


## DOH's Accreditation Story February 18, 2016

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## NJ Health New Jersey Department of Health

### Agenda

- **Telling OUR Story: The Big Picture**
  - DOH's Accreditation Journey so far
- **Understanding the PDSA Quality Improvement Model**
  - What does it mean?
- **Practical processes for team organization & documentation collection**
  - What worked and didn't work?
- **Communication**
  - How and with whom does DOH share information?
- **Why This Process Made DOH Better!**
  - Strengths & Opportunities for Improvement

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## NJ Health New Jersey Department of Health

### Accreditation Journey 2012- May 2015

PHA Readiness Gap Assessment  
 November 2012

Statement of Intent Submitted  
 October 2013

Documentation Submitted  
 March 2015

Application Submitted and Approved  
 June 2014

Completeness Review  
 Start: April 2

Completeness Response  
 Submitted: May 1st




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Updated: February 2016

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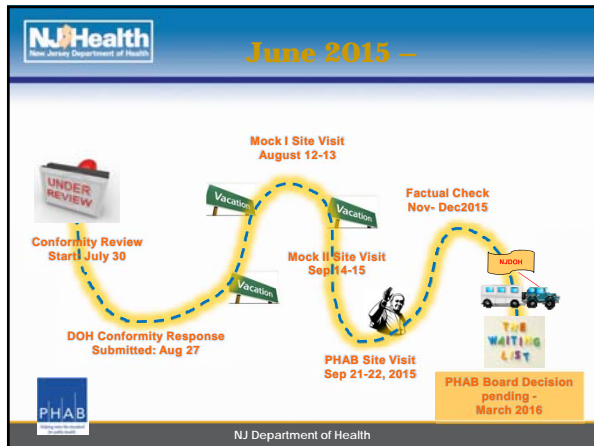
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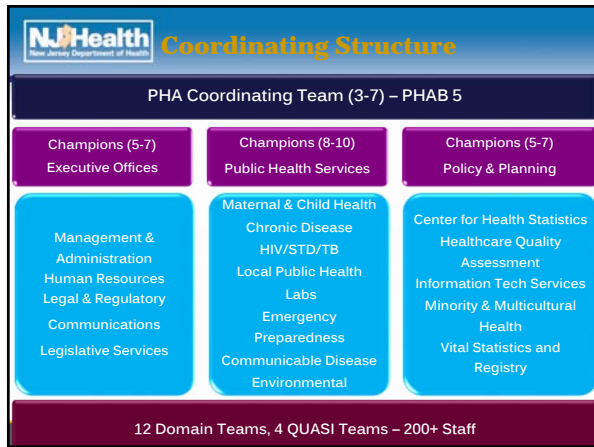
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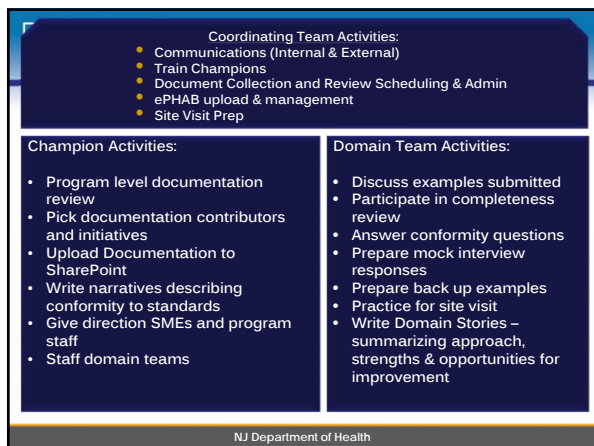
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**Telling Your Story: The BIG Picture**  
*To start, focus on the forest, not the trees.*

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**NJHealth** **BIG PICTURE FOCUS**  
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*What do we do as an agency in this essential public health area?*

**DOMAIN**

**STANDARD**

**MEASURE**

**REQUIRED DOCUMENTATION**

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**NJHealth** **Domain Team Building**  
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- All hands on deck – every one in the agency should be involved in the process
- Organize into Domain teams
  - Ensure multi unit representation in each team
  - Clearly define team member roles
- Visible leadership by senior staff is essential
- Engage external partners who are assist in carrying out agency activities



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**In Theory**

**In Real Life**

**The Quality Improvement Model (PDSA) & the PHAB Accreditation Process**

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## PDSA Background

- **Quality Improvement Model** was adopted by RWJF and CDC at the formation of the Public Health Accreditation Board
- PDSA was developed by **W. Edwards Deming**, the Father of modern quality control theory.
- PDSA is also known as tool for developing **critical thinking**
- PDSA provides the **framework for the PHAB accreditation process**

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## Goals of the PHAB Accreditation Process

- Promote high performance and continuous quality improvement.
- Recognize high performers that meet nationally accepted standards of quality and improvement.
- Illustrate health department accountability to the public and policy makers.
- Increase the visibility and public awareness of governmental public health, leading to greater public trust, increased health department credibility, and a stronger constituency for public health funding and infrastructure.
- Clarify the public's expectations of health departments.

*PHAB Accreditation Steering Committee, 2006*

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**NJ Health** New Jersey Department of Health **Step 1: Planning** 

- **What** was the plan? (SMART OBJECTIVES)
- **What** was the desired outcome?
- **Who** was involved in the planning process? (Partners and Collaborators) .
- **Timeframe** - How long did the plan take to implement?
- **What resources** were used?
- **What** data needed to be collected?
- **What** *were the benchmarks for success?*

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**NJ Health** New Jersey Department of Health **Step 2: Doing** 

- Implement Action Plan
- Document activities, events, activities, process and outcome data
- Document collaborations, communication data, findings
- Lessons learned, challenges, observations.

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**NJ Health** New Jersey Department of Health **Step 3: Study** 

- Evaluate the impact of the project
- Analyze data to measure success
- Evaluate success in meeting goals and objectives (Indicators of success?)
- Identify what worked, corrections needed, and addition actions needed
- Document Lessons learned
- Communicate outcomes and information about resources/services developed

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## Step 4: Acting



*Key Questions: Was the project or revision/improvement successful?*  
*Next Steps?*

- **Adopt** - It worked—implement and communicate findings.
- **Adapt** - It worked but needs **additional** tweaking or research.
- **Abandon** - It didn't work, start the process all over again.

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## Making the Connection

*PHAB Accreditation Domains and Standards are the key content and process indicators of the PSDA Process.*

- Conduct Assessments
- Investigate health problems
- Inform and Educate
- Engage the Community
- Develop Policies and Plans
- Work with Laws and Governing Entities
- Promote Strategies to improve access to health care services
- Develop & Maintain competent health workers
- Evaluate/Improve Health Department Programming
- Evidence-based Public Health
- Administrative Management Capacity
- Engage the Public Health Governing Entity

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**Practical Processes for Documentation Collection**  
*"Men Ampil Chay Pa Lou"*



**Many Hands Make LIGHT Work**

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## Document Collection

**Strategies**

- In-Person weekly meetings
- Training
  - PHAB processes & lingo
  - Doc review processes
- Track collection & report status frequently
- Multiple layers of review

**Champion requests docs from program/domain SME**

**SME determines conformity and submits RDs to Champion**

**Champion approves RDs, proofs description and narrative & uploads to SharePoint**

**Coordinator(s) review, score and bind for ePHAB**

**Evaluation:**  
 FULLY DEMONSTRATED  
 LARGELY DEMONSTRATED  
 SLIGHTLY DEMONSTRATED  
 NOT DEMONSTRATED

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**ePHAB Progress**

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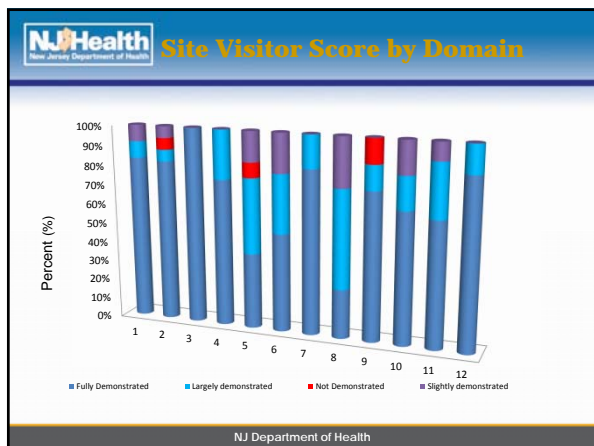
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## DOCUMENT COLLECTION Lessons Overall

1. Focus on intent of each domain and interconnectivity of domains
2. Build strategic teams to do the work
3. Track Activities Progress in a visible way
4. Teach/Train using multiple styles
5. Communicate!



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## Communication & Collaboration the PHAB Way

- *The Up and Down Dynamic of Effective Public Health Information Sharing*
- *Telling Your Story to PHAB Site Visitors*

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## Communication Is Not Merely...



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## Learning from our Funders...

- Communication/ Collaboration is a two-way street.
- Communication has an up and down, back and forth direction.
- A collaboration of community partners inform the health department
- The health department shares information gathered from its partners



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## Collaborations - the Key to Communication

- Involving key players and audiences impacted
- Shared vision evidenced in technically accurate and culturally competent plan development and implementation
- Process and outcome data collection and evaluation
- Documented outcomes shared
- Feedback and on-going review and updating



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## Communicating with PHAB Site Visitors

- Tell your story in each PHAB domain and each standard
- Describe how communication is not a matter of the health department disseminating information but the result of a collaborative process involving your partners.
- Provide documentation of each step of planning, implementation and evaluation processes.



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**NJ Health** New Jersey Department of Health **Key Documents Needed for Telling the Story**

- **State/County/Local Health Assessment**
- **State/County/Local Health Improvement Plan**
- **Strategic Plan**
- **Quality Improvement Plan**

*How does it all fit into Our story?*

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**NJ Health** New Jersey Department of Health **Site Visit Report: Strengths**

- Strong Commitment to building the Quality Improvement Culture
- Robust Strategic Planning Process
- Excellent use and distribution of health data all around
- We all learned a lot about the Department
- Community Partner meeting supported documentation & revealed strong partnerships with external stakeholders
- Communications policies – Emergency, Risk, Branding, etc.

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**NJHealth** New Jersey Department of Health **Site Visit Report: Opportunities for Improvement**

- Technical assistance to local health departments (workforce development, data feedback loop, policy impacts)
- Involvement in development of Health in All Policies
- Lack of a formal functional performance management system

ADDRESS WEAKNESSES AND ANSWER "WHY" QUESTIONS!



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**NJHealth** New Jersey Department of Health **DOH Major Next Steps**

- Get Accredited!
- PM System Implementation
- Implement more population health QI projects
- Use PHAB Manual (v1.5) as a checklist for future
- Improve NJDOH's Domain story on an ongoing basis
- Continue the Domain team structure to achieve Department wide goals

Best Practices  
Next Exit 

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**NJHealth** New Jersey Department of Health **Best Outcomes of this Journey**

- Examination of DOH practices
- QI Culture
- Empowerment of Staff in implementing QI
- Discovering the expertise hiding within program areas
- Silo Busting
- Cross training opportunities
- Exposing the good, the bad & the ugly
- Pooling of resources to get support & tools needed
- Strengthening the agency overall



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