

# Introduction to Public Health Accreditation

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# What is PHAB?

- Non-Profit Organization
- Chartered in 2007
- Launched in 2011
- Administers Public Health Accreditation



# PHAB

- Funds
- Governance
- [www.phaboard.org](http://www.phaboard.org)
- 703-778-4549



# What is Public Health Accreditation?

- Measurement of Tribal, state and local health department performance based on a set of national standards
- Issuance of recognition of achievement by a nationally recognized entity
- Supports continuous quality improvement in public health performance



# What is Public Health Accreditation?

- “The measurement of health department performance against a set of nationally recognized, practice-focused and evidenced-based standards.
- The issuance of recognition of achievement of accreditation within a specified time frame by a nationally recognized entity.
- The continual development, revision, and distribution of public health standards.”
  - <http://www.phaboard.org/accreditation-overview/what-is-accreditation>



# Public Health vs. Healthcare Accreditation





- Focus is on **population health**
- What “we as a society do collectively to assure the conditions in which people can be healthy” (Institute of Medicine, 1988).



- Focus is on **individual health**
- The maintenance and improvement of physical and mental health, especially through the provision of medical services.



# Eligibility

## Tribal Health Department

- A Tribal health department is defined, for the purposes of PHAB accreditation, as a federally recognized Tribal government [1], Tribal organization, or inter-Tribal consortium, as defined in the Indian Self-Determination and Education Assistance Act, as amended. Such departments have jurisdictional authority to provide public health services, as evidenced by constitution, resolution, ordinance, executive order, or other legal means, intended to promote and protect the Tribe's overall health, wellness and safety; prevent disease; and respond to issues and events. Federally recognized Tribal governments may carry out the above public health functions in a cooperative manner through formal agreement, formal partnership, or formal collaboration.
- As evidenced by inclusion on the list of recognized Tribes mandated under 25 U.S.C. § 479a-1. Publication of List of Recognized Tribes.



# Eligibility

## Multi-jurisdictional

- Entities that meet the PHAB definition of a Tribal or local health department may apply jointly for PHAB accreditation if some essential services are provided by formally sharing resources and the sharing of resources can be clearly demonstrated. The relationship must be that of the health departments working together to deliver services and/or perform functions over the combined jurisdiction. For multi-jurisdictional applications, the partnering health departments, which could be two or more health departments, will apply as a single entity. The business and working relationship of multi-jurisdictional applicants must be well-established and well-defined. Multi-jurisdictional applications must demonstrate a high degree of interdependence to be considered a legitimate application.





# The Value of PHAB Accreditation

Strengthening Health Departments to Better Serve their Communities

## Quality Improvement

"We are no longer a good health department, but rather a great health department that now embraces the concept of continuous performance improvement in the 21st century." *Weld County Department of Public Health and Environment, Greeley, Colorado*



## Partnerships

"We are incredibly proud of all of our partnerships, but especially our multi-sector health improvement partnership, which continues in force today, bringing change to the community. This has increased our accountability to each other, created truly collaborative programming, and played a role that increased funding to our stakeholders." *Cerro Gordo County Department of Public Health, Mason City, Iowa*



## Accountability

"Austin Public Health is now a more accountable organization while striving to uphold the rigor and excellence that public health accreditation signifies." *Austin Public Health, Austin, Texas*



## Workforce

"The accreditation process has refined our focus and created a teamwork approach to every policy, program, and service we provide, both internally and externally." *Public Health-Idaho North Central District, Lewiston, Idaho*



## Resources

"Since becoming accredited we have applied for and have been a recipient of more grants than before and are better equipped to more efficiently and effectively utilize those funds to benefit stakeholders." *Township of Bloomfield Department of Health & Human Services, Bloomfield, New Jersey*



## Community Health/Equity

"Accreditation has empowered our department to activate and elevate health equity so that it's embedded throughout our public health practices. It has enabled us to make health equity synonymous with public health, not something seen as separate from, or in addition to, the 10 essential public health services. It is now in the fabric of everything we do." *County of San Diego Health and Human Services Agency, San Diego, California*



For more information about the Public Health Accreditation Board and the value of PHAB accreditation,

please visit <https://www.phaboard.org/why-become-accredited>

[www.phaboard.org](https://www.phaboard.org)



# The Value of PHAB Accreditation

Strengthening Health Departments to Better Serve their Communities



## Quality Improvement

The percentage of health departments who said that accreditation has stimulated QI and performance improvement opportunities\*



## Partnerships

The percentage of health departments who said that since becoming accredited, their health department has strengthened their relationship with key partners in other sectors\*



## Accountability

The percentage of health departments who said that accreditation has improved the health department's accountability to external stakeholders\*



## Workforce

The percentage of health departments who said that accreditation has improved their health department's ability to identify and address gaps in employee training and workforce development\*



## Resources

The percentage of health departments who said that since becoming accredited, the utilization of resources within their health department has improved\*



## Community Health/Equity

The percentage of health departments who said health department activities implemented as a result of being accredited have led to improved health outcomes in the community\*



\*All data cited above are from a NORC evaluation survey of health departments one year or four years after they were accredited, as of March 2019.

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National Indian Health Board



## BENEFITS OF PUBLIC HEALTH ACCREDITATION FOR TRIBAL NATIONS



Accreditation through the Public Health Accreditation Board (PHAB) recognizes health departments that meet "a set of nationally recognized, practice-focused and evidenced-based standards" in their public health services.

For Tribal health departments, the process of working to meet national accreditation standards has been described as an exercise in Tribal sovereignty and promotes a high standard of public health practice across Tribal nations. PHA empowers Tribes in their inherent right to protect and promote the health of their citizens.

### Benefits of Accreditation Identified by Tribal Organizations

- Improved Credibility
- Improved State and Local Relations
- Increased Staff Pride and Assurances
- Exercise in Tribal Sovereignty
- Quality Improvement of Services
- Improved Health of the Community

For the Tribal Health Departments who worked with the National Indian Health Board (NIHB) on accreditation-related efforts:

- 95% of Tribes made progress towards meeting the PHAB Standards and Measures, by building capacity and improving health department performance.
- 79% of Tribes increased their resources related to public health improvement, including funding, staffing, and building partnerships.
- 68% of Tribes have seen increased leadership support for their public health improvement efforts by making progress on PHA efforts.\*

*"With accreditation, we are telling the community that... we are meeting the public health needs... as effectively as possible."*

*-Forest County Potawatomi Community*

For more information, visit [www.nihb.org/TribalASI](http://www.nihb.org/TribalASI)



\* Based on NIHB's Accreditation Readiness Model Evaluation Results

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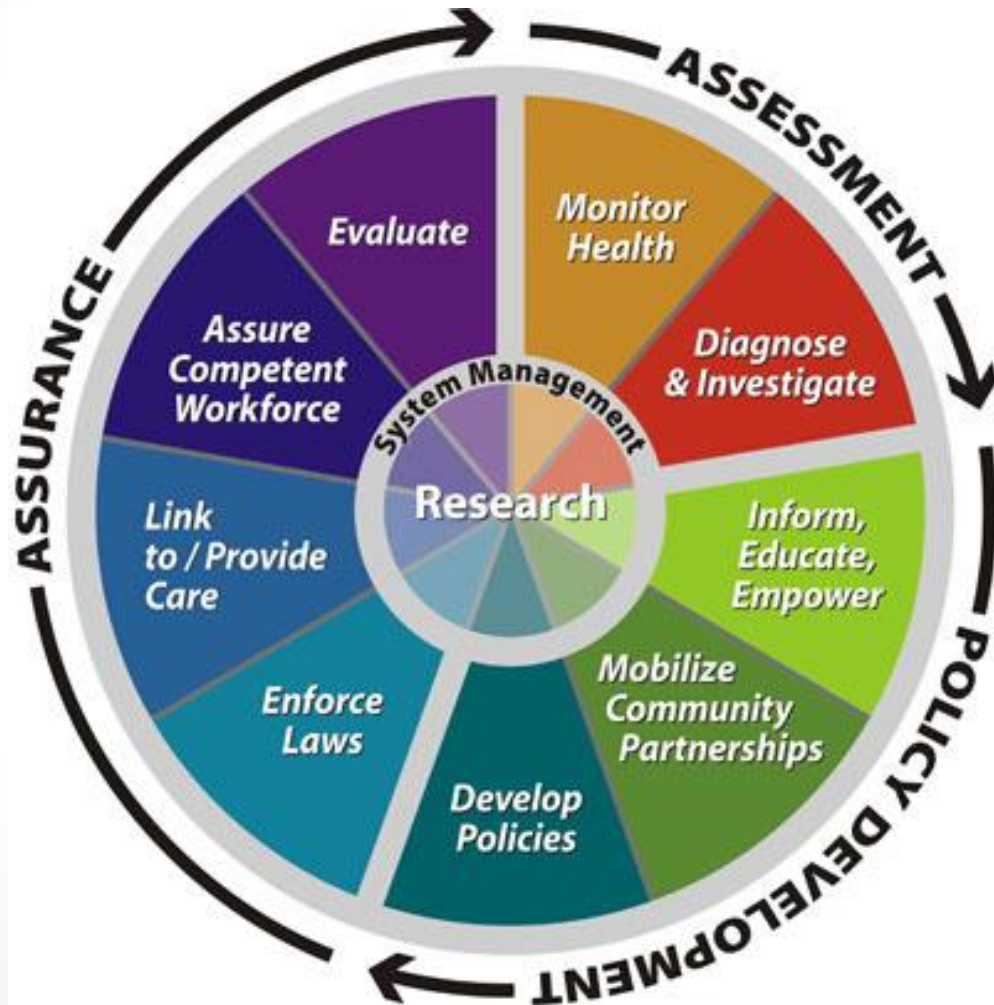


# Tribal Leaders' Perspectives on Public Health Accreditation



[Tribal Leader Video](#)

# 10 Essential Services of Public Health



12 PHAB Domains of PH Accreditation align with 10ES model



# Twelve Domains of Standards

**Domain 1:** Conduct assessments focused on population health status and health issues facing the community

**Domain 2:** Investigate health problems and environmental public health hazards to protect the community

**Domain 3:** Inform and educate about public health issues and functions

**Domain 4:** Engage with the community to identify and solve health problems

**Domain 5:** Develop public health policies and plans

**Domain 6:** Enforce public health laws and regulations

**Domain 7:** Promote strategies to improve access to healthcare services

**Domain 8:** Maintain a competent public health workforce

**Domain 9:** Evaluate and continuously improve processes, programs, and interventions

**Domain 10:** Contribute to and apply the evidence base of public health

**Domain 11:** Maintain administrative and management capacity

**Domain 12:** Build a strong and effective relationship with governing entity



# National Standards

- PHAB S&M are a useful tool for promoting the highest quality public health services for you Tribe.
- REGARDLESS of whether you will be applying for accreditation, we can use the S&M to assess programs and policies.



# The Big 7 Plans/Processes

- Community Health Assessment
  - Community Health Improvement Plan
  - Health Department Strategic Plan
  - Emergency Operations Plan
  - Quality Improvement Plan
  - Performance Management System
  - Workforce Development Plan
- ~ Branding Strategy



# Tribal Health Assessment

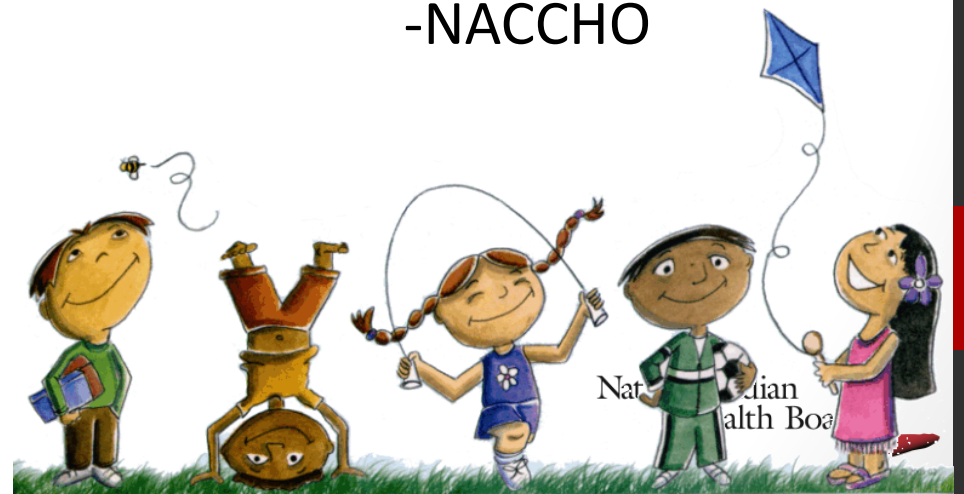
- Often the first step towards accreditation, and a foundation for assessing public health strengths and needs in the community
- A comprehensive assessment of the health of the community



# Community/Tribal Health Assessment

- “A community health assessment is a process that uses quantitative and qualitative methods to systematically collect and analyze data to understand health within a specific community.”

-NACCHO



# Tribal Health Improvement Plan

- Prioritizing health issues you will tackle
- Based on THA, what is your long term (3-5 year) plan



# Health Department Strategic Plan

- “... a disciplined process aimed at producing fundamental decisions and actions that will shape and guide what an organization is, what it does, and why it does what it does.”

PHAB



# Seven Steps

## 1. Pre-application

Applicant prepares and assesses readiness, informs PHAB of its intent to apply (SOI)

## 2. Application

Applicant submits application and pre-requisites and receives training

## 3. Documentation Selection and Submission

Applicant gathers and submits documentation

## 4. Site Visit

Documentation review, site visit and site visit report

## 5. Accreditation Decisions

PHAB Accreditation Committee determines accreditation status:  
Accredited (5 years)  
or Not Accredited

## 6. Reports

Annual progress reports

## 7. Reaccreditation



# NIHB's Role in PH Accreditation

- Involved since 2005, Steering committee to Explore Public Health Accreditation
- Developed an Exploring Tribal Public Health Accreditation Strategic Plan (2009)
- Tribal Public Health Profile report (2010, 2019)
- National “Tribal Call for Input” (2009)
- Facilitates TPHAAB (2008-present)
  - Supplemental Process and Documentation Guidance for Tribal Public Health Departments
- Tribal ASI (2015-2018)
- SSSC (2018-present)



# Accredited Tribes

- Cherokee Nation (2016)
- Oneida Nation (2018)
- Forest County Potawatomi Community (2019)

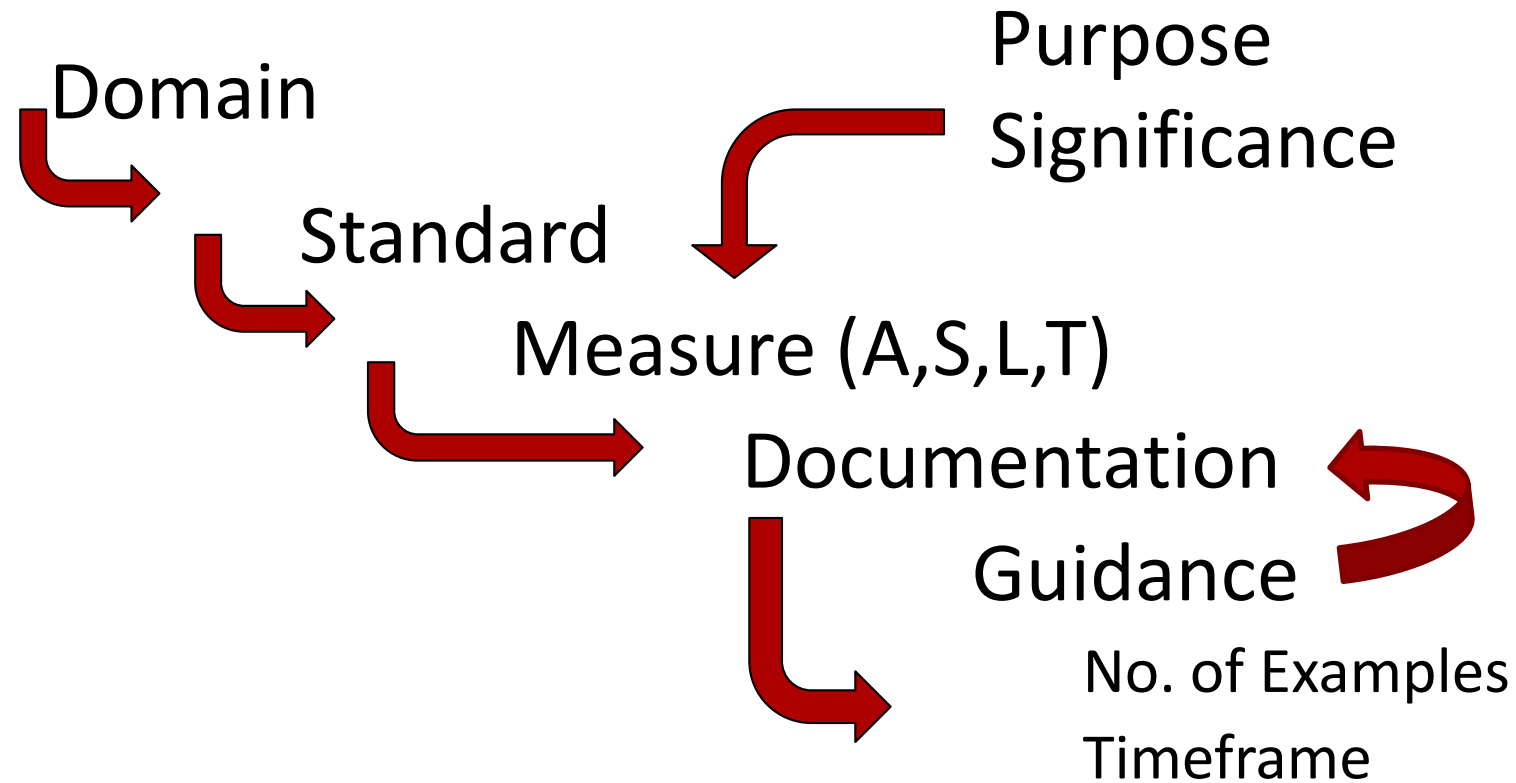


National Indian  
Health Board



# Reading the Standards and Measures

# Structural Framework of the Standards & Measures



# Measures for:

- All health departments - “A”
- Tribal health departments are “T”
- State health departments are “S”
- Local health departments are “L”



## STANDARD 1.1: Participate in or lead a collaborative process resulting in a comprehensive community health assessment.

MEASURE	PURPOSE	SIGNIFICANCE
<p><b>Measure 1.1.1 S</b></p> <p>A state partnership that develops a comprehensive state community health assessment of the population of the state</p>	<p>The purpose of this measure is to assess the state health department's collaborative process for sharing and analyzing data and information concerning state health, state health challenges, and state resources to develop a state level community health assessment.</p>	<p>The development of a state community health assessment requires partnerships with other organizations in order to access data, provide various perspectives in the analysis of data and determination of contributing factors that impact health outcomes, present data and findings, and share a commitment for using the assessment. Assets and resources in the state must be addressed in the assessment, as well as health challenges. Data are not limited to traditional public health data but may include information, for example, quality of life, attitudes about health behavior, socioeconomic factors, environmental factors (including the built environment), and social determinants of health. Data are provided from a variety of sources and through various methods of data collection.</p>

REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Participation of representatives from a variety of state sectors</b></p>	<p><b>1. The state health department must document that the process for the development of a state level community health assessment includes participation of partners outside of the health department that represent state populations and state health challenges.</b></p> <p>The collaboration must include various sectors of the state, as appropriate for the state: for example, state government (for example, community development, education, aging, etc.), for-profits (for example, businesses, industries, and major employers in the state), statewide not-for -profits (for example, hospital association, Kids Count, Childhood and Women's Death Review organizations, Cancer Society, public health institutes, environmental public health groups, groups that represent minority health, etc.), voluntary organizations, health care representatives (for example, hospital associations or primary care associations), academia, military installations in the state, and representatives of local or regional health departments in the state and of Tribal health departments in the state.</p>	<p><b>1</b></p>	<p><b>5 years</b></p> <p>Documentation must include the month and year.</p>



# Practice Questions

# Measure 1.2.3 A (pg 35)

- **Questions:**

1. What is this measuring?
2. Why is it important that a health department collect primary data?
3. Would the results of an elder survey on healthy eating satisfy the documentation for this measure?
4. Would a teen focus group on alcohol satisfy the documentation for this measure?



# Measure 2.4.2 A (pg 88)

- **Questions:**

1. Why is it important to have policies and procedures for urgent communication?
2. Who would the Tribal HD or agency want to communicate with during public health alerts?
3. How can health departments show that they maintain this communication system?



# Measure 5.2.4 A (pg 143)

- **Questions:**

1. Why would we to revise CHIP or THIP strategies?  
What are some situations during which they would need revision?
2. How can we evaluate strategies to insure plans remain relevant?
3. Who should be involved in the process of revising strategies?



# Measure 6.1.2 A (pg 162)

- **Questions:**

1. According to this measure, what should the HD be doing?
2. Why is doing this important?
3. What are some examples of laws that impact public health?



# Measure 7.13 A (pg 182)

- **Questions:**

1. What is this measure assessing?
2. True or False: The report to submit for documentation must include results of data that were collected by the health department?





# Public Health Accreditation Board

Supplemental Process and  
Documentation Guidance for  
Tribal Public Health Department  
Accreditation

Approved February 2018



# Purpose and Use of the Document

- The document was developed to be used with the *PHAB Standards and Measures, Version 1.5* in order to provide some Tribal specific guidance related to the documentation and process requirements.
- PHAB recommends that the user of this document put it side-by-side with the standards and measures so as to appropriately apply the supplemental guidance.
- This webinar does not attempt to re-state the language in the document. It is a guide to use the document. Tribal health departments should refer to the specific language in the document and not these slides when working on their documentation.



## How Was The Document Developed?

- The document was developed in partnership with the Tribal Public Health Accreditation Advisory Board, part of the National Indian Health Board.
- It was reviewed by the PHAB Board of Directors.
- It was placed for public comment on PHAB's website for approximately three months.



# Overarching Comments for the Document

- The original standards and most measures remain the same.
- The original process for review remains the same.
- In many cases, the documentation guidance remains the same.
- The documentation guide that is being developed is a supplement to S/M 1.5
- The documentation guide contains both clarifications and changes in requirements. Each will be specified accordingly.
- There are definitional terms that were clarified or amended throughout the document.
- Some Tribal public health examples were included, as PHAB had those to include. However, PHAB hopes to add to these examples as more Tribal public health examples are available to PHAB.



## PHAB's Suggestions for Using the Document

- Read the standard and measure in Version 1.5 of the PHAB Standards and Measures. Also read the purpose and significance. Often reading the measure requirements in the context of the standard and measure purpose and significance will provide the user with the appropriate context for understanding the measure.
- If the user is still having difficulty understanding how the measure applies in Tribal public health, see if there is additional information in the supplemental guidance. The measure numbers are the same in both documents.



# Domain Overview

# Domain 1

Conduct assessments focused on population health status and health issues facing the community

1. Comprehensive Community Health Assessment
2. Collect and manage data
  - a. Surveillance system
  - b. Primary and secondary data
3. Analyze data for trends in health hazards, environmental public health, and social determinants of health
4. Use the data to inform policy, processes, programs, and interventions.



## **Who is the population that the Tribal health department covers in their community health assessment?**

Each Tribal health department can determine who their population is. Some may include Tribal members only; some include descendants, family members, and Tribal employees; others may include all who are eligible to receive their services. The Tribal health department needs to make this decision early in their accreditation process and be able to describe who their population is to PHAB. Throughout the document, population and community are viewed as the same terms.

Measures 1.1.1 and 1.1.2 (pages 7-8)



## Who Does the Tribal Health Department Have to Share Their CHA With?

- Tribal health departments should share their CHA with the broadest community possible in the context of their Tribal setting. In respecting the sovereignty of the Tribe to make the most appropriate decision about sharing their reports, PHAB does not require that the Tribal health department post them on their website. Documentation must be submitted that indicated with whom and how the CHA was shared.

Measure 1.1.3 (page 8)



# Who Does the Tribal Health Department Have to Share Their Data With?

- Tribal health departments may use data collected or analyzed by their Tribal Epidemiology Centers; from state or other federal sources; or from contract providers.
- Tribal health departments can use sharing data with their regional TEC as an example. Provision of summary data, as opposed to raw data, is acceptable.

Measures 1.2.3 and 1.2.4 (page 8)



# Who Does the Analysis of Data and Who Do Tribal Health Departments Share That With?

- Data do not have to be collected or analyzed by the Tribal health department. The data do have to be specific to the population served. Reports could be produced by the state, an academic institution, a TEC, or others.
- Once the reports have been completed, sharing them with Tribal Councils, Tribal Health Boards, or Tribal Health Committees would be acceptable.
- Summaries, reports or fact sheets that are used to support public health improvement planning could also come from the TEC or other contractors.

Measures 1.3.1, 1.3.2, and 1.4.2 (pages 9-11)



# Domain 2

Conduct timely investigations of health problems and environmental public health hazards

1. Conduct investigations (protocols, multiple investigations of infectious and non-infectious, manage process for reportable disease)
2. Contain and mitigate health problems and environmental public health hazards (protocols, All Hazards Emergency Operations Plan, After Action Reports)
3. Public health laboratory and epidemiology capacity (24/7 rapid detection, surge capacity, partnerships with other HDs for investigations)
4. Plan, policies, and procedures for urgent and non-urgent communication (protocols, health alerts, coordinate responses, communicate with the public)



# How Do Tribal Health Departments Document Their Process for Investigating Disease Outbreaks or Environmental Issues?

- If the Tribal health department does not have the capacity to conduct disease investigations on their own, they can use their agreement with the IHS or any other organization or entity that might conduct this work on their behalf.
- If the Tribal health department has not had an investigation need with the five years prior to going through the accreditation process, they can use documentation of an exercise or drill to test how it works in their setting.

Measures 2.1.1, 2.1.2, 2.1.3, and 2.1.4 (page 10-11)



# How Can a Tribal Health Department Document Their 24/7 Access for Investigations and Reporting?

- Tribal health departments who do not have the capacity to have 24/7 access for investigations and reporting may have agreements with other entities within the Tribal government to accomplish this work. In that is the case, then documentation can be provided by memos, emails, or MOUs that describe that work and who does it.
- If access to laboratory capacity is outside the Tribal government, then, more formal documentation such as a contract or MOU is required.

Measures 2.3.1, 2.3.2, and 2.3.3 (page 12)



# Domain 3

Inform and educate about public health issues and functions

1. Health education and health promotion (a planned approach and strategies to protect the public and provide information)
  - Healthy behaviors, health risks, and healthy decisions for specific populations, with their input and feedback
  - Specifically address factors that contribute to specific populations; higher health risks and poorer health outcomes
2. Provide information on PH issues and PH functions
  - Relation with the media
  - Branding strategy
  - Communication procedures
  - Risk Communications plan
  - Information through a variety of methods
  - Culturally sensitive and linguistically appropriate



# How Can a Tribal Health Department Document Their Work in Providing Information to the Public on Protecting Their Health?

- Tribal health departments may use Tribal or other governmental proclamation; documentation from talking circles, Tribal committees, or community meetings.
- Partnership with the health care side of the Tribe to develop health education for the population is acceptable as long as the health education is about health promotion and disease prevention and not about individual health care or clinical services.
- Health literacy examples can be used.
- Sub-populations within the Tribe can be identified to address health equity.

Measures 3.1.1, 3.1.2, and 3.1.3 (pages 13-14)



# How Can a Tribal Health Department Document Its Provision of Information?

- Examples of providing information on public health functions could come from Tribal advisory committees, the Tribe's legislative advisor, or others.
- Tribal health departments can use the Tribal logo or seal if that is the organizational branding that is used.
- If a Tribal health department works with a Tribal Office of Public Affairs, documentation from that office can be used.

Measures 3.2.1, 3.2.2, 3.2.3, 3.2.4, and 3.2.5 (pages 14-15)



# Domain 4

Engage with the community to identify and solve health problems

Emphasis is on the process, the use of the partnership, and the mutual collaboration

## 1. Engage with the community

- a. Partnerships and coalitions
- b. Share Models for engaging the community
- c. Community policy or program change implemented through partnership

## 2. Promote community's understanding to support policies and strategies

- a. Engage with community members
- b. Engage with policy makers (advisory board, elected officials)



# Who Are the Partners That Tribal Health Departments Should Engage?

- Tribal health departments may partner with other Tribal or local partners. Examples could include Head Start, emergency management, schools, coalitions, and social services. These partnerships are intended to include community members other than the health department staff.
- Tribal health departments are a community resource for partners and stakeholders who are seeking information about engaging with a specific Tribal community. Technical assistance refers to the provision of feedback and input to partners and stakeholders about how best to engage with the Tribal community.

Measures 4.1.1 and 4.1.2 (page 15)



# Domain 5

Develop public health policies and plans

1. Be the experts for PH policy, practices, and capacity
  - inform, track/monitor, advise
2. Community health improvement plan
  - Broad participation
  - Consider social determinants and policy changes to address health inequities
3. Health department strategic plan
4. All hazards emergency operations plan



## **How Does a Tribal Health Department Demonstrate That They Inform Others About Potential Impacts of Proposed Policies?**

- Tribal health departments may consider documenting the work that they have participated in to develop or revise Tribal ordinances or Tribal codes that describe public health policies.
- Tribal health departments may select information from a Tribal Health Council or Tribal Board meetings.
- Measure 5.1.3 (page 16)



# Domain 6

Enforce public health laws and regulations

*Laws = regulation, executive orders, statutes, and other types of laws*

1. Process for reviewing public health laws
  - Inform others when changes are needed
2. Educating the public and others on the importance and interpretation of public health laws
3. Enforcing public health laws
  - Inspections
  - Compliance
  - Analysis of compliance



# How Does a Tribal Health Department Document Review of Laws?

- For Tribal health departments who are part of a Tribe that makes its own laws, rules, and regulations, the health department must be able to document how it participates in the review of public health laws and provides input into changes that need to be considered.
- For Tribal health departments who are part of a Tribe that does not make its own laws, then, the Tribal health department can document how it reviewed laws, rules, and regulations passed by others and how the Tribal health department provided input into needed or proposed changes. The Tribal health department is not responsible for the actions taken by the entity that is ultimately responsible to changing the laws, rules or regulations; just for the review and input using their public health expertise.
- Measures 6.1.1 and 6.1.2 (page 19)



# How Does a Tribal Health Department Document Regulatory Responsibilities?

- Tribal health departments that do not have regulatory enforcement responsibility still have a responsibility to maintain knowledge of laws that impact public health and to ensure that the laws are applied consistently. For example, the school system may have the responsibility to ensure that all children entering kindergarten have had age appropriate vaccinations. The health department should work with the schools to ensure that those laws are consistently enforced. Another example is the assurance that the prohibition against the sale of commercial tobacco products to minors is enforced consistently. If the laws are enforced by a different Tribal entity, the health department needs to provide documentation that it knows about the enforcement activity.
- For Tribal health departments, accessible to the public means accessible to the population or community that the Tribal health department has determined that it is responsible for. The Tribal health department may or may not be responsible to administering or enforcing the law. This measure is about the provision of information. The Tribal health department might also partner with another administrative unit or agency to document conformity with this measure.

Measures 6.2.1,6.2.2. and 6.2.3 (page 20)



# Domain 7

Promote strategies to improve access to healthcare services

## 1. Assess health services and capacity

- Collaborative process
- Consider emerging issues in public health, the health care system, and health care reimbursement
- Identify populations with barriers
- Identify populations with barriers to health care and gaps in services

## 2. Identify and implement strategies to improve access

- Collaborative process
- Implement strategies
- Culturally competent initiatives



# How Can a Tribal Health Department Document Strategies to Improve Access to Health Care?

- Tribal health departments may document access to traditional or Tribal healers as part of the assessment and assurance of access to health care.
- Culturally competent initiatives for Tribal health departments could include examples from community health representatives; efforts to employ traditional health workers/healers/practitioners; or developing a peer support group.

Measures 7.2.1 and 7.2.3 (page 23)



# Domain 8

Maintain a competent public health workforce

1. Encourage development of sufficient number of qualified PH workers
  - Partnerships with schools to promote public health
2. Assure a competent workforce
  - Workforce development plan and implement
  - Competent workforce
  - Professional and career development
  - Supportive work environment



# How Can a Tribal Health Department Document That It Ensures a Competent Workforce?

- Tribal health departments can use a policy that the Tribe may have regarding preference in hiring American Indians or Alaska Natives.
- Tribal health departments need to demonstrate how they work with the broader Tribal human resource office if the health department does not manage its own human resource functions.

Measure 8.2.2 (page 24)



# Domain 9

Evaluate and continuously improve processes, programs, and interventions

## 1. Performance management system (overall approach to program evaluations)

- Engage all staff
- Performance management policy/system
- Implement - analysis of progress on achievement of goals, objectives and measures
- Customer satisfaction

## 2. Quality improvement processes

- QI plan
- QI activities based on plan



# What Is An Acceptable Performance Management System?

- Performance management is a systematic process which helps a Tribal health department achieve its mission and strategic goals by improving effectiveness, empowering employees, and streamlining decision making. In practice, performance management often means actively using data to improve performance. PHAB expects that Tribal health departments will establish a system for the whole health department (the system) that addresses performance management. To do that, Tribal health department leadership must be engaged. Tribal health departments can decide who that leadership should be. Examples might include the Health Department Director; a Tribal Council; a Tribal Health Advisory Board; an internal Division or other administrative unit within a Tribe; a Tribal Health Commission or Committee; a Tribal Health Board; or a Tribal Advisory Board of Commissioners.
- A performance management system is a single, comprehensive approach of using objectives and measurement to evaluate performance of programs, policies, and processes, and achievement of outcome targets for the Tribal health department. The Tribal health department performance management system may be part of a larger performance management system for the Tribe (such as in the health care arena). However, if that is the case, specific application to the public health programs and/or initiatives must be described in the required documentation.

Measures 9.1.1, 9.1.2, 9.1.3, 9.1.4 and 9.1.5 (pages 25-26)



# Where Can A Tribal Health Department Find Good Examples of Quality Improvement Work?

- The definition or description of a culture of quality that PHAB uses is the one that NACCHO developed and continues to improv. It can be located at <http://qiroadmap.org>
- Examples of quality improvement activities can be found on many of the national public health partner websites (ASTHO, NACCHO, and PHF) and on the PHQIX website. Clinical (health care) examples may not be used for PHAB's accreditation examples.
- Measures 9.2.1 and 9.2.2 (page 26)



# Domain 10

Contribute to and apply the evidence base of public health

1. Use best practice available
  - Evidenced-based and/or promising practice
  - Foster innovation
2. Communicate research and/or best and promising practices
  - Protection of human subjects
  - Expertise to consider implications of research



# How Can Tribal Health Departments Manage the Requirements Related to Research?

- The Tribal health department does not have to conduct research. The purpose of these measures is to ascertain how the Tribal health department promotes and supports innovations in public health practice and research.
- For protection of human subjects, documentation for a Tribal health department could be a Tribal policy or protocol that describes the process for research review and approval by the Tribal Council, Health Oversight Committee, or other body or authority. It could also be the official Tribal IRB process, which may be the IHS area IRB.
- Tribal health departments must document that they have the availability of expertise (internal or external) for analysis of research and interpretation of research findings. Interpreting research findings is important when communicating the public health implications of those findings to others within the Tribal setting. It is also important when incorporating research findings into department processes, programs, or interventions. This could be a relationship with the Tribal Epidemiology Center. If the expertise is outside the Tribal health department, but still within the Tribe itself, a written agreement is not needed. If the expertise is outside the Tribe, then, a written form of agreement is needed to document the authenticity of the arrangement. It can be a letter of agreement, a contract or a MOU/MOA. It does not have to include payment for the expertise described above, although it may.

Measures 10.1.2, 10.2.1, and 10.2.2 (pages 27-28)



# Domain 11

Maintain administrative and management capacity

## 1. Operational infrastructure

- Policies and procedures
- Ethical decision making process
- Confidentiality
- Culturally and linguistically appropriate approaches and health equity
- HR system and policies and procedures
- Information management
- Facilities clean, safe, and accessible

## 2. Financial management

- Financial and programmatic oversight
- Written agreements
- Financial management system
- Seek resources



# How Does a Tribal Health Department Document Its Administrative Functions?

- For all of these measures, the work may actually be led by another Tribal department. The Tribal health department should work with those other offices, departments and divisions to provide the documentation. This is especially applicable to the measures related to budget, audit, HIPAA training, and information systems.
- Examples of ethical issues include, for example, privately constructed sewers, distribution of vaccine in a shortage situation, staff mandatory immunizations, an employee's use of social media, an employee's acceptance of gifts. Tribal health departments should redact any confidential employee information before submitting an example of an ethical issue related to human resources.

Measures 11.1.1, 11.1.2, 11.1.5, 11.1.6, 11.1.7 (pages 29-31)



## How Can a Tribal Health Department Document “Socially, Culturally, and Linguistically Appropriate”?

- For Tribal health departments, examples could include the provision of health education materials in a native language; provision of information for individuals who are hearing or visually impaired; provision of information for individuals with lower reading levels; etc.
- This is one of the measures that is also related to the topic of health equity. In a given Tribal situation, populations at higher risk for a specific condition (such as elders with diabetes or teens at risk for pregnancy or drug use) are identified by the Tribal health department according to the data in their Tribal health assessment and initiatives described in their Tribal community health improvement plan.

Measure 11.1.4 (page 34)



# Domain 12

Build a strong and effective relationship with governing entity

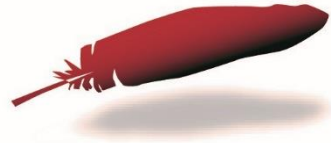
1. Operational definitions of roles, responsibilities and authorities
2. Inform governing entity about PH and HD
3. Engage governing entity in HD's responsibilities
  - Communication



# Who Is a Tribal Health Department's Governing Entity?

- The Tribal health department can decide who their governing entity is. The relationship between the governing entity and the health department must be included in the description of the governing entity. Examples could be a Tribal Council; a Tribal Health Advisory Board; an internal Division or other administrative unit within a Tribe; a Tribal Health Commission or Committee; a Tribal health board; or a Tribal Advisory Board of Commissioners.
- The Tribal health department must produce some evidence of documentation of its roles and responsibilities. It may be as formal as a Tribal law or regulation or less formal as a memo designating their authorities. This document must also describe how the health department works with its governing entity to carry out its roles and responsibilities for public health.
- Measures 12.1.1 and 12.1.2 (page 32-33)





Self-Assessment:  
Assessing Public Health  
Capacity

# Self Assessment Workbook for Tribal Health Departments

- To assess readiness against V1.5 Standards and Measures
- Internal Assessment
- Each measure requires documentation
- Self-assessment assesses capacity to meet the measure with documentation



# Self Assessment Workbook for Tribal Health Departments

## Scoring Key

0= No Capacity

1= Minimal Capacity

2= Moderate Capacity

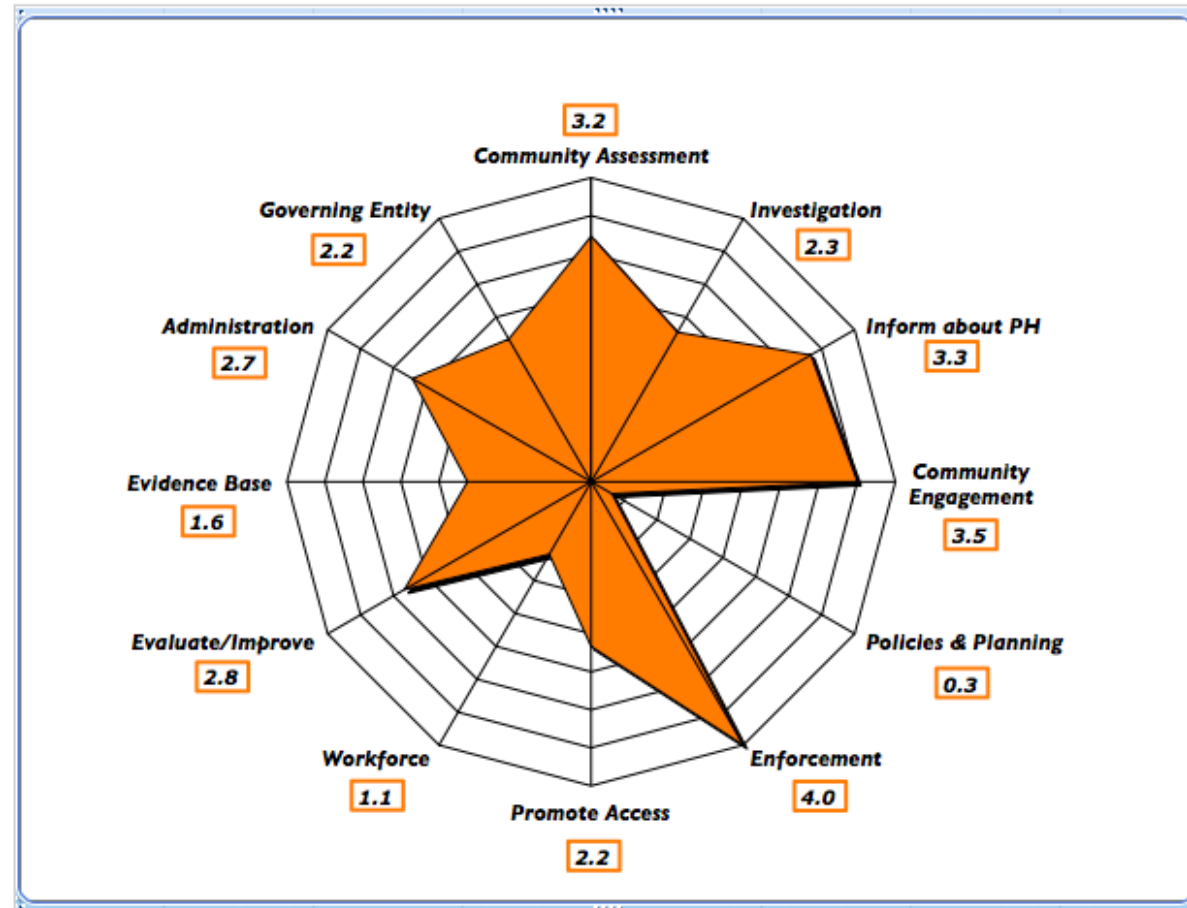
3= Significant Capacity

4= Optimal Capacity

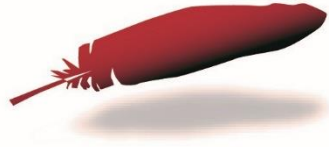


# Domains Self-Assessment Radar Chart

[Insert Agency Name] Self-Assessed Agency Capacity [Insert date]



# National Indian Health Board



QUESTIONS?

# Thank You!

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