The Site Visit Team (SVT) Operational Guidelines are to be followed by all SVT members. These guidelines have the force of policy.

Revisions Approved by the NCLHDA Board on December 17, 2010

Signature of Board Chair______________________________
Site Visit Team
OPERATIONAL GUIDELINES

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Role of Site Visitors

The primary role of the SVT is to amplify, clarify and verify the health department’s self-assessment in order to evaluate the health department’s degree of compliance with the benchmarks and associated activities. SVT members are present as representatives of the North Carolina Local Health Department Accreditation (NCLHDA) Board.

To accomplish this task, the SVT will:
- Review the Health Department Self-Assessment Instrument (HDSAI) and supporting documentation in accordance with the HDSAI Interpretation Document
- Visit the local health department facilities and inspect in accordance with the benchmarks
- Interview local health department staff, Board of Health members and other persons necessary to evaluate compliance with the benchmarks

The work of the SVT is to be fair, unbiased and accurate. The presence of the SVT should build credibility and inspire trust. The SVT should exhibit integrity, consistency, confidentiality and professionalism.

Composition of the SVT

Each Site Visit Team will be comprised of not fewer than four individuals with expertise or experience in local public health, including experience or expertise in environmental health, public health nursing, public health administration and policy development and governance. The SVT may include a:
- Local Health Administrator
- Public Health Nurse
- Environmental Health Specialist
- Board of Health Representative

An alternate for each position is also selected. The alternate may be called upon to serve if, for any reason, the team member must withdraw.

A State Accreditation Coordinator (SAC) will be appointed to the SVT by the Accreditation Administrator (AA) to assist the SVT in their efforts and to conduct the Exit Conference. The SAC
is to serve as the liaison between the SVT and the local health department and the AA. The SAC does not participate in the review and evaluation of documentation/evidence or the interviews. It is the responsibility of the SAC, in conjunction with the Lead Site Visitor (LSV) to address any conflicts arising between SVT members and the health department during the site visit.

**Lead Site Visitor**

One person on each SVT will be designated to serve as Lead Site Visitor (LSV) by the AA. The LSV is responsible for coordinating the activities of the SVT when on-site and is the spokesperson for the group. The LSV is responsible for completing the Site Visitor Report. The LSV is the point-of-contact with the SAC, who will convey information or requests for additional documentation to the Agency Accreditation Coordinator (AAC). Throughout the Site Visit, the LSV will evaluate the progress of the team and make additional (or revised) assignments. Before a team member can be designated as the LSV, he or she must have served on at least one site visit.

The LSV will have the following responsibilities:

- Contact the other members of the SVT to introduce him/herself as LSV.
- Review the Site Visit schedule.
- Review the list of staff and community representatives to be interviewed.
- Convene the members of the SVT for any meetings.
- Participate as an interviewer along with other members of the SVT.
- Work with the SAC to make any necessary changes to the interview schedule.
- Collect information and input of SVT, complete the site visit report and submit it to the AA within fourteen (14) days of the completion of the site visit.
- Present, on behalf of the SVT, the final report and recommendation at the NCLHDA Board meeting.

The LSV should assist the SAC in ensuring the assessment stays on schedule and follows protocol. The LSV will confer with the SAC for needed changes to schedules or when another team member is not fulfilling their duties.

**Applying to Serve as a Site Visitor**

Applications to be a site visitor are only accepted through the NCLHDA website. The link for the application is at [http://nciph.sph.unc.edu/accred/site_visitors/visitor_app.php](http://nciph.sph.unc.edu/accred/site_visitors/visitor_app.php). Applicants will not receive notice of selection as a SVT member or not until appointed to a team. If not appointed, applicants are notified that they were not selected for the current cycle and remain in the pool for possible selection to a future team. Some applicants do not fit the criteria to be a site visitor. If so, they will be removed from the pool and notified by the AA.

Before applying, it is necessary to ensure that the approval of an immediate supervisor or the Health Director is obtained to serve as a site visitor. NCLHDA does not check this. It is assumed that if an application is received, the applicant will be able to serve if selected.

**Criteria for Site Visitor Selection**

The SVT for the NCLHDA process is a peer review model. The teams selected are multi-disciplinary and are expected to have experience and/or extensive knowledge of the delivery of local public health services. Since this experience or knowledge is important for the success of a peer review process, SVT members are selected using their connection to local public health as an important element. Initial applicants for team members should be: active employees in NC local
public health; have retired within the past three years; or have retired within the past five years if still active, in some manner, in the delivery of local public health.

Primary Site Visit Team members are:

Public Health Administrator
Who may serve – a local health director, an assistant health director or an Administrative Officer II or III. If not a local health director, the person should have a broad base of knowledge of general health department administration.

Environmental Health
Who may serve – any Environmental Health Specialist with current R.S. including program coordinators, supervisors and directors, and RS Board members.

Board of Health
Who may serve - board members currently serving on a local Board of Health. If the Board of Health member’s term has expired he/she may remain in the site visitor pool as long as he or she was an active Board member at the time of application and has remained active in the accreditation site visit process.

Nurse -
Who may serve – a Director of Nursing, Nurse Administrators or Supervisors or a Public Health Nurse II or III.

Once a site visitor is in the pool, they may continue as site visitors if they participate in training as required by the AA.

Active NCLHDA Board members cannot be site visitors. If the individual was a site visitor and was then appointed before the presentation of the site visit report to the NCLHDA Board, the member must abstain from the discussion and the vote on NCLHDA status for the county visited.

Local Health Departments are advised of the proposed composition of the SVT in advance to have an opportunity to identify any conflicts of interest that might disqualify a visitor. If such a conflict is identified, the AA will provide a replacement.

**Site Visitor Availability Form**

Prior to selecting the team members for upcoming site visits, potential team members will be sent a form that must be completed showing availability to serve for the counties to be visited. In order to be considered for that cycle, the individual must return the form by the stated due date.

**Site Visitor Data Base**

The NCLHDA Board maintains a data base of all site visitors that have made site visits or applied to be site visitors. If individuals have been a site visitor during the past 12 months, their application to serve will remain active. If they have not been able to serve during the past 12 months or have not returned a completed availability form, their application will be removed and the individual will be notified. A new application must be submitted for the individual to be considered as a SVT member.
It is the responsibility of all potential site visitors to notify the AA of any changes in contact information and employment.

**Conducting the Site Visit**

Site Visits typically last for three days. The duration of the visit may be longer if special circumstances (such as those encountered in very large, complex health departments or in multi-county district health departments) dictate the need for more time, or shorter, in the case of a very small agency.

Typical SVT duties and responsibilities are:

**Pre- Site Visit Document Review**

Prior to the Site Visit, the SVT have completely reviewed the following:

- Completed HDSAI and Summary Checklist
- County documentation provided, i.e. strategic plan, organizational chart, staff roster, community health assessment, etc.
- Site Visitor Interview Guide
- Site Visitor Report Template and Suggestions for Quality Improvement Template
- HDSAI Interpretation Document
- NC Public Health Laws, as relevant

**Pre- Site Visit Team Meeting**

Prior to beginning the visit, at a time set by the AA and LSV, the SVT will gather for a mandatory meeting (either by conference call or in-person) to:

- Introduce team members to each other
- Discuss observations made from their individual study of the HDSAI and other previously circulated material
- Discuss specifically any deficiencies or ambiguities noted by analysis of the HDSAI
- Review any new information from the AA about the agency or about interpreting the benchmarks
- Review the site visit schedule and make assignments of SVT members for document reviews and interviews
- Review the agency’s organizational chart and any other basic information that describes the model by which the agency conducts its work
- Discuss the methodology for preparing the Site Visit Report

**Entrance Conference**

The Entrance Conference is the first activity conducted on the first day of the Site Visit, at the main office of the health agency. Representatives from the senior administration of the agency, including the Agency Accreditation Coordinator (AAC), will meet with members of the SVT to exchange introductions, to discuss the general schedule of the site visit, and to make note of any recent changes in the organization which may be relevant to the Site Visit. The LSV serves as the group spokesperson during this first activity of the Site Visit. At this time, the agency will ask all
site visitors to sign a confidentiality agreement. An agenda for the Entrance Conference can be found on the Accreditation website on the Health Department materials page.

**Tour of the Health Department**

Following the Entrance Conference, the Local Health Director, or designee, will lead the Site Visitors on a general tour of the health department. This tour allows the Site Visitors to become familiar with the environment as well as to note the general lay-out, space provisions and records storage for the agency. One or more pre-planned trips off-site may be required for visits to the agency’s satellite facilities. The agency will provide transportation for offsite travel.

**Review of Documents**

Each Site Visitor will have been assigned a primary responsibility for verifying one or more sections of the HDSAI. The SAC will provide a guideline for HDSAI assignments to the SVT. This duty will require examination of materials that have been compiled by the health department in the on-site Resource File (or Files) that will be available to the Site Visitors for the duration of their visit. SVT members examine documents relevant to their assigned sections and record their findings. If necessary for proper verification of a benchmark or activity, the SVT may request additional information or evidence not presented in the resource file through the SAC. If the agency fails to present a satisfactory document, the SVT should note this in the Site Visitor Report.

Site Visitors should adhere to the following guidelines and principles in reviewing the agency’s documentation:

- The NCLHDA Board recognizes that different organizational structures among North Carolina’s autonomous health agencies require different operational approaches and therefore, variations in methods for meeting standards are both permissible and expected.
- Examination of minutes from meetings should ascertain that they have been properly dated and completed in a manner that is consistent with written policy and in compliance with any/all applicable legislation.
- Manuals for policies and procedures should be examined for subject matter, review dates, and revision dates.
- By-Laws should be examined for content, review and/or revision dates.
- The SAC will work with the AAC to develop a random list of personnel records to be reviewed for verification of staff credentials, training and CE, annual performance appraisals and job descriptions. The agency must be prepared to provide the requested records and are notified prior to the visit regarding personnel record requirements in relation to the HDSAI.
- The Site Visitors should record their document review findings on their copies of the completed HDSAI for later compilation in preparing the Site Visit Report.

**Interviews**

The SVT will interview a variety of individuals and groups, including staff of the agency, members of the Board of Health and representatives from local government and community partners, to ascertain their understanding of the agency and their role in or with respect to the agency. However, the ultimate purpose of interviews is to allow for confirmation of evidence provided in the documents and give the opportunity to ask questions to help clarify evidence. Unless
otherwise specified, all interviews will take place at the central office of the health department. If off-site interviews are necessary, the agency is responsible for providing transportation for the Site Visitors. Once document review is completed the site visitors may deem a particular interview as unnecessary, therefore, the interview can be deleted from the schedule.

Site Visit interviews should conform to the following guidelines:

- It is important that interviewees feel at ease. The interview should be held in a private room so that all exchange of information remains confidential.
- Interviewers should adapt the questions asked to help in clarifying the evidence.
- The interview is for the SVT to gain information about the agency. Interviewers should not respond to questions during the interview asking about operations in their respective counties. Interviewers should not make comments about their own experience, and should not offer suggestions for help or assistance during the interview time.

End-of-Day Meetings

At the end of each day of the Site Visit, the SVT will meet in executive session to discuss the outcomes of the day’s work. The SAC will work with the team to record strengths/general observations from each day and other notes to be shared at the Exit Conference and for use in the Site Visit Report.

Site Visit Report

The Site Visit Report is the document the SVT uses to summarize information gathered from:

- the HDSAI
- the review of the agency’s evidence and documents
- the interviews with staff and community representatives
- The tour of all health department facilities

The report includes:

- a narrative that contains the findings, including not met activities
- a summary check list

Time permitting; the SVT may begin to compile its report during the site visit. All SVT members should provide detailed notes to the LSV during the site visit or by email immediately following the site visit. The LSV is responsible for completing the report and submitting it to the AA within fourteen days (14) of the completion of the site visit.

NOTE: When the SVT deems that any benchmark has not been met, it should take care to document its findings and recommendations fully. Verification of the accuracy of the agency’s self-assessment by the SVT will provide the basis for the NCLHDA Board’s determination of Accreditation status.

Suggestions for Quality Improvement Report

The Suggestions for Quality Improvement Report is a separate report completed by the SVT which has no bearing on the health department’s accreditation status. The report is merely suggestions that the Health Director may do with as they please.
Suggestions for Quality Improvement should be linked to a specific activity. The SVT should make note of any activities where a suggestion for QI can be made during their review of the LHD's documentation. Suggestions for QI are necessary for activities that meet the minimal intent of Accreditation but could be further strengthened for future visits. Site visitors should also make note of where documentation initially provided by the LHD was not sufficient but sufficient evidence was found elsewhere or verified in interviews.

Exit Conference

The Exit Conference, led by the SAC and LSV, is scheduled for the end of the site visit and attended by any staff that the Local Health Director chooses to have present. With exception to the LSV, the other site visitors are invited to attend the Exit Conference but are not required to do.

The purpose of the Exit Conference is to offer the findings of the site visit, including the SVT's recommendation for the LHD's accreditation status, any 'not met' activities, and general strengths/observations of the LHD. The SAC will provide information to the LHD on the site visit report and suggestions for QI report as well as the Accreditation Board meeting.

Guidelines and General Protocol for Site Visitors

Site Visitors only have the right to review materials that are evidence for one or more of the benchmarks and activities they are reviewing; they do not have access to any and all documents the health department may have or that you might wish to review within an agency. The agency must only provide evidence to show it meets the activity, not all documentation available.

Attendance

All team members are expected to be present for all assessment and site visit activities. Be prompt for meetings and interviews and plan to remain for the entire site visit.

Confidentiality

Site visitors will be asked by the agency to sign a confidentiality statement and will comply with this request. Treat all health department documentation – whether provided beforehand or on site – as confidential. Discuss it only with SVT members, the AC, the AA, and the NCLHDA Board. Since the SVT will be reviewing personnel records, possibly seeing protected health information, and observing clinic operations while clients are present, it is imperative that confidentiality of the information and observations be maintained. This is not only to protect the agency, but also to protect the SVT and maintain credibility for the program.

Conflict of Interest

Whenever there is a conflict of interest, real or perceived, a SVT member should remove his or herself from the discussion or situation or from participating on the team. Site visitor applicants should exclude any local health departments from their availability form if there is a conflict of interest.

Possible conflicts of interest include:

- Current or former affiliation with the agency being reviewed
• Affiliation with an agency or organization in geographic proximity to the agency being reviewed
• A recent or current fiscal relationship or other vested interest in the agency or its activities
• A close relative in affiliation with the agency being reviewed

Dress Code

SVT members should wear business dress while at the local health department and while conducting interviews and other assessment activities. For after-hours activities and SVT only activities, casual dress can be worn. Since you may be working in small spaces and closed rooms, do not use heavy perfumes or colognes, as this can aggravate allergies and asthma. Site visitors will be provided with a name badge/tag and are requested to wear it during the entire site visit. After hours, the name badge/tag may be removed. Do not wear your personal ID or name badges from your employer, as you are there as representatives of the NCLHDA Board, not your agency. While on site, the local health department may ask or require SVT members to wear a visitor badge.

Suggestions for Review of Evidence

• Read the entire HDSAI document and the HDSAI Interpretation Document carefully, paying particular attention to sections that have been assigned to you. Read all other materials provided in advance of the Site Visit and plan to participate in any training sessions or preparatory conference calls provided by the AA.
• Identify and list any weak or problem areas in the completed HDSAI before the start of the site visit. It may be helpful to make a list of specific questions you will want to have answered during the review.
• Do not try to judge the applicant agency as “good” or “bad”; rather judge only whether or not it meets the specified benchmarks.
• Withhold final judgment of a health department’s compliance to activities or benchmarks until the culmination of the site visit. Although a SVT member may begin to form an opinion of a health department’s compliance with the benchmarks on the basis of the information provided in the completed HDSAI, the health department’s responses in the HDSAI must be compared with the agency’s policy and procedure manuals, strategic and operational plans and other documents, including agency, program and staff meeting minutes and evidence from staff interviews. The review of documents and interviews provides an opportunity to verify whether the facts provided in the HDSAI are consistent with the agency’s actual practice.
• Be alert for documents that are referred to by names other than those used in the benchmarks.
• Consider a health department’s satellite office(s) to be part of the central agency and not as separate entities. The SVT should pay particular attention to the nature of communications and record sharing among all of the agency’s offices.
• Gather and report as much information as possible so the NCLHDA Board can make a well-informed decision regarding Accreditation status.
• Be aware that local health departments in North Carolina are autonomous and differ significantly in operational style. Take into account the unit’s size, structure, area served, populations served, satellite offices, community liaisons, composition of the Board of Health and committees and effectiveness of internal communications. Local situations and local problems also vary. Site Visitors must adhere to the benchmarks and their component activities, but note that services and programs are planned, implemented, monitored and
evaluated differently among agencies. Site Visitors should guard against bias because the agency under review is different from any other with which they are familiar.

Ethical Behavior

It is expected that SVT members will conduct themselves responsibly. Respect your team members, the NCLHDA staff and the Health Department you are visiting. Consider the contributions of all members of the SVT to be important and valued. Do not take advantage of health department hospitality by seeking privileged treatment or pursuing personal interests, including potential employment.

Do not disparage or criticize any elements of the accreditation process in the presence of staff members of the health department or members of the local community. Likewise do not disparage or criticize health department staff or programs.

Gifts may be offered to SVT members from the local health department and such offerings should be refused. While the health department may be giving the gift as a courtesy, this can lead to competition between counties and allegations of a review based on receiving a gift. Free materials, such as area brochures, maps and restaurant information may be provided to SVT members. Also, limited incentive items with the local health department logo or name, such as pens, that are also given to the public may be given or available to SVT members. Light refreshments and beverages may be provided to the SVT for breaks. This is acceptable but is not required or asked of the agency.

Evaluation

The accreditation process includes on-going and extensive evaluation. Members of the Site Visit Team are expected to participate by responding to any surveys or interviews conducted by the project evaluator.

Personal Behavior

• Maintain a good working relationship with all members of the SVT.
• Maintain a professional and friendly, yet separate relationship with health department personnel.
• Use of a laptop, PDA, Blackberry for personal business during the site visit should be minimal. There will be time for checking personal email and voicemail during the course of the site visit. Staff in your home county should not contact SVT members for routine health department business, unless there is an emergency.
• Avoid giving health department staff members or community representatives an impression that a decision has been reached, offering specific solutions to problems or concerns, or implying personal criticism of any participants in the NCLHDA process.
• Alert the LSV if conflicts arise between a Site Visitor and any staff member of the health department or any interviewee.
• Listen with a critical ear, but speak with an impartial tongue.

Reimbursement for Site Visitor Expenses
NCLHDA will reimburse Site Visitors for travel-related expenses and meals at current State of North Carolina *per diem* rates. Meals provided at the lodging (i.e. breakfast) are not eligible for reimbursement. If a site visitor is not a NC State Employee, receipts must be submitted if meals are not to be taxed; if no receipt is submitted, meals will be treated as honorarium (the per diem will be reported on a 1099 as income). Requests for reimbursement must be submitted on the form that is provided by the SAC. Unless requested otherwise by a Site Visitor, the AA will make lodging reservations on behalf of all members of the SVT. In addition, each Site Visitor will receive an honorarium upon completion of his/her assignment. It is the responsibility of the SVT members to know their county’s policy regarding acceptance of honorarium and whether they must use annual leave to be away from their duties to conduct a site visit or accept an honorarium.

**Removal from the team**

It is possible that a SVT member may be replaced with an alternate if the member is consistently late for site visit activities, misses interviews, is unaccounted for, fails to abide by these guidelines, behaves inappropriately, engages in illegal or unethical behavior, or fails to complete assignments. The decision to remove a team member is made by the AA after consultation with the SAC and the LSV, if appropriate. Since this decision could affect the SVT recommendation, or could cause the Board to delay action, it is not taken lightly.

**Separation of Roles**

Remember, that as SVT members, you are there as assessors, not colleagues. Avoid socializing with health department staff and interview subjects. Contact with staff or your peers beyond what is needed to assess the agency should be minimized. Site visitors should be friendly, but maintain separation. Occasional work in social contexts (e.g., a working lunch) is appropriate, but should be minimized.

During scheduled assessment activities involving document and evidence review, the SVT should have minimal interaction with staff. Questions that arise should be addressed through the SAC. The AAC will then provide the additional documentation to the SAC. Individual SVT members should not leave the review to go ask questions of staff members without permission of the AAC. Contact with outside agencies (for example, other county or state agencies, DEH, DPH, OSP, etc.) by individual team members, other than those who are identified as interviewees, is not the responsibility of the SVT. SVT members who want further information should forward requests to the SAC. The need for such contacts will be discussed and contacts with outside agencies will be made by the AA.

The site visit is not the time to collect policies, protocols or examples for use in your own agency. While you certainly may gather ideas or begin to see how a process may work in your agency, wait until after the site visit report has been submitted before contacting a health department for examples or copies of policies or other materials.

**Training**

Training is required before an individual can serve as a site visitor and will be provided by staff of the NCLHDA Board and will include staff of DPH, nurse consultants, experienced site visitors and others as appropriate. Initial training can be conducted in a group setting or one-on-one if approved and scheduled through the AA. On-going training is conducted as needed.