organizations (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Communication				
1. Have messages about the real or perceived benefits of an accreditation system been crafted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Have strategies to convey these benefits been identified and implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase III: Creating the System

Definition: With leadership and partner support and communications strategies, the actual planning to create the accreditation system occurs.

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
1. Has a conceptual framework, i.e., standards, benchmarks, and activities been established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Examples of frameworks include:				
a. 10 Essential Services				
b. National Public Health Performance Standards				
c. NACCHO Operational Definition of a Health Department				
d. State Improvement Plan				
e. Turning Point Performance Management Self Assessment Tool				
f. Exploring Accreditation Model				
g. Other State accreditation standards				
h. Other (specify)				
2. Has the conceptual framework been translated into specific requirements?				
a. Required documentation has been identified to meet standards, benchmarks, and activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Requirements for an agency to receive "accredited" status established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--how many of which standards, benchmarks				
--required standards				
--tiers of accreditation status				
3. Has the local health agency unit to be accredited been identified and explicitly defined in accordance with Exploring Accreditation definitions?				
a. County health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Multicounty health departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Health District	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. State health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Combination of above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other configurations for service, i.e, mutual aid agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase III: Creating the System (continued)

“Accreditation is an intentional strategy to achieve higher quality outcomes for your health department and community. Knowing your readiness status before embarking on such a journey is an essential first step...”

Leslie M. Beitsch, MD, JD
Florida State University College of Medicine

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
7. Have accreditation system roles for various stakeholders and partners been established?				
a. State health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Local health departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Boards of health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. District or regional health officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Public health associations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Public health institutes or university programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Elected officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Have funding sources for the system been identified and reviewed for suitability?				
a. State Legislature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. County commissioners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Application fees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Grants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Has the system design been reviewed to ensure that it is likely to achieve its aims and goals?				
a. Have barriers to system implementation been identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Will system components address these barriers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have state and local leaders participated in this review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase IV: Piloting the System

Definition: Once system elements, processes, and procedures have been established, we recommend that an accreditation system be piloted and/or a small scale implementation of the system occur, prior to full implementation.

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
1. Have system elements and tools been developed?				
a. Agency assessment instrument ready for distribution and use by health departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Training for participants developed and scheduled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Technical assistance processes in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Site visit schedules in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Site visitors recruited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Accreditation Board recruited and oriented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Appeals process in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Evaluation system in place including Evaluation Domains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Data systems in place (accreditation evaluation, benchmarking among accredited states, data sharing policies, data confidentiality policies, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Agency post-accreditation ongoing quality improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are tools to support the system ready?				
a. Communication tools, telephone and Internet/web sites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Schedules prepared for agency self assessment, site visits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Marketing materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has a process for pilot testing the accreditation system been designed?				
a. Participating Health Departments have been identified (including a mix of health departments by number of employees, population served, urban/rural, services provided)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Pilot test evaluation questions have been identified and agreed upon by stakeholders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Data collection instruments and procedures are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase IV: Piloting the System (continued)

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
4. Are quality improvement processes in place to incorporate recommendations from pilot evaluation results and lessons learned?				
a. Reporting procedures of pilot test results have been agreed upon by stakeholders (internal, external reports, public presentations, data privacy issues addressed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Time and resources to act on recommendations is available to improve system prior to full implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is there a communication strategy to convey pilot results and recommendations to stakeholders and partners to ensure continued support of the process?				
a. Stakeholder/partnership meetings to review results and recommendations and provide feedback on system improvements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Reports and meetings with elected officials (county commissioners and legislators) to convey results and next steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mechanisms in place to receive ongoing recommendations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other strategies (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are there strategies in place to ensure continued funding for system sustainability?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the environment ready to support implementation of the full accreditation system?				
a. Policy, funding, and environmental changes have been implemented to support accreditation system incentives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Communications have occurred with state and local leaders and staff to implement the full system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase V: Implementing the System

Definition: To implement the ongoing system, the following elements should be in place and be monitored on a regular basis.

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
1. Are methods in place to ensure that the following continue to be implemented by the Accreditation Entity according to agreed upon procedures?				
a. Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Technical Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Agency Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Site Visits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Accreditation Board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Appeals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Remediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Re-accreditation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Agency post-accreditation ongoing quality improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Accreditation system evaluation and quality improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are methods in place to ensure that system policies are implemented as agreed?				
a. Requirements for an agency to receive “accredited” status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Site visit review policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Guidance or rules for Accreditation Board deliberations, appeals, and remediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Requirements for an agency to be re-accredited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are accreditation system evaluation efforts planned, implemented, and supported?				
a. Impact Measurement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Processes to update policies and procedures on a regular basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Processes to regularly update standards and measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phase V: Implementing the System (continued)

"As public health moves down the road to a national system for accreditation, we need a roadmap to guide our thinking and our action. As I talk with colleagues who are contemplating moving onto this road, they greatly benefit from the detailed, staged approach of the Accreditation Road Map, as a tool to focus the dialogue with key partners and to chart progress toward our goal of a national system."

Edward L. Baker, Jr, MD, MPH, MSc
 Director
 North Carolina Institute for Public Health

	Yes/ Complete	In Process	Not at all/ Need to start	Not Applicable
4. Are there strategies to continue leadership, partnership, and political support for the system?				
a. Regular updates and meetings with public health and political leaders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Strategies to demonstrate system value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Succession planning for accreditation leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the Accreditation Entity have adequate resources and oversight?				
a. Resources—staff, funding, facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Oversight—Performance review by partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are there strategies to ensure continued funding for the system?				
a. Does this include funding for initial as well as re-accreditation processes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do these strategies include identifying other sources of funding for the system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is there a process in place to communicate accreditation successes?				
a. Marketing plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Strategies to report progress on achievement of accreditation system goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Glossary

This glossary defines accreditation terms used in the tool. Definitions were compiled from a variety of sources. Sources for glossary terms are noted and more information on these is provided below.

Accreditation

(1) the development of a set of standards, a process to measure health department performance against those standards, and some form of reward or recognition for those agencies meeting the standards. (2) A voluntary conformity assessment process where an organization or agency uses experts in a particular field of interest or discipline to define standards of acceptable operation/performance for organizations and measure compliance with them. This recognition is time-limited and usually granted by nongovernmental organizations.

Exploring Accreditation

1 – EA project definition

2 – Michael Hamm

Accreditation Board (Governing Body)

An appointed group with representatives from various stakeholders that approves, or recommends, standards and benchmarks; awards, revokes, or suspends accreditation status, oversees appeals processes, and ensures ongoing evaluation of accreditation program.

NC Local Health Department Accreditation

Accreditation Entity

An independent organization that provides services related to accreditation, including training and technical assistance to agencies applying for accreditation, training and monitoring site visitors, and supporting the Accreditation Board.

Exploring Accreditation

Activities

Specific actions that can be documented, conducted, or taken by a local health department or a local board of health.

NC Local Health Department Accreditation

Agency (self) Assessment

An internal review of the local health department's ability to meet benchmarks or delivery of essential services as indicated by the agency's performance of a set of prescribed activities.

NC Local Health Department Accreditation

Appeal

A written objection of the Accreditation Board's decision regarding Accreditation status.

NC Local Health Department Accreditation

Benchmark

A standard established for anticipated results, often reflecting an aim to improve over current levels.

Exploring Accreditation

Evaluation

Systematic investigation of the merit, worth, or significance of an object.

CDC Evaluation Framework

Evaluation Domains

Aspects of the system that the evaluation will examine. Domains from Exploring Accreditation include: effectiveness of the Accrediting Entity, accreditation process, marketing and customer satisfaction, accreditation standards and measures, improved performance of accredited agencies.

Exploring Accreditation

Impact

The total, direct and indirect, effects of a program, service or institution on a health status and overall health and socio-economic development.

Exploring Accreditation

Local Public Health Agency (local health department)

The governmental public health presence at the local level.

NACCHO Operational Definition of a Functional Health Department

Performance Standard

A generally accepted, objective form of measurement that serves as a rule or guideline against which an organization's level of performance can be compared.

Guidebook for Performance Measures

Turning Point Program

Quality Improvement

Establishment of a program or process to manage change and achieve quality improvement in public health policies, programs or infrastructure based on performance standards, measurements and reports.

Performance Management Self-Assessment Tool

Turning Point Program

Pilot Testing

Use and testing of a new product before it is officially launched.

Exploring Accreditation

Public Health System

Entities that contribute to the delivery of public health services within a community, including public health government agencies, private and voluntary agencies, and individuals and informal association.

National Public Health Performance Standards

Remediation

A process for a local health department to create and implement a corrective action plan in reference to “Not Met” Standards/Benchmarks.

NC Local Health Department Accreditation

Site Visit

An on-site visit of the health department by a team of experts to clarify, verify, and amplify the information in the self assessment and the organization’s ability to meet a set of public health standards.

NC Local Health Department Accreditation

Site Visitor

A public health or other health professional responsible for ensuring that the local health departments have a fair, equitable assessment and that the Self-Assessment Instrument is clarified, verified and amplified.

NC Local Health Department Accreditation

Standard

A desired condition/state of affairs, and must be actionable, attainable, and measurable.

Exploring Accreditation

Sources

Exploring Accreditation

The Exploring Accreditation project is an opportunity for leaders to consider whether and how a voluntary national accreditation program could lead to even better health for their constituencies. The Exploring Accreditation Steering Committee and its workgroups developed a proposed model to allow us to answer the question, “Is a voluntary national accreditation program desirable and feasible?” Information on the process and proposed model is available at <http://www.exploringaccreditation.org>.

CDC Evaluation Framework

Information available at <http://www.cdc.gov/eval/framework.htm>.

NACCHO Operational Definition of a Functional Health Department

Available at <http://www.naccho.org>.

National Public Health Performance Standards

Information available at <http://www.cdc.gov/od/ocphp/nphpsp/index.htm>.

North Carolina Local Health Department Accreditation

The NC mandatory accreditation system was established and is managed by the following partners: the North Carolina Divisions of Public Health and Environmental Health, the North Carolina Association of Local Health Directors, and the North Carolina Institute for Public Health. To learn more about this system go to <http://nciph.sph.unc.edu/accred/>.

Turning Point Program

We used the Performance Management Self Assessment Tool from the Turning Point Performance Management National Excellence Collaborative as a model for this accreditation readiness tool. To access the tool and other resources go to: <http://www.phf.org/PMC.htm>.