Policy: It shall be the policy of the NCLHDA program to periodically review the Standards, Benchmarks & Activities of the Health Department Self-Assessment Instrument (HDSAI) and recommend changes to the Commission for Public Health.

Purpose: The Standards, Benchmarks & Activities of the NCLHDA program spell out the expectations for an agency that is and/or desires to be accredited. These elements are the basic level of compliance required of local health departments. The Standards, Benchmarks & Activities should be practical, reflecting the current operational work of the local health department; should be beneficial, creating means whereby the agency can improve its performance; and should lend credibility to the agency and the system. Periodically, the Standards, Benchmarks & Activities will need to be revised to reflect changes in current public health practices. The process for review of the Standards, Benchmarks and Activities is as follows:

Definitions:

- **Applicable Law, Rules and References:** 130A-34.1(e) states that the Commission for Public Health shall, after reviewing standards developed by and consulting with the Board, adopt rules establishing accreditation standards for local health departments.

  Subchapter 48b of the NC Administrative Code defines the Local Health Department Accreditation Standards

- **Responsible Person(s):** The Board is charged with developing, and implementing standard requirements for the accreditation of local health departments in NC. The Commission for Public Health adopts those standards as rules.

  In developing standards, all partners of the NCLHDA are substantially involved in the process. Input comes through the Board Standards and Evidence Committee, NCLHDA staff,
NCALHD Accreditation Liaison Committee, DPH legal liaison, public health attorneys at the School of Government and the Accreditation Standards Workgroup and is coordinated through the NCLHDA staff. The process culminates in the adoption of standard requirements by the NCLHDA Board and adoption as a rule by the Commission for Public Health.

**Procedures:**

**Ongoing Review of Established Benchmarks and Activities**

The Board’s ongoing review of the benchmarks and activities results in their evolution, based upon changes in local public health practice and service delivery. Requests for modifying the benchmarks and activities are received from a variety of sources, and action on these suggestions is the result of broad input by the profession, recommendation by the Board’s Standards and Evidence Committee and action by the full Board. The Board will conduct an annual review of the standards or when legislative changes dictate.

Two forms of revision are possible: the revision of an existing benchmarks and activities to meet evolving needs or processes; and developing new benchmarks and/or activities in response to newly identified needs or processes. This review and any resulting changes may be advancements driven by performance improvement, research findings or changes in national standards administered by the Public Health Accreditation Board (PHAB). As a result of this review, benchmarks and activities may be revised or refined for clarification, undergo no change, be deleted or be subjected to comprehensive revision to create a more effective means of assessment.

**Process for adding or revising a benchmark and/or activity**

1. The Board initiates the process to make changes.
2. A multi-representative Accreditation Standards Workgroup is appointed.
   a. The Workgroup is composed of an NCLHDA Board member, two agency accreditation coordinators, two DPH nurse consultants, one local health director, one Board of Health member and two site visit team members.  
5(Appointments)
3. The Accreditation Standards Workgroup reviews the current benchmarks and activities.
   a. The review consists of a review of the current benchmarks and activities for content, clarity, and continued need.
   b. The workgroup considers revisions to the benchmarks and activities in relation to changing processes, demographics, professional impact and expected outcome for local health departments.
   c. The workgroup considers comments from any source regarding revision of current benchmarks and activities or the proposal of new benchmarks and activities.
4. The workgroup drafts a new/revised set of benchmarks and activities.
5. The draft benchmarks and activities are released for public review and input.
6. Comments are collected, reviewed and considered by the workgroup.
7. Changes deemed appropriate by the Workgroup are made to the draft benchmarks and activities.
8. The final draft benchmarks and activities are released for review and forwarded to the Standards and Evidence Committee of the NCLHDA Board.
9. The Committee meets as needed to review, discuss and amend the draft benchmarks and activities.
10. The Committee presents the draft benchmarks and activities to the Board.
11. The Board reviews and adopts the draft benchmarks and activities as deemed appropriate.
12. The benchmarks and activities are forwarded to the Commission of Public Health for adoption as rule.

Implementation of Revised Benchmarks and Activities

A minimum of three months must occur between the adoption of new or revised benchmarks and activities and their implementation. While some time is necessary to allow local health departments to understand and to adjust to new or revised benchmarks and activities, quick implementation is necessary so that local health departments can begin to gain experience and prepare for the implementation of the benchmarks and activities.

Evaluation of Revised Benchmarks and Activities

Evaluation of new or revised benchmarks and activities will be done during the next evaluation cycle (the fiscal year) - the end of one year after implementation of the benchmarks and activities.

Reference Plans and Policies:

1 Accreditation Standards Workgroup appointments
NCLHDA Board Member appointed by Board Chair
Agency Accreditation Coordinators appointed by NCALHD Accreditation Liaison Committee with director approval
DPH Nurse Consultants appointed by Head, Public Health Nursing, NC-DPH
Local Health Director appointed by NCALHD President
Board of Health member appointed by Association of NC Boards of Health
Site Visit Team Members appointed by NCLHDA staff