NC Local Health Department Accreditation: What it Does and Doesn’t Do

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Presenter Disclosures

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The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose
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Outline

• Accreditation Program Status
• Data Sources
• What Happens (Before) and After Accreditation Does
Program Status

• 48 LHDs accredited under final rules
• 10 LHDs undergoing process first time
• 12 LHDs undergoing re-accreditation
Data Sources

• Annual NC Accreditation program evaluations
• Program data
• Survey of accredited agencies
  – 48/48 agencies accredited under final rules
  – Did not receive surveys from 2 pilot accredited agencies
What Happens Before Accreditation
Improving Accountability

All LHDs report adopting new or revising existing policies to meet accreditation standards.

Provides a Platform for Performance and Improvement

Achieving goal to improve consistency of LHD services across the state.
Internal Benefits

- LHD staff
  - Provides a teambuilding opportunity
  - Teaches staff about all things an LHD does
- Boards of Health
  - Increases understanding of all things an agency does
  - Promotes understanding of specific board roles

*Board of Health participation in accreditation activities sparked more interest and participation in developing program policies for the strategic planning.*
Funding

• 46% of accredited LHDs reported receiving local funding to prepare for accreditation
  – Boards of Health
  – County Commissioners
What Happens After Accreditation
Comprehensive Take Home

In essence, we realized that whether large or small things equate out when it comes to benchmarks, organization and structure, staffing (even if some of our staff do several jobs).

We can better define, frame, and ... our organization activities related to essential and non-essential services and functions.

We are better equipped with informational systems to gather, report, and utilize data in every aspect of our "business" of service and public health.

We are more confident as a team with how important we are in serving our communities with a sense of comparability with other health departments.

We are better organized, have QI activities ongoing, and have a clear incident command that is at least three deep in some areas to [sic] respond as needed to just about any situation or disaster that may occur.
Accountability and Quality Improvement

• 94% continue to update policies and procedures
• 50% address suggestions for improvement in Site Visit Report
• 67% conduct QI activities
Improved Relationships

• Boards of Health: 56% (*Helped Board of Health members to develop a better understanding of their role as it relates to the agency's function.*)

• Community partners and hospitals: 54%

• County Commissioners: 24%
Image and Recognition

Achieving accreditation did get recognition from the commissioners and board of health that the health department was striving to be as good as possible in delivering services.

It has improved the general image of the department by substantiating the level of quality and professionalism of the organization and its people. The accreditation process and our achievement is viewed by our partners as being grounded in best practice principles and therefore validates the organizations commitment to its vision of being "a model of best practice in public health".
What Are We Measuring?

AND YET THE QUESTION REMAINED: "WHO CAME FIRST?"

High Performing Agencies ← Agency Improvements
Moving Forward
• Ongoing program implementation
• Restore full program funding
• Assure PHAB recognition of NC program

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