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# Accreditation: Strategies for Smaller Health Departments

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# Disclaimer

The speakers have no financial interests or relationships to disclose.

# Outline

- Process and timeline for applying for PHAB Accreditation
- Pathways program vs. full Accreditation
- Overcoming challenges and lessons learned
- Q&A

# Objectives

- Provide examples of overcoming challenges that small health departments face in achieving Accreditation
- Discuss strategies for a planful, measured approach to initiating and maintaining systems required by PHAB
- Share strategies to ensure documentation meets PHAB requirements

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# Needham's Accreditation Process

# Context

- Population of Needham vs. other accredited departments, per US Census Bureau:

  - **Cambridge** Public Health Department (123,000)
  - **Boston** Public Health Commission (674,000)
  - **Massachusetts** Department of Public Health (7+ mil)
  - **Worcester** Division of Public Health (214,000)
  - **Needham** Public Health Division (33,000)

# Initial approach

- Attempt to shield staff from burdensome work
- Limited progress made on meeting documentation requirements in most challenging areas:
  - Environmental health work
  - Surveillance
  - Performance management
  - Quality improvement
  - Community Health Assessment
  - Community Health Improvement Plan
  - Program evaluation
- Considered Pathways but determined the department had the resources and will (from Board of Health and Town leadership) to pursue full Accreditation

# Pathways vs. Accreditation

- Pathways recognition can facilitate Accreditation readiness for small health departments and can be seen as a step toward Accreditation

- Pathways is designed to:
  - support performance improvement efforts
  - strengthen infrastructure
  - facilitate public health system transformation

- Pathways allows a department to make progress towards Accreditation by demonstrating achievement of foundational capabilities

- Measures assessed through Pathways can be carried forward and counted towards initial Accreditation

# Timeline of PHAB submission

- **Initial attempt began in September 2016**
- **Serious work started - 2021**
  - Team hired - early 2022
  - Readiness assessment submitted - September 2023
  - Readiness review and recommendation (PHAB) - October 2023
  - Application *and supporting documentation* submitted - November 2023
  - Documents submitted - December 2024
  - Feedback received - May 2025
  - Resubmission due - July 2025
  - First site visit (virtual) - Nov 25, 2025
  - Second site visit (in-person) - Dec 2, 2025
  - Resubmission deadline - Dec 4, 2025
  - **News we are accredited! - Feb 12, 2026**



# What does it take to apply for Accreditation?

- Buy-in on **all** levels
- Realistic assessment of available resources
  - Human resources
  - Financial resources
  - Training
- Consultants when possible and appropriate
- Internal deadlines for documents
- Enough time to modify or find alternate documents
- Patience and persistence



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# Overcoming challenges

# Challenge: Documentation review

- **Challenge:** So much! So many!
  - Set clear deadlines and expectations for staff
    - Allow for review by Accreditation coordinator and back and forth to meet measure

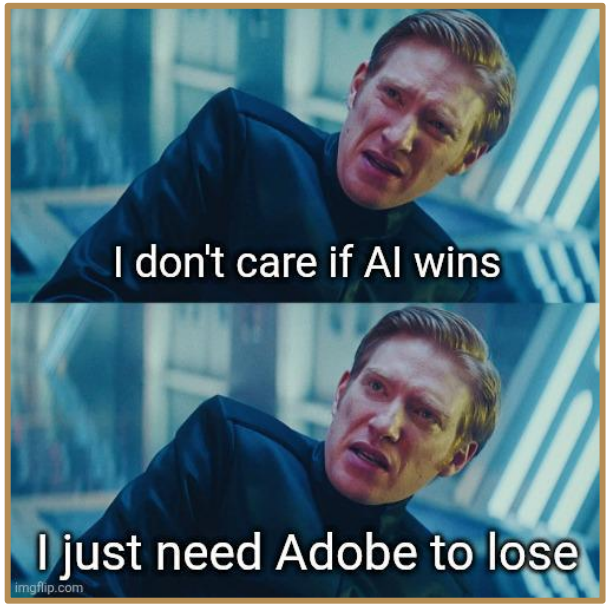
- **Lessons learned:**
  - Don't reinvent the wheel. Lean on partners!
    - Thank you to Cambridge Public Health and MA Department of Public Health for providing us with documentation examples
  - Be literal and explicit. Use PHAB's language where you can
  - You have the opportunity to re-submit! Think about your weak points and prepare
  - Compile documentation as you go

# Challenge: Technical issues with documentation









# Challenge: Technical issues with documentation

- **Challenge:**
  - Adobe Acrobat needed to mark up documents
    - Workload of markup and page numbering
  - Needed to develop and agree on a system for tracking document submission and markup
    - OneDrive, remote access to shared drive, Excel tracking document, Google Drive
  - Documents submitted to accreditation coordinator via email = lots of emails
- **Lessons learned:**
  - Be willing to change your approach if it's not working
  - Learn from successful departments

# Challenge: Staff time and participation




- **Challenge:** staff already have huge workloads
  - Need staff buy-in and leadership support

- **Lessons learned:**
  - Create Accreditation Steering Committee
  - Assign ownership for measures
  - Spread work over time with deadlines
  - Use your staff creatively
  - Identify benefits of documentation and new processes
  - Make Accreditation part of workplace culture

# Challenge: Data collection & tracking systems

- **Challenge:** Existing data collection and tracking may be inadequate
  - Needed to develop or modify data collection tools.
    - Inspection tracking
    - Customer satisfaction feedback

- **Lessons learned:**
  - Look at these systems early!
  - Work with staff, especially Environmental Health, to identify data PHAB requires.



# Challenge: Performance Management

- **Challenge:** Creating and maintaining a performance management system that met PHAB requirements *and* was easy for staff to use
  - Measures were not consistently SMART (specific, measurable, achievable, relevant, timebound)
  - Confusing terminology (objective vs indicator vs activity)
  - Inconsistent understanding of purpose of tracking indicators

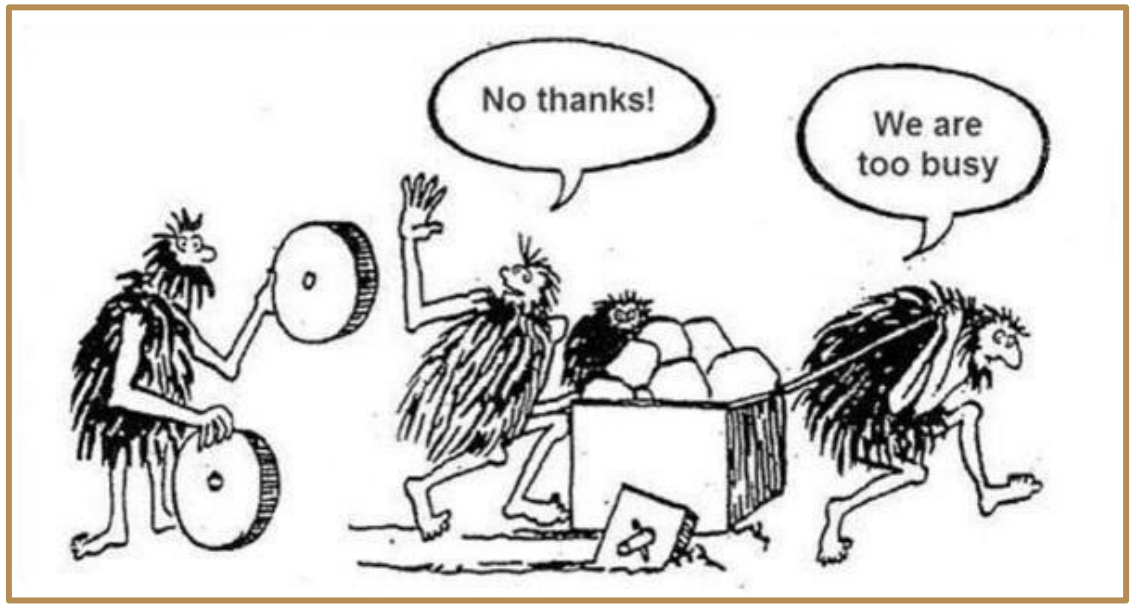



- **Lessons learned:**
  - Don’t be afraid to rip it up and start all over again
  - Remind staff how their work links to strategic plan and CHIP
  - Make responsibilities clear

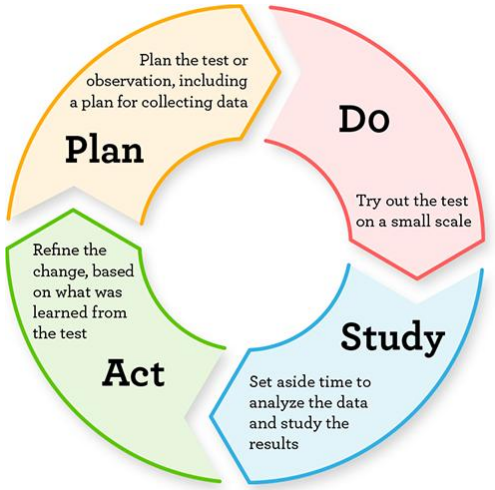
# Challenge: Quality Improvement

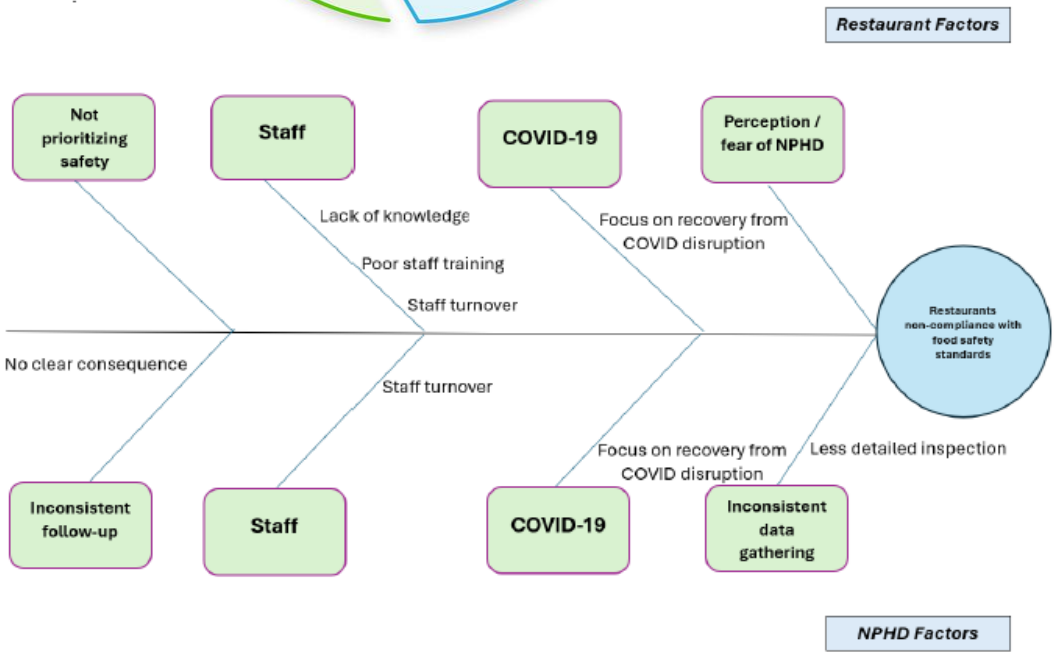
- **Challenge:** Transforming our improvement approach to Continuous Quality Improvement
  - How to decide on QI projects
  - Lack of comfort with QI tools
  - Our tools were not sufficient; we weren't documenting enough throughout
  - Maintaining the system

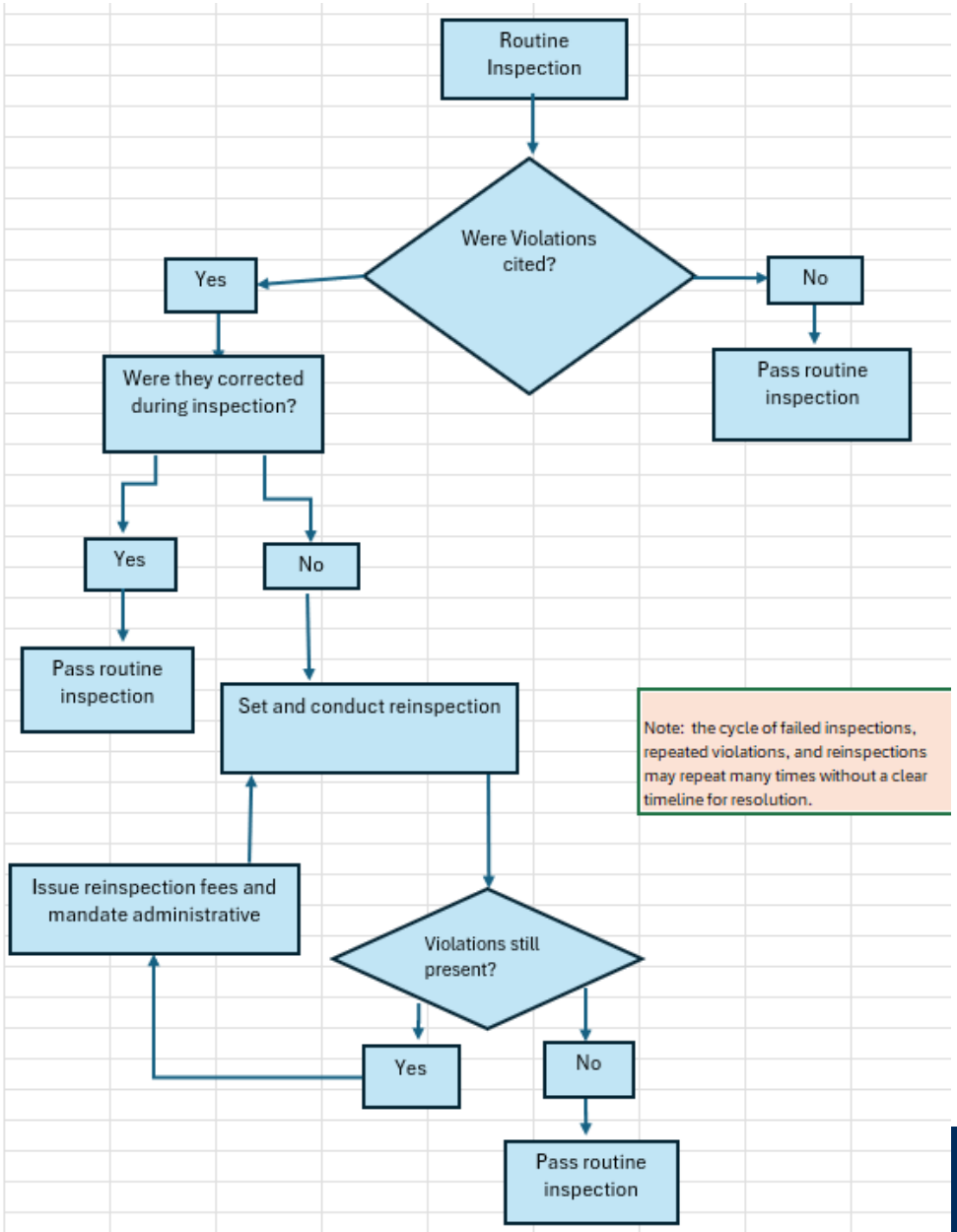
- **Lessons learned:**
  - Accreditation Steering Committee = QI Committee
  - Provide trainings tailored to staff needs



# Examples: Quality Improvement tools



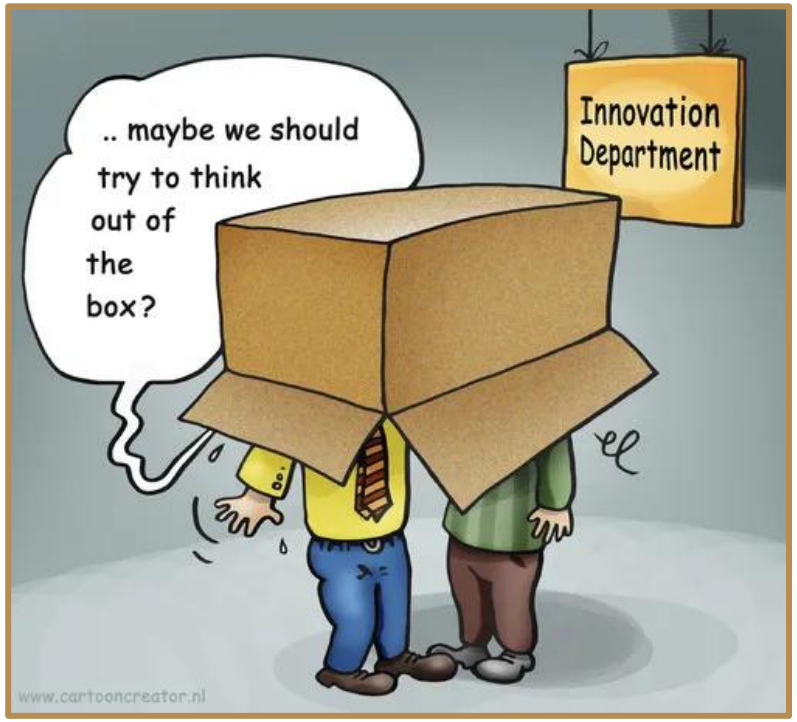



# Challenge: New ways of thinking!

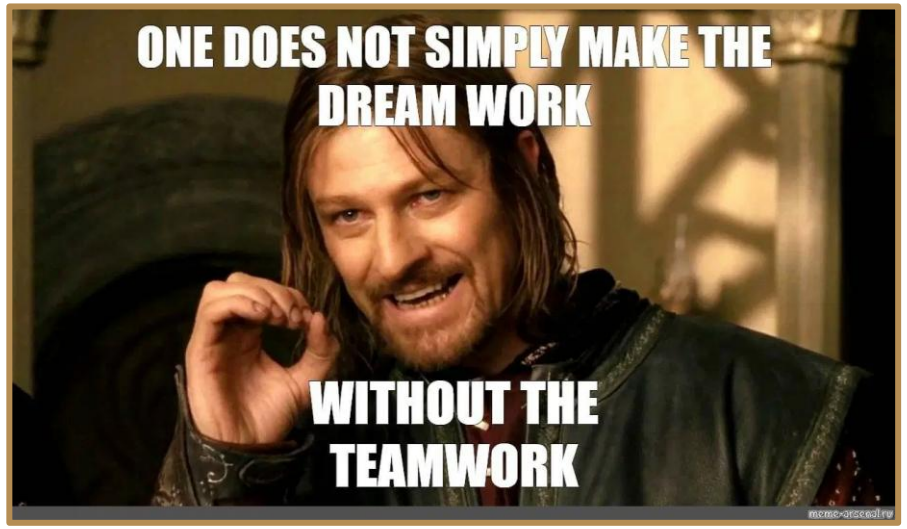
- **Challenge:  So many new concepts!**
  - New ways of tracking work, improvement, performance, customer feedback
  - New emphasis on innovation, ethical considerations, improvement

- **Lessons learned:**
  - Acknowledge the change and the newness
  - Make specific space for new things
    - Monthly staff meetings include “out-of-the-box” thinking
  - Be honest with PHAB; give feedback after process



# Highlights of the Accreditation Process

- Strengthened our team identity
- Systems created during the process have improved our work
- Creating policies and standard operating procedures helps accountability and continuity
- Elevated the department's level of proficiency and professionalism.






# Lessons for small health departments

**Overall lessons:**

- Plan for the work to take at least several years.  Stagger internal deadlines to avoid a crazed rush at the end.
- Be realistic.  Our self-imposed time frame caused us to rush through some of the foundational work that we are now revisiting.
- Give the Environmental Health team at least 2 years to modify their data collection tools to meet PHAB requirements.
- PHAB requires several deliberative bodies - use the Steering Committee for multiple purposes.
- Know your limitations - use consultants; consult with successful departments.
- Explicitly use PHAB language when marking documents and filling out PHAB forms.
- There will be opportunities to correct and resubmit (after submitting documents & immediately after site visit)

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# Questions? Thank you!

## Please contact us with questions, help with documentation, (and for cheerleading!)

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