



Executive Summary

Providing Assistance to Public Health Agencies Preparing for Accreditation

The Association of State and Territorial Health Officials (ASTHO) and the National Association of County and City Health Officials (NACCHO) provided technical assistance and funding to help local, state, and tribal health departments prepare for accreditation. The National Indian Health Board developed a strategy for public health accreditation in Indian Country and provided technical assistance to promote and facilitate tribal participation.

The organizations worked together, and with the Public Health Accreditation Board, to align accreditation for local, state, and tribal health departments. They also collaborated to support the health departments participating in a beta test of public health accreditation and the quality improvement projects that followed. The National Association of Local Boards of Health was involved in some of this work.

[Read the full report.](#)

CONTEXT

Public health accreditation seeks to advance quality and performance within local, state, tribal, and territorial health departments by establishing consistent standards and measuring their performance against those standards.

“Accreditation is a top priority for the Foundation,” said Pamela Russo, MD, MPH, a senior program officer at Robert Wood Johnson Foundation. “Health departments are a critical on-the-ground partner for much of what we do. Our efforts to reverse the upward trend in childhood obesity, to strengthen preparedness, to help the homeless, to reduce

violence, to provide care for the poor and underserved, are put at risk if the health departments are weak, poorly supported, or ineffective.”

RWJF has been funding efforts to develop a voluntary national accreditation system for local, state, and tribal public health agencies since 2004, starting with an effort called *Exploring Accreditation of Public Health Departments*. It was co-funded by the Centers for Disease Control and Prevention (CDC) and co-managed by the Association of State and Territorial Health Officials (ASTHO) and the National Association of City and County Health Officials (NACCHO). In the winter of 2006, the Exploring Accreditation steering committee concluded that it was both desirable and feasible to establish a voluntary national accreditation program.

RWJF and the CDC supported the establishment of the nonprofit Public Health Accreditation Board (PHAB) in May 2007 to implement and oversee national public health department accreditation. It was part of RWJF’s national initiative *National Accreditation of Public Health Agencies*.

RWJF launched other components of the initiative in the fall of 2007:

- ***Providing Assistance to Public Health Agencies Preparing for Accreditation***, the subject of this report.
- ***Engaging Leaders in Advocacy for Public Health System Improvement Through Accreditation and Quality Improvement*** has supported activities that educate public health leaders, governing bodies, and policy-makers about accreditation, involves them in designing program standards and measures when appropriate, and assures that they understand and support the benefits of accrediting health departments.
- ***Building the Evidence Base for Public Health Accreditation and Quality Improvement***, which funds research projects designed to measure the cost and impact of accreditation and the factors involved in its success. The last of these initiatives is scheduled to close in May 2012.

THE PROGRAM AND ITS RESULTS

Through *Providing Assistance to Public Health Agencies Preparing for Accreditation*, from September 2007 to August 2011, ASTHO and NACCHO provided technical assistance and monetary support to help local, state and tribal health departments prepare for accreditation through quality improvement projects. RWJF also funded the National Indian Health Board, which represents tribal governments, to develop a strategy for public health accreditation in Indian Country and to provide technical assistance to promote and facilitate tribal participation. RWJF managed the program internally.

Key activities and results include:

- **The Accreditation Preparation and Quality Improvement Demonstration Sites Project.** Fifty-six local health departments conducted self-assessments and 25 of them worked in five regional collaboratives on sharing services. The remaining 31 local health departments implemented quality-improvement initiatives. Project examples include developing a community health profile and increasing the use of prescribed HIV medications.

In an article published in the *Journal of Public Health Management and Practice*, evaluators from the National Opinion Research Center in Chicago observed that most participants felt their quality improvement projects helped to improve their overall effectiveness.¹

NACCHO shared information from the demonstration sites with other local health departments through a section of its website, through webinars and during national conferences.

- **Strategic planning and other efforts to advance public health accreditation in Indian Country.** A key element of the work was cultivating and strengthening relationships across tribes, within the tribes and with outside organizations involved in accreditation.

The National Indian Health Board developed and began to implement a strategic plan to engage tribes in public health accreditation and help them recognize its benefits. It also provided information and expertise to inform program development so that the Public Health Accreditation Board could adapt its approach to the tribal system.

- **A prelaunch (beta) test of the accreditation standards and measures developed by the Public Health Accreditation Board.**

Thirty public health departments—19 local, eight state, and three tribal health departments—participated in the beta test of a process designed to determine whether a health department was qualified for accreditation. With RWJF funding, ASTHO, NACCHO, and the National Indian Health Board provided technical assistance for that work. Participants completed a self-assessment and outside public health experts made sites visits to assess conformity to the measures.

Based on findings from an evaluation by the National Opinion Research Center and informal feedback from the beta test sites, the Public Health Accreditation Board revised some of the standards and measures within the domains to streamline, clarify or expand them, and made other changes to reduce redundancy in its material and simplify requirements.

¹ Berryman Davis P, Solomon J and Gorenflo G. “Driving Quality Improvement in Local Public Health Practice.” *Journal of Public Health Management and Practice*, 16(1): 67–71, 2010. Available [online](#).

- **Quality improvement (QI) projects.** The health departments that tested the accreditation standards and measures also designed and implemented QI projects. Participants chose narrowly focused projects, such as improving data collection for environmental health services, developing a well-defined process for communicating public health alerts, and improving the accuracy of birth records.

Participating sites reported measurable improvements as a result in areas such as access to care, screening, reporting, health improvement planning, customer satisfaction, community engagement, clinic wait times, and revising and updating internal policies. They also increased their focus on QI after participating in the beta test and QI projects.

- **A study of the role of local boards of health.** The National Association of Local Boards of Health (NALBOH) studied the role that local advisory or governing boards of health play in accreditation; NALBOH also developed curriculum, webinars and other resources about accreditation and QI for its members.
- **Spreading the word.** All of the organizations involved provide information on their websites to help public health departments prepare for accreditation. This includes reports and case examples from the beta sites, toolkits, training materials and other resources. Most of these websites also include pages devoted to quality improvement.

AFTERWARD

The Public Health Accreditation Board launched national voluntary accreditation for public health departments in September 2011 with continued funding from RWJF and CDC. ASTHO, NACCHO, and the National Indian Health Board continue to support their members in a wide range of activities to prepare for accreditation and undertake QI work. ASTHO and NACCHO also have funding from RWJF and CDC for this work.

RWJF has adopted the QI model used in *Providing Assistance to Public Health Agencies Preparing for Accreditation* in its public health grantmaking. RWJF is also funding the New Orleans-based National Network of Public Health Institutes to build momentum for public health accreditation through *Strengthening the Community of Practice: Accreditation and Quality Improvement in Public Health*, launched July 2011.

Program Management: Internally managed by RWJF staff

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