



### INTRODUCTION

Achieving national public health accreditation status from the Public Health Accreditation Board (PHAB) is becoming increasingly popular among the nation's public health agencies. According to PHAB, the goal of such accreditation is "to improve and protect the health of the public by advancing the quality and performance of Tribal, state, local, and territorial public health departments."<sup>1</sup> As of April 1, 2015, there were 26 states (plus the District of Columbia) with accredited public health agencies and 17 states with 1 or more agencies in the application process.<sup>1</sup> Georgia is 1 of the 17 states with multiple public health agencies working towards achieving voluntary, national accreditation.

- January 2012 – June 2013: The GA PBRN provided technical assistance and QI training to three Georgia health districts to conduct small-scale QI projects utilizing the Plan-Do-Study-Act (PDSA) process.<sup>3</sup>
- This work led to nine Accreditation Readiness Assessments and the continued provision of both QI and PHAB pre-application technical assistance (TA).
- Throughout this process, the GA PBRN gathered information to assess the overall accreditation readiness of the state of Georgia.

### METHODS

This study utilized a case study approach in order to examine PHAB accreditation efforts in Georgia (the unit of analysis in the case study) within a real-life context. Data came from three sources: Accreditation Readiness Assessments, PHAB Pre-Application TA, and an Accreditation Readiness Survey distributed to all Georgia public health districts.

Three GA PBRN teams completed Accreditation Readiness Assessments in 9 Georgia public health districts, encompassing 88 counties—55% of the total counties in Georgia.

- October 2012 – September 2013: The GA PBRN teams completed the assessments in two phases.
- Assessment teams collaboratively drafted reports, determining strengths and barriers to accreditation based on qualitative observations and data collected during the meeting.
- A comparative analysis of these district level reports allowed for a determination of state-wide strengths and barriers to accreditation.

The GA PBRN also provided PHAB Pre-application TA to two Georgia health districts, giving the GA PBRN an additional opportunity to assess accreditation readiness.

- TA was provided over 18 months: PHAB Standards and Measures guidance, checklist development, creation of the GA PHAB Learning Community, and multiple site visits.
- GA PBRN sent a 5-question PHAB Pre-application TA Survey to the 2 district accreditation teams using the survey software Qualtrics; 11 surveys were completed.

In September 2014, GA DPH surveyed the 18 Georgia public health districts to further assess accreditation readiness.

- GA DPH sent a 10-question survey to each district; 11 of the 18 districts responded.
- The GA DPH accreditation coordinator and the GA PBRN coordinator reached out to the non-responsive districts to accurately assess their accreditation-related activities.

### RESULTS

#### Accreditation Readiness Assessments

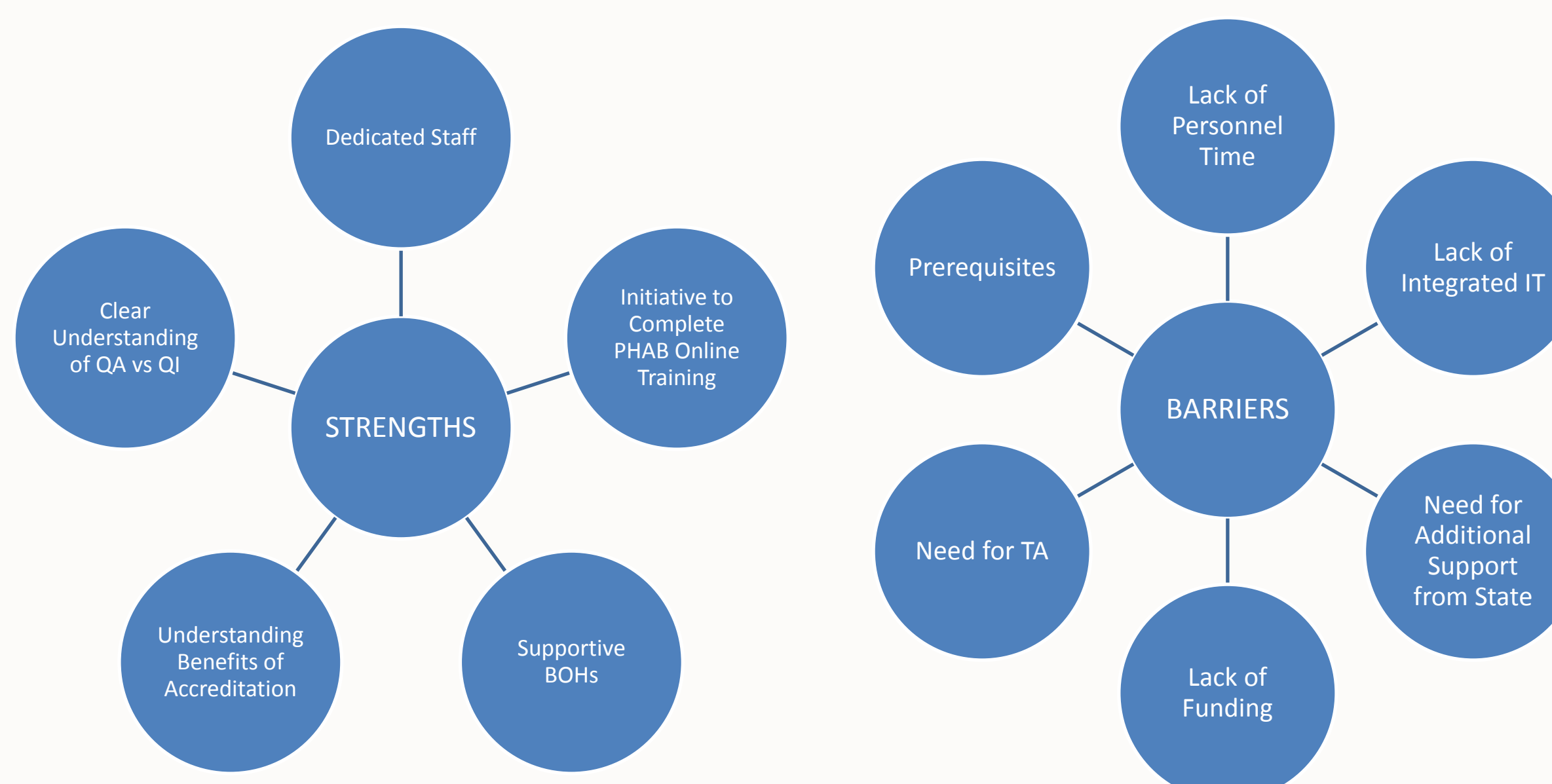
District Strengths:

- High levels of motivation and dedication among staff who are interested in accreditation and the promotion of a QI culture in their agencies.
- Clear understanding of the difference between quality assurance (QA) and continuous quality improvement (CQI).

Accreditation Barriers:

- Lack of funding to support accreditation fees
- Lack of time and resources to complete the three required prerequisites to accreditation.
- Lack of integrated IT services.
- Lack of personnel dedicated 100% to accreditation-related activities.

#### Barriers to and Strengths for Accreditation



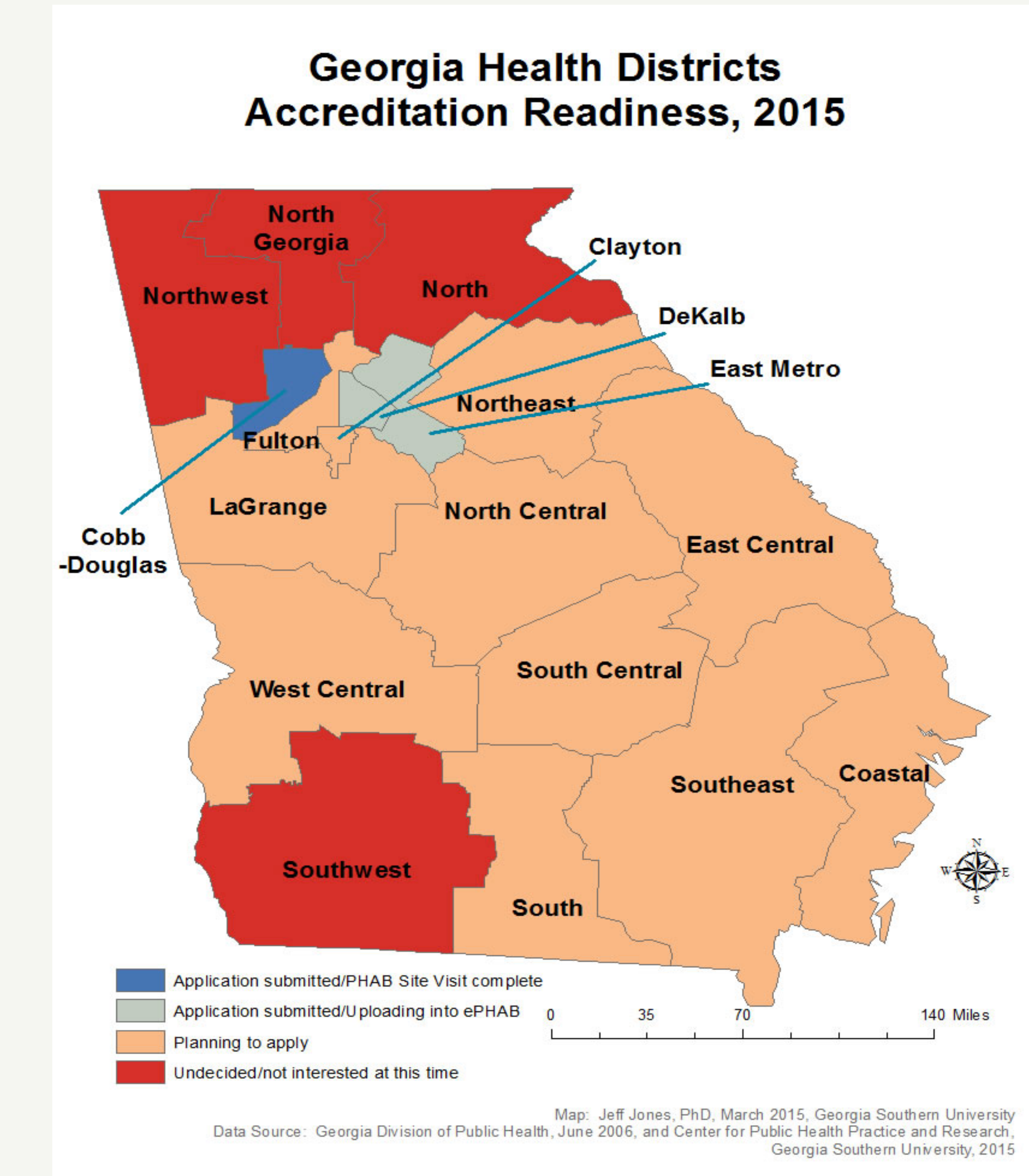
#### PHAB Pre-application TA Survey

- Majority of those surveyed would recommend TA to other agencies pursuing PHAB accreditation.
- TA in the form of documentation review and the creation of an organized PHAB Learning Community were the most useful.
- Participants viewed PHAB-required documentation and time as significant barriers to accreditation.

#### GA DPH Accreditation Readiness Survey

- 14 of 18 GA public health districts are either actively pursuing PHAB accreditation or are planning to apply. This includes 116 of the 159 Georgia counties (73%).
- One district has already completed its PHAB Site Visit
- Two districts have applied and are uploading PHAB documentation.
- Eleven districts are in various stages of assessing readiness and completing the PHAB prerequisites.
  - One of those districts plans to apply in 2015.
  - Two plan to apply in 2016.
  - The other seven districts are in various stages of pre-application.
- GA DPH plans to apply in late 2015.

### RESULTS CONT.



### CONCLUSIONS / LESSONS LEARNED

The results of this case study show that 72% of Georgia's public health districts are engaged in accreditation-related activities. This includes activities such as:

- Accreditation Readiness Assessment
- Community Health Assessment
- QI Council and QI Plan Development
- Strategic Planning
- Policy Review

These activities can enhance the culture of quality in the agency as well as lead to PHAB accreditation. The accreditation journey, however, is difficult, time consuming, and often expensive for rural health departments. According to Shah et al., nationally the top three reasons for not pursuing accreditation are: (1) that time/effort exceeds benefits; (2) high fees; and (3) that standards exceed LHD capacity.<sup>5</sup> Georgia public health districts cited similar barriers. Accreditation TA and organized learning communities, along with accreditation-based funding opportunities, can help address these barriers. Georgia's public health districts will continue to tackle these obstacles while relying on their demonstrated strengths in order to achieve the goal of national accreditation status.

### ACKNOWLEDGEMENTS

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