



“Public health department accreditation is defined as the development of a set of standards, a process to measure health department performance against those standards, and reward or recognition for those health departments who meet the standards. The Public Health Accreditation Board’s (PHAB) public health department voluntary accreditation process seeks to advance quality and performance within public health departments. National public health department accreditation has been developed because of the desire to improve service, value, and accountability to stakeholders. Thus, accreditation gives reasonable assurance of the range of public health services a department should provide. Accreditation declares that the health department has an appropriate mission and purpose and can demonstrate that it will continue to accomplish its mission and purpose.” *Source: PHAB Accreditation Overview*

## Organizational Survey Results

Local health departments (LHDs) and the Minnesota Department of Health (MDH) completed an organizational survey related to quality improvement, which was developed for the Multi-State Learning Collaborative (MLC-3). Minnesota (MN) LHDs completed it in February 2011 and there was an 81% response rate among LHD top officials (n=56). All MDH staff received the opportunity to complete the survey in June 2011, and 1,111 employees responded (73% response rate).

The full survey, which was completed by LHDs, contained 12 questions related to accreditation. The MDH version of the survey contained two questions related to accreditation. Respondents were asked to rate their level of agreement with a series of questions related to accreditation and had the following possible responses: strongly agree; agree; neutral; disagree; strongly disagree; and I don’t know. For the purposes of this brief, strongly agree/agree and disagree/strongly disagree are combined into response categories.

## At a Glance

The Public Health Accreditation Board (PHAB) launched the voluntary, national accreditation program in the fall 2011. Accreditation was developed to improve public health service, value and accountability to stakeholders.

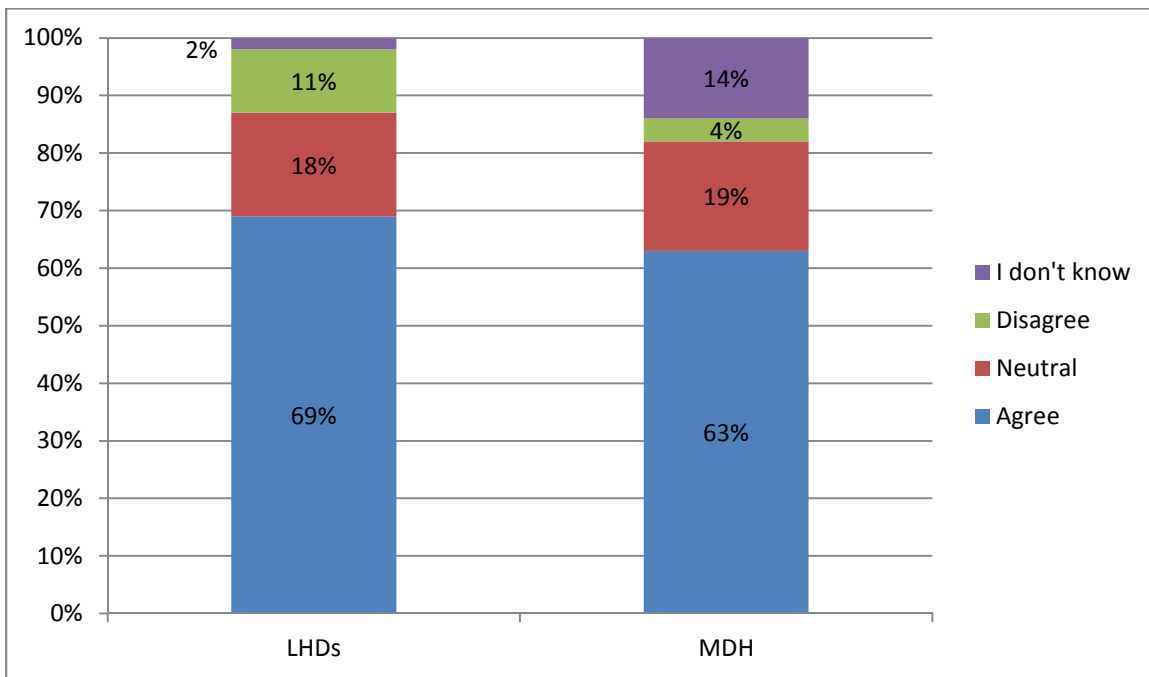
Local health departments (LHD) and the Minnesota Department of Health (MDH) participated in a survey which contained questions related to national accreditation. The vast majority of respondents agreed that receiving national accreditation would strengthen their public health agency (69% of LHD respondents, 63% of MDH). LHD respondents were much more familiar with efforts to develop a program of voluntary national accreditation for health departments as compared to MDH respondents (93% vs. 43%).

LHDs indicated varying levels of readiness to apply for accreditation, but 60% agreed they would seek accreditation under a voluntary program. In addition, 78% of respondents had Community Health Assessments and Community Health Improvement Plans completed within the past five years.

### Knowledge of Accreditation

A high percentage of LHD respondents agreed that they were familiar with efforts to develop a program for national, voluntary accreditation of state and local health departments (93%). This compares to only 43% of MDH respondents. LHDs appear to be much better informed about national accreditation efforts than their state-based counterparts. None of the LHD respondents chose “disagree/strongly disagree” or “I don’t know” as responses to that question. Close to 70% of LHD respondents agreed that receiving national accreditation would strengthen their public health agency, which is fairly similar to the MDH response (63%). However, only 4% of MDH respondents disagreed with that statement compared to 11% of LHD respondents.

**Figure 1. Percent of responses to the question: I believe national accreditation would strengthen my public health agency.**

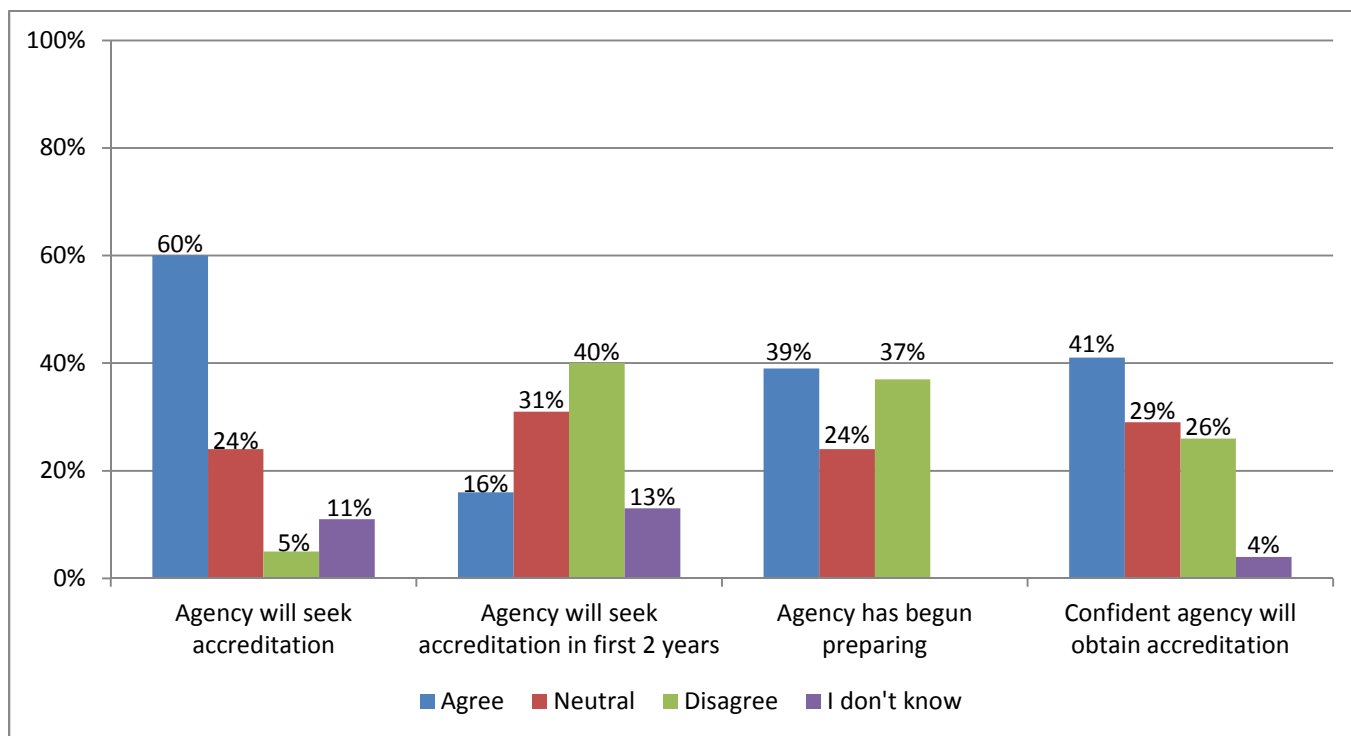


Local respondents answered three additional questions related to the value of accreditation to their departments. A higher percentage of respondents agreed that receiving accreditation would enhance credibility with stakeholders (75%), compared to those who agreed it would improve the quality of services (64%) or that having standards for performance is a good idea (70%). Interestingly, over 16% of respondents did not agree that accreditation would improve the quality of services provided by their departments and 16% did not know. Thus, it appears that a major component motivating LHD to apply for accreditation is to improve standing with stakeholders and policymakers and the general belief that performance measures and standards are important.

### Plans to Seek Accreditation

LHDs answered several questions related to their plans to seek national voluntary accreditation and their confidence in obtaining it. Close to 60% of respondents agreed their agency would seek accreditation under a voluntary program, however only 16% agreed they would do so in the first two years of the program (2011-2012). Almost 40% of respondents indicated that their agency has begun preparing for national accreditation and a similar percentage felt confident in their agency’s capacity to obtain national accreditation.

**Figure 2. Plans to apply for national voluntary accreditation among MN LHDs**



### Progress on Accreditation Pre-Requisites

LHDs were asked about their progress on completing the three pre-requisites for applying for national, voluntary accreditation: an agency strategic plan; a community health assessment; and a community health improvement plan. While only 29% of respondents had completed an agency strategic plan, a much higher percentage of respondents had completed a community health assessment and community health improvement plan within the past five years. In addition, the rest of respondents were either in the process of developing those products or had plans to do so within the next few years. Almost 6% of respondents stated their agency had no plans to develop a strategic plan and 4% did not know.



**Table 1. Agency Progress on Performance Management Components needed for Accreditation**

	<b>Agency Completed within Past 5 Years</b>	<b>Agency is Currently Developing</b>	<b>Agency Plans to Develop in Next Few Years</b>	<b>Agency has No Plans to Develop</b>	<b>Don't know</b>
Agency Strategic Plan	29%	25%	36%	6%	4%
Community Health Assessment Profile	78%	6%	16%		
Community Health Improvement Plan	78%	9%	13%		

## Conclusions

Overall, a high percentage of LHD respondents were aware of national voluntary accreditation efforts and 60% indicated plans to apply for accreditation. The largest barrier from a pre-requisite standpoint appeared to be the lack of an agency strategic plan, which may be why a high percent of LHD respondents indicated that their applications would not occur within the first two years of the program. Overall, both LHD and MDH respondents indicated agreement with statements about the value of national accreditation.

## Contact Information

For questions on accreditation or to seek more information about technical assistance available, please contact LuAnne McNichols, MDH Accreditation Coordinator, at 651-201-5566 or [luanne.mcnichols@state.mn.us](mailto:luanne.mcnichols@state.mn.us). In addition, you may visit the Public Health Accreditation and Minnesota website located at:

<http://www.health.state.mn.us/divs/cfh/ophp/projects/accreditation/>

## About the Research to Action Network

For more information on this issue brief or the Minnesota Public Health Research to Action Network, contact Kim Gearin at [kim.gearin@state.mn.us](mailto:kim.gearin@state.mn.us) or (651) 201-3884 or Beth Gyllstrom at [beth.gyllstrom@state.mn.us](mailto:beth.gyllstrom@state.mn.us) or 651-201-4072.

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