

## 2015-2016 Accreditation Support Initiative (ASI) for Local Health Departments

## **FINAL REPORT**

1. **Community Description:** Briefly characterize the community(ies) served by your agency (location, population served, jurisdiction type, organization structure, etc.). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

Multi-county Health District: 12 counties Jurisdiction type: Predominantly rural with 4 suburban counties Population Estimate: 825,000 people Location: West Georgia; South and West of Metro-Atlanta Organization structure: 12 counties with district office located at Lagrange, Troup County GA. Some activities are centralized to the district office (billing, budgeting and other administrative activities).

2. **Project Overview:** Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period and the key activities engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others.

The most significant accomplishment is that District 4 was able to complete Phase3 of accreditation due to assistance from this grant. Each of the 12 health departments worked with their community partners and accreditation team to obtain at least 400 surveys per county. Some counties have as few as 16,000 residents while others have greater than 100,000 residents and each had its challenges with obtaining the number of required surveys that reflected the demographic makeup of their respective counties. Quality Champions, Family Connection Partners, WIC, churches, school systems, and others worked together to assist the accreditation team with achieving its goal. The team enjoyed fantastic participation at the "Forces of Change" assessment held October 9, 2015 and reviewed January 29, 2016. Dr. Ajayi synthesized the results from participants (@ 53) for a robust view of challenges external to the health department and the communities it serves. The 10 Essential Services assessment was conducted on March 16 to 23 attendees and provided critical feedback related to public health satisfaction as well as opportunities for improvement. The attendees presented with confidence to share their honest feedback understand that by doing so, a true quality improvement plan would be created to benefit them and their communities they represented. Presentations to the boards of health, train-the-trainer model of the 10 Essential Services to the Quality Champions, and presentations to Family Connection Partnership meetings throughout the district helped disseminate accreditation information in a uniform and coherent fashion thus facilitating greater buy-in and promotion of accreditation activities. An accreditation team meeting held May 9



provided a time for the team to evaluate its progress to date and determine next steps to move forward with accreditation requirements.

3. **Challenges:** Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please **do** include them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

Harnessing the greatest number of attendees for a given assessment: sometimes time of day, distance to meeting location, number of other commitments, etc. interfere with the ability to achieve optimal participation levels.

4. Facilitators of Success: Describe factors or strategies that helped to facilitate completion of your agency's work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.

"MAPP is intended to lead communities to an unprecedented union among the community organizations, agencies, groups, and individuals that comprise the local public health system. Through broad ownership, communities can create an effort that is sustainable, builds on collective wisdom, uses resources from throughout the community, and, ultimately, leads to community health improvement." Taken from

http://archived.naccho.org/topics/infrastructure/mapp/framework/mappbasics.cfm

This description of the MAPP process has unfolded in a dynamic region-wide effort born out of the Public Health Leadership Academy. The accreditation team focused on strategically utilizing the West Central Georgia Community Transformation Coalition to enhance strong partnerships throughout the District 4 service area with a formalized agreement. It is comprised of District 4 Health Services, Regional Housing Authority, Regional Family Connection Partnership, and its collective partners participating in guided community transformation. Upon completion of the Community Themes and Strengths assessment, District 4 was able to share its results with the West Central Georgia Community Transformation Coalition to assist them with determining, within the Culture of Health Framework, what theme to address as it proceeds with its work. This resulted in deciding to move forward with addressing the theme of "Risky Behavior" in community. This is just one example of how the region has already benefitted from the pre-application phase of accreditation. Additionally, the culmination of the Phase 3 activities assisted



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the accreditation team with getting itself poised to move forward with the CHA, CHIP, SP and QI Plans. Developing and truly strengthening community partnerships has been a major focus of this grant opportunity and has cleared a forward-moving path towards continued growth and inclusion of stakeholders in the accreditation process.

5. **Impact of ASI:** To what extent do you feel your health department was more prepared for accreditation at the end of the ASI5 project as compared to the beginning? What specifically changed during that time that made your agency more prepared for accreditation? How did the ASI5 contribute to your health department's progress?

District 4 as a whole of its 12 distinct health departments has learned a tremendous amount about accreditation thanks, in part, to this grant opportunity. Phase 3 activities insisted that the local health departments and their community partners come together in a meaningful way to achieve specific tasks (e.g. completing Community Themes and Strengths Assessments) and served as a starting point for identifying health department liaisons both to the community and to internal stakeholders (Quality Champions). Our district employees and community stakeholders have benefitted from better understanding public health's role in community via the LPHS (10 Essential Services) survey and have succinct, informative, and accurate ways of promoting the public health system in a palatable way. Forces of Change helped our community partners challenge their own ways of strategic planning to include, to a greater extent, forces beyond their control when in their own planning process. The community is eager to hear what public health has to say and is considered a reliable and trusted information source. The community appreciates hearing and being involved in public health improvement planning.

6. **Lessons Learned:** Please describe your agency's overall lessons learned from participating in the ASI. These can be things you might do differently if you could repeat the process and/or the kinds of advice you might give to other health departments who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

It could be helpful to see the end product (e.g. a completed CHA, CHIP, SP, vision and mission statements) prior to embarking on Phase 3 to ensure, to some degree, that there is great understanding of the strategic "line of vision." The more internal and external stakeholders understand what the ultimate goal is, the more buy-in from the beginning of the process. It would also be great to possibly attend other Phase 3 meetings to assist with cross-collaboration of events.

7. **Funding Impact:** Describe the impact that this funding has had on your agency. How has this funding advanced your agency's accreditation readiness or quality improvement efforts?



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The funding made available from the grant was instrumental in completing 3 MAPP-related assessments, which in turn, provides information necessary to design our Strategic Plan and Community Health Improvement Plan.

8. **Next Steps and Sustainability:** What are your agency's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?

District 4 Public Health is currently drafting our Quality Improvement and Workforce Development Plans. We are analyzing the data results from the Community Themes & Strengths Assessment surveys. We are starting to draft a combined CHA/CHIP plan. We are reviewing Performance Management Systems to determine what will work best for District 4. We plan to begin working on our Strategic Plan in January 2017. Our goal is to apply for accreditation in August or September 2017.