

PHAB Accreditation Plan

Division of Public and Behavioral Health Department of Health and Human Services



4150 Technology Way, Carson City, NV 89706

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Prepared on behalf of DPBH by the Center for Public Health Excellence,
Trudy Larson, MD Institute for Health Impact and Equity,
University of Nevada, Reno



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Introduction

The Division of Public and Behavioral Health (DPBH) of Nevada’s Department of Health and Human Services (DHHS) is committed to achieving accreditation by the Public Health Accreditation Board (PHAB), a nonprofit organization that works “to promote and protect the health of the public by advancing the quality and performance of all public health departments in the United States through national public health department accreditation.” The Division funded the Center for Public Health Excellence (CPHE) at the Trudy Larson, MD Institute for Health Impact and Equity at the University of Nevada, Reno (UNR), to provide project management and quality assurance in pursuit of PHAB accreditation through June 2023.

In November 2021, DPBH began preparing to apply for PHAB accreditation, and as of January 2022, the following steps had been taken:

- Gained support from the DPBH leadership team to pursue accreditation;
- Appointed and funded an accreditation coordinator at the Center for Public Health Excellence, Larson Institute, UNR, to coordinate accreditation efforts;
- Established two positions to assist with the accreditation process—an accreditation project manager and an accreditation project analyst—with funding from the CDC Foundation;
- Evaluated DPBH’s status on the six prerequisite plans that must be in place, or nearly complete, prior to applying to PHAB. While DPBH has completed certain plans in the past and can build on existing efforts in developing others, all six prerequisites need to be completed again in order to comply with PHAB process, content, and time requirements.
 - **State health needs assessment**—previously conducted in 2015; must have been completed within 5 years to apply for accreditation
 - **State health improvement plan**—none
 - **Division strategic plan**—not completed in the recent past
 - **Organizational branding strategy**—no existing plan that meets PHAB requirement; build on DPBH’s Publications Standards developed in 2014
 - **Division workforce development plan**—none
 - **Public health emergency operations plan**—build on an existing plan specific to public health preparedness related to infectious disease
 - **Quality improvement plan/performance management system**—build on an existing plan that relates to mental health and existing performance assessments
- Developed a timeline and plan for pursuing PHAB accreditation.

Project Scope

The goals of this project are to:

- Pursue and accelerate the PHAB accreditation process;
- Ensure DPBH efficiently and effectively meets national public health practice standards; and
- Support a successful PHAB application for DPBH.

To achieve these goals and maximize organizational integration, it is essential that accreditation become an integral component of DPBH strategic initiatives.

Key Accreditation Activities

Key accreditation activities are organized and aligned to the first four of the seven steps of PHAB accreditation. See Appendix A for a detailed description of each step.

Phase 1: Preparation

- Complete PHAB’s [online orientation](#) (required for administrator of DPBH and recommended for broader DPBH leadership as well as the Accreditation Team; already completed by accreditation coordinator, project manager, and project analyst);
- Hold informational sessions/roll out the accreditation process, rationale, and responsibilities to all DPBH staff;
- Launch the Accreditation Team, Domain Workgroups, and Accreditation Champions;
- Have the Accreditation Team complete a self-assessment against PHAB’s Standards and Measures 2022, to identify DPBH’s strengths and gaps in relation to these requirements;
- Complete, conduct, or develop a:
 - State health needs assessment;
 - State health improvement plan;
 - Strategic plan for DPBH;
 - Organizational branding strategy for DPBH;
 - Division workforce development plan;
 - Public health emergency operations plan; and
 - Quality improvement plan/performance management system.
- Establish an internal electronic filing system to save required documentation (e.g., SharePoint or other means of managing accreditation documentation);
- Begin identifying and preparing documentation that meets PHAB Standards and Measures 2022;
- Re-evaluate accreditation timeline and revise project management plan; and
- Secure necessary funding for personnel to:
 - Continue accreditation efforts beyond June 2023; and
 - Pay PHAB application fees.

Phase 2: Registration and Application

- Register with PHAB to indicate formal intent to begin accreditation process;
- Submit PHAB application by June 2023—application must be submitted within 90 days of registration;
- Pay accreditation fee within 30 days of the acceptance of a completed application;
- Continue selecting and preparing documents to demonstrate conformity with PHAB Standards and Measures 2022; and
- Attend two-day PHAB training—required for the accreditation coordinator and available to one additional DPBH employee.

Phase 3: Documentation Selection and Submission

- Finish identifying and uploading documents in compliance with PHAB Standards and Measures. While document selection and preparation began in the “Preparation” stage, documentation must be finalized and submitted through the e-PHAB portal following application within 12 months of receiving access to the document submission portal.

Phase 4: Site Visit

- Prepare for and participate in the two-day site visit, during which PHAB-trained site visitors conduct a comprehensive review of DPBH through interviews, meetings with stakeholders, and visual observations, among other things; and
- Respond to Site Visit Report.

Project Management Approach

Pursuing PHAB accreditation requires the commitment of and contributions from the entire Division, including staff at all levels and with a wide variety of expertise. The Division intends to use PHAB accreditation as a means to achieve lasting, systemic changes; develop a culture of continuous quality improvement; and enhance performance management with the ultimate goal of better promoting and protecting the health of all Nevadans. While this is a Division-wide initiative, it will be led by the individuals and teams discussed below.

Accreditation Coordinator, Project Manager, and Project Analyst

The accreditation coordinator has overall authority and oversight of accreditation activities, as outlined in this plan. This position is currently located at the Center for Public Health Excellence (CPHE) and is funded through June 2023.

In addition, DPBH secured two positions through the CDC Foundation to provide staff resources to support the project through June 2023. These include the accreditation project manager and accreditation project analyst. The project manager is also located within CPHE, and is responsible for working with the accreditation coordinator to develop and execute activities to support the accreditation process, quality, and systems. The project analyst is located within DPBH, and assists with completing certain prerequisite plans and facilitating the document selection and preparation process.

The accreditation coordinator and project manager will work within existing resources to perform project planning, management, and implementation. They will maintain regular communication with DPBH leadership and provide frequent updates on progress toward accreditation.

DPBH Leadership Team

The DPBH Leadership Team helps guide the accreditation process by providing input on the accreditation plan, establishing realistic timeframes, and helping identify and assign responsibilities to DPBH staff, as necessary. It also contributes to the development of an internal communications plan to keep DPBH staff and appropriate community partners informed of progress toward accreditation.

Accreditation Team

The Accreditation Team is comprised of domain leads, who have advanced knowledge of DPBH policies and practices and serve as content experts within their assigned PHAB domain. The Team will play a critical role in conducting the Division’s initial self-assessment against the Standards and Measures 2022 to determine which requirements DPBH meets and which areas may require additional attention. In addition, these individuals lead domain workgroups to identify, select and/or develop, and prepare documentation that demonstrates compliance with the Standards and Measures within their assigned domain. The Team will meet regularly to discuss progress toward identifying, selecting, and preparing documentation; brainstorm solutions to challenges; and ensure progress continues. Meeting frequency will increase as the process progresses toward final documentation submission.

The Accreditation Team is facilitated by the accreditation coordinator and/or project manager, and will meet monthly beginning in early 2022—as soon as the final revised Standards and Measures 2022 are published.

Domain Workgroups

Ten Domain Workgroups—one for each PHAB domain—assess DPBH’s capacity to meet the PHAB Standards and Measures and identify, select and/or create, and prepare documentation to demonstrate compliance in their respective domain. Each Domain Workgroup will create and monitor a workplan to organize and track their responsibilities within accreditation timelines. Subject matter experts work across DPBH to locate, evaluate, and determine the appropriate documentation to support accreditation efforts. Each Workgroup is led by a domain lead (or leads), who are members of and provide progress updates to the Accreditation Team.

Accreditation Champions

The Accreditation Champions are the “cheerleaders” of accreditation within the Division. They include DPBH staff who advise and assist the accreditation coordinator and accreditation project analyst with educating and engaging DPBH staff in the accreditation process, importance, and rationale.

Roles and Responsibilities

Administrator of DPBH

- Complete PHAB orientation;
- Be knowledgeable about the steps and timeline to achieve DPBH accreditation;
- Interact with the Governor’s Office, State Board of Health, deputy directors, bureau chiefs, directors of local health authorities, and state level public health partners in support of DPBH’s accreditation process;
- Create a vision of a culture of quality within DPBH and help ensure staff understand the importance of PHAB accreditation; and
- Ensure essential personnel and financial resources are available to support accreditation efforts.

DPBH Leadership Team

- Complete PHAB orientation;
- Be well versed in the steps, timeline, and progress made to achieve accreditation for DPBH;
- Interact with the administrator, bureau chiefs, directors of local health authorities, accreditation coordinator, and state level public health partners in support of the DPBH’s accreditation process;
- Ensure DPBH staff are actively involved in the accreditation process, as needed; and

- Help spread awareness of DPBH accreditation efforts when interacting routinely with staff, community partners, and governance entities.

Accreditation Coordinator

- Lead and coordinate the overall accreditation process for DPBH;
- Serve as the contact between DPBH and PHAB throughout the accreditation process;
- Communicate regularly with DPBH leadership and provide regular reports on project status, successes, issues, and possible solutions;
- Lead the Accreditation Champions, and coordinate the development and implementation of an internal plan to educate and engage DPBH staff in the accreditation process;
- Provide final review for all PHAB documentation;
- Coordinate the completion and submission of required applications, documentation, and fees to PHAB;
- Complete PHAB orientation and related training regarding the accreditation requirements and process;
- Help spread awareness of and engage partner and community organizations in accreditation activities;
- Schedule, prepare for, and manage the PHAB Site Visit; and
- Coordinate the Division’s review of and response to the Site Visit Report.

Project Manager

- Project Management
 - Work with accreditation coordinator to develop and implement a project plan, including identifying milestones and deliverables;
 - Communicate regularly with accreditation coordinator and provide regular updates on project status, successes, issues, and possible solutions;
 - Coordinate and collaborate with the project analyst;
 - Co-facilitate and attend Accreditation Team meetings; and
 - Support the accreditation coordinator’s accreditation-related activities.
- Document Management
 - Identify, develop, and maintain an electronic document management system for proposed and selected documentation to meet PHAB Standards and Measures using DPBH’s available resources (e.g., SharePoint or similar system); and
 - Generate routine progress reports, logs, and communications to update the accreditation coordinator and the DPBH Leadership Team.
- PHAB Prerequisites
 - Work with accreditation coordinator to research, develop, and help implement project management plans to complete PHAB prerequisites;
 - Ensure prerequisite plans comply with PHAB Standards and Measures 2022; and
 - Document all accreditation preparation activities to ensure compliance with PHAB requirements.
- Document Selection and Preparation
 - Work with the Accreditation Team and project analyst to conduct DPBH’s self-assessment;
 - Support and facilitate Accreditation Team activities to:
 - Facilitate creation of documentation where it does not exist or does not meet requirements;
 - Resolve questions or concerns regarding documentation; and
 - Maintain information regarding the status of Domain Workgroups’ work plans; and

- Review and provide feedback regarding proposed documentation to ensure compliance with PHAB Standards and Measures.

Project Analyst

- Accreditation Champions
 - Assist with the development and implementation of an internal plan to educate and engage DPBH staff in the accreditation process;
 - Support the Accreditation Champions; and
 - Help spread awareness of DPBH accreditation efforts among DPBH staff.
- PHAB Prerequisites
 - Assist with development and completion of prerequisite plans;
 - Ensure prerequisite activities comply with general PHAB requirements (e.g., branded/includes logo, date, etc.); and
 - Save and archive process documentation that may be useful in applying for accreditation.
- Document Selection and Preparation
 - Support the Accreditation Team on DPBH's self-assessment and document selection process;
 - Work closely with DPBH staff to identify appropriate subject matter experts and support their efforts to develop documentation, processes, or policies where they do not exist or do not meet PHAB requirements.

Domain Leads

- Complete PHAB orientation;
- Serve as an active member of the Accreditation Team;
- Develop in-depth knowledge of the Standards and Measures within in the assigned domain, including the number of examples/documentation needed and PHAB requirements, and serve as a subject matter expert throughout the accreditation process;
- Establish and convene the assigned Domain Workgroup:
 - Enlist Workgroup members (subject matter experts who can identify, access, and scrutinize documentation to meet PHAB guidance for each measure; they should have deep knowledge of content within the domain, as well as knowledge of DPBH's work within the content area);
 - Identify and engage additional program staff to assist with documentation identification and collection, if needed;
- Develop, facilitate, and monitor a work plan for the Workgroup; direct Workgroup activities; and periodically report on progress;
- Generate and maintain Workgroup meeting agendas, sign-in sheets, and minutes following standard format and post them in the appropriate location; and
- Lead Workgroup efforts to identify, select, and/or develop appropriate documentation for the domain; establish and implement a strategy to create and submit the best potential documentation for review;
 - Analyze quality and suitability of documentation;
 - Identify gaps in documentation and assign Domain Workgroup members to address gaps. If a task is needed from another Workgroup, contact the appropriate domain lead so they can assign the task(s) for completion; and
 - Approve documentation for review.
- Meet timeline for documentation collection and submission;

- Identify opportunities for improvement within the respective domain and participate in quality improvement initiatives to address them, when applicable;
- Help spread awareness of DPBH accreditation efforts; and
- Participate in evaluation of accreditation preparation process.

Domain Workgroup Members (One Workgroup for each Domain)

- Develop in-depth knowledge of Standards and Measures, documentation guidance, and requirements within the assigned domain;
- Participate in the development of the Domain Workgroup work plan;
- Work with domain lead(s) to identify and access appropriate documentation for each measure within the domain; assess the documentation’s applicability, completeness, and ability to meet guidance;
- Assist in preparing required documentation elements for e-PHAB (e.g. PHAB coversheet);
- Identify gaps in documentation, notify domain lead(s), and help develop required documentation, as necessary;
- Participate in quality improvement initiatives to address opportunities for improvement within the assigned domain;
- Help spread awareness of DPBH accreditation efforts; and
- Participate in evaluation of accreditation preparation process.

Accreditation Champions

- Be familiar with the PHAB accreditation process;
- Help the accreditation coordinator and project analyst develop and implement DPBH’s internal plan to educate and engage staff in the accreditation process; and
- Assist the accreditation coordinator in engaging partner organizations and community partners in the accreditation process.

PHAB Implementation Timeline	Year, Month																	
	2022												2023					
	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6
Phase 1: Preparation																		
▪ Complete PHAB’s online orientation																		
▪ Roll out the accreditation process to DPBH staff																		
▪ Launch the Accreditation Team, Domain Workgroups, and Accreditation Champions																		
▪ Accreditation Team completes a self-assessment																		
▪ Establish electronic filing system for PHAB docs																		
▪ Develop communications and branding strategy plan																		
▪ Complete state health needs assessment																		
▪ Complete state health improvement plan																		
▪ Develop strategic plan for DPBH																		
▪ Develop DPBH workforce development plan																		
▪ Create quality improvement plan																		
▪ Update public health emergency operations plan																		
▪ Begin preparing PHAB documentation																		
▪ Re-evaluate timeline, revise project plan																		
▪ Secure additional funding for PHAB process, fees																		
Phase 2: Registration and Application																		
▪ Register with PHAB																		
▪ Submit PHAB application																		
Post June 30, 2023—Tentative Timeline	2023						2024											
	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
▪ Pay accreditation fee (30 days after submitting app)																		
▪ Attend two-day PHAB training																		
Phase 3: Documentation Selection and Submission																		
▪ Finish identifying and uploading documentation																		
Phase 4: Site Visit																		
▪ Prepare for and participate in the two-day site visit																		
▪ Respond to Site Visit Report																		

Appendix A: Seven Steps of Public Health Department Accreditation

1) **Pre-application: Health department prepares and assesses readiness for application for accreditation, completes [Online Orientation](#), and informs PHAB of its intent to apply.**

Health departments should assess their readiness to pursue accreditation by reviewing the standards, measures, and required documentation to determine areas of strength and opportunities for improvement. Health departments should appoint a staff person to be their Accreditation Coordinator and establish a department accreditation team to help prepare for the accreditation process.

PHAB has developed Accreditation Readiness Checklists to help health departments determine if they are ready to begin the application process. The Checklists address eligibility, completion of prerequisites, internal processes, and initial preparation tasks.

Completion of the PHAB Online Orientation is required for the health department director and the health department's Accreditation Coordinator before the health department submits a registration. Health departments are encouraged to have several staff members participate in the Orientation, especially those in leadership positions, members of the governing entity, and members of the department's accreditation team.

The health department must submit a registration to inform PHAB of the department's intention to apply for public health department accreditation. The registration is non-binding and does not commit a health department to apply. To submit a registration form, the health department must register on e-PHAB.

2) **Application: Health department submits application and fee, and completes applicant training.**

The application is formal notification to PHAB of a health department's official commitment to initiate the public health department accreditation process. The application is an agreement that the applicant will abide by the current and future rules of PHAB's accreditation process to achieve and maintain accreditation status for the five-year accreditation period.

Upon receipt of an application, PHAB will invoice the health department. The PHAB-determined application fee must be submitted to PHAB before the Accreditation Coordinator can attend training.

Accreditation Coordinators are required to participate in PHAB training before the health department can begin to submit documentation of conformity with the PHAB standards and measures. This in-person training, scheduled quarterly, will last two days and will be provided to groups of applicants.

3) **Document Selection and Submission: Applicant selects documentation for each measure, uploads it to e-PHAB, and submits it to PHAB**

The process of identifying and uploading documents that demonstrate the health department's conformity with the standards and measures is one of the most important components of the accreditation process. The documentation submitted by the health department is what the site visit team will review and use to determine the health department's conformity with the standards and measures.

The e-PHAB system, which accommodates multiple users, allows the health department to work on various parts of documentation submission over a period of time. Applicants must submit their documentation to PHAB within 12 months of the date that PHAB provides access to the module of the electronic system for submission of documentation.

4) Site Visit: Site visit of the health department is conducted by PHAB-trained site visitors and a site visit report is developed

Site visits will be conducted by a peer team of three to four PHAB-trained site visitors. The visit serves several purposes: verify the accuracy of documentation submitted by the health department, seek answers to questions regarding conformity with the standards and measures, and provide opportunity for discussion and further explanation. Site visits will typically last two to three days, depending upon the complexity of the application.

Following the site visit, the site visit team will develop a site visit report. The report will describe:

- How conformity with each measure was demonstrated, or detail what was missing;
- Areas of excellence or unique promising practices, and
- Opportunities for improvement.

5) Accreditation Decision: PHAB Accreditation Committee will review the site visit report and determine accreditation status of the health department

The Accreditation Committee, appointed by the PHAB Board of Directors, will review and determine the accreditation status of applicant health departments. There are two accreditation status decision categories: “Accredited” (5 years) or “Not Accredited.” The Accreditation Committee will make accreditation decisions based on the site visit report, including the site visit team’s scores and descriptive information. If the health department is not accredited, they will have an opportunity to submit an Action Plan. If the Action Plan is approved by the Accreditation Committee, is implemented by the health department, and site visitors positively assess the documentation of implementation, then the health department could be accredited at that time. Failure to submit an Action Plan or to implement the approved Action Plan will result in the health department being determined “Not Accredited.”

6) Reports: If accredited, the health department submits annual reports

The submission of annual reports is required of all accredited health departments. Annual reports describe how the health department has addressed areas identified by the Accreditation Committee as priority areas for improvement. Reports will also state that the health department continues to be in conformity with all the standards and measures of the version under which accreditation was received.

7) Reaccreditation: As accreditation status nears expiration, the health department applies for reaccreditation.

Each accredited health department will be required to submit a new application in the reaccreditation process and may be required to receive additional training. A health department applying for reaccreditation must participate in the entire accreditation process, including submission of an application and the site visit. For information on reaccreditation standards and measures and the process, refer to the Guide to National Public Health Department Reaccreditation: Process and Requirements.