



# How Are We Rated?

## *The Public Health Accreditation Board & DPH Customer's Perspectives*

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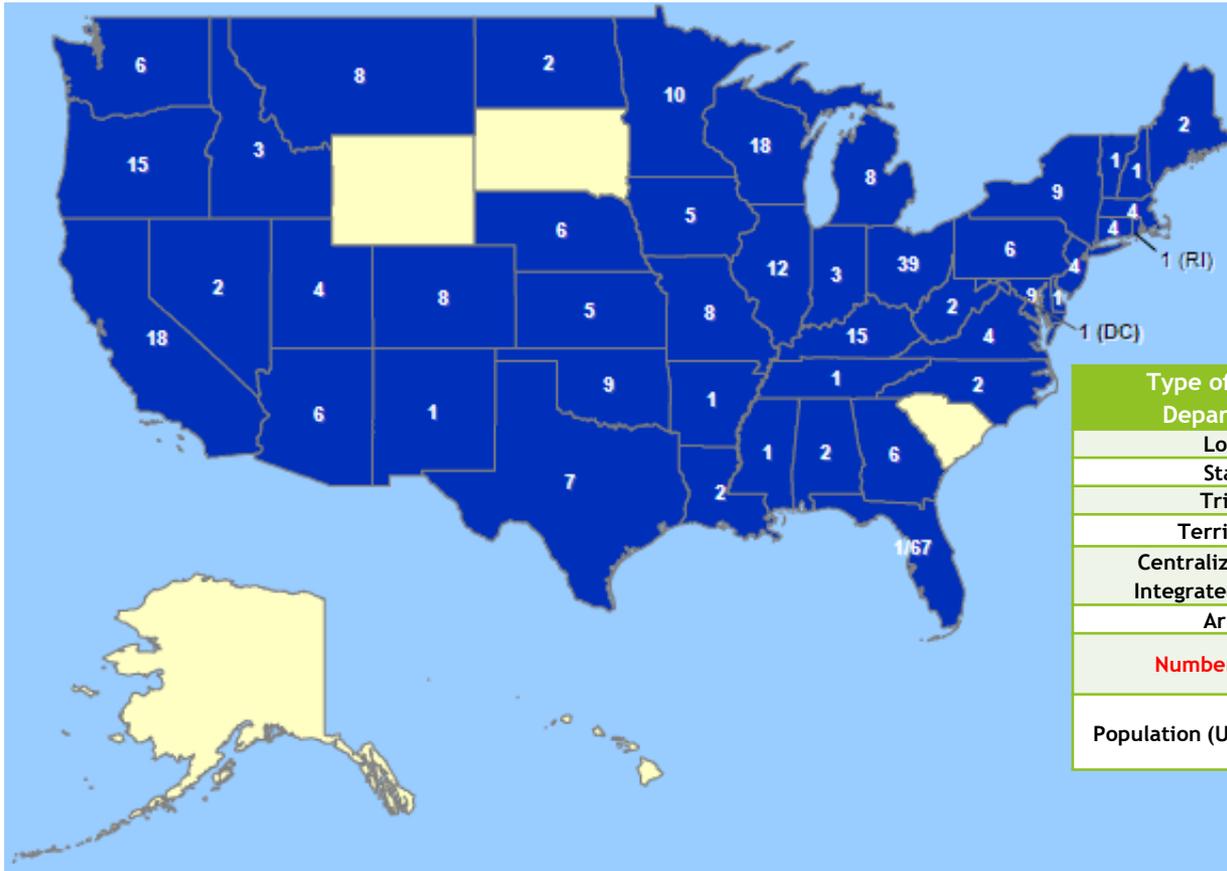
# What is Public Health Department Accreditation?

- The measurement of a health department's performance against a set of nationally recognized, practice-focused and evidenced-based standards
- Accredited through the Public Health Accreditation Board (PHAB)
- DPH received initial accreditation in 2017
- Reaccreditation every 5 years (2022)





# Who is Accredited?



Type of Health Department	Accredited	In Process	Total in e-PHAB
Local	243	148	391
State	36	5	41
Tribal	3	4	7
Territorial	.	1	1
Centralized States Integrated System <sup>i</sup>	1/67	.	1/67
Army	1	5	6
<b>Number of HDs</b>	<b>283+1 system</b>	<b>163</b>	<b>447</b>
<b>Population (Unduplicated)*</b>	250,462,641 81%	39,024,189 13%	289,486,830 94%

<sup>i</sup>Single accreditation for multiple health departments

\*US population is based on the US Census Bureau  
2010 population of 308,745,538

*Applicant Names Are Kept Confidential*





# Why A Health Department Seeks Reaccreditation

## 1. Sustained Recognition:

- Hallmark of a 21st century organization

## 2. Continued Value:

- Ensures we continue to evolve, improve, and advance
- Process stimulates quality and performance improvement
- Increases credibility and accountability with external stakeholders
- Helps us identify strengths and weaknesses
- Validates the work that staff do
- Better positions the health department to obtain additional funding

## 3. Future Benefits

- Able to confidentially benchmark their performance against other accredited health departments.
- Showcases how HD are selecting and tracking priority population health outcomes



***“Accreditation for local health departments is essential. It is the public’s assurance that their health department is meeting national standards.”***

Colleen M. Bridger,  
Assistant City Manager for the City of San Antonio, Texas, and  
former director of the San Antonio Metropolitan Health District



# How is Reaccreditation the Same as Initial Accreditation?



## Public Health ACCREDITATION

### Public Health Accreditation Board Accreditation Process

1. Pre-Application

2. Application

3. Documentation Selection & Submission

4. Site Visit

5. Accreditation Decision

6. Annual Reports

7. Reaccreditation (every 5 years)

### 12 Domains

Documents selected and submitted address these public health functions and activities:

**1. Assess**  
Conduct and disseminate assessments focused on population health status and public health issues facing the community

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

**3. Inform & Educate**  
Inform and educate about public health issues and functions

**4. Community Engagement**  
Engage with the community to identify and address health problems

**5. Policies & Plans**  
Develop public health policies and plans

**6. Public Health Laws**  
Enforce public health laws

**7. Access to Care**  
Promote strategies to improve access to health care

**8. Workforce**  
Maintain a competent public health workforce

**9. Quality Improvement**  
Evaluate and continuously improve processes, programs, and interventions

**10. Evidence-Based Practices**  
Contribute to and apply the evidence base of public health

**11. Administration & Management**  
Maintain administrative and management capacity

**12. Governance**  
Maintain capacity to engage the public health governing entity

# How is Reaccreditation Different?

- ✓ Focus on 2018-2022
- ✓ Designed to ensure that accredited health departments continue to evolve, improve, and advance
  - Heavily focused on narratives of our process or of examples, rather than providing documents of examples
  - “Describe plans for continued advancement”
- ✓ Requirement to report **Population Health Outcomes**
- ✓ **Virtual site visit** by the PHAB
- ✓ Provides an opportunity for HD’s self-reflection





# PHAB Reaccreditation Documentation Form

January 2017



**Measure 10.1: The health department's programs and interventions are based on the best available evidence**

**Requirement 2:** Evidence-based or promising practice program

Health Department Name
LA County Department of Public Health

Requirement Narrative
<p><b>1. Provide a narrative that describes an example of a population-based program or intervention that is evidence-based or promising practice based. Cite the source of the evidence used in the example.</b></p> <p>The example must have occurred within the last 3 years. Do not upload documentation of an example. <i>Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.</i></p>

<p><b>Formative Research Project for Nutrition and Physical Activity Program SNAP-Education program</b></p> <p>The Los Angeles County Department of Public Health (DPH) Nutrition and Physical Activity Program implements the Supplemental Nutrition Assistance Program – Education program, (SNAP-Ed) that delivers nutrition education and implements policy, systems, and environmental change (PSE) strategies in LA County. This federally funded program is based on evidence synthesized in the <a href="#">National Prevention Strategy</a>, which includes guiding principles on community-based multi-sector programming (also see <a href="#">ASTHO</a>). The United States Department of Agriculture operates SNAP-Ed in partnership with state social services agencies. In California, the California Department of Social Services coordinates the work of four state implementing agencies; the largest recipient of funding is the California Department of Public Health (CDPH). CDPH partners with local health departments throughout the state to identify and address local needs. Every three years, DPH releases RFP to identify approximately 20 partners to implement annually.</p>
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In 2018, an evaluation project was conducted to understand the process to better assess the capacity of community-based organizations that DPH could do to enhance the readiness of community-based organizations. The RFP and successfully implement strategies over a number of years. 35 interviews were conducted with the 24 community-based organizations, including County/State SNAP-Ed leads, DPH staff, a community-based organization with the SNAP-Ed program.

Continued Advancement
<p><b>Describe plans for advancement of the health department's work in the particular area addressed by this Requirement.</b></p> <ol style="list-style-type: none"> <li>1. The recommendations that emerged from the SNAP-Ed formative research project included future actions that will enhance the readiness of community-based organizations to respond to the SNAP-Ed grant solicitation and successfully implement SNAP-Ed strategies, while also being feasible for DPH to implement within the current SNAP-Ed program structure which is determined by federal, state, and LA County contracting procedures. <u>Future plans</u> include continued efforts to secure and strengthen DPH partnerships with agencies throughout LA County that are most equipped to reach the low-income SNAP-Ed eligible target population.</li> </ol>

# Gaps



- **Some work we do may not be documented or written as an official plan or policy**
  - Ex: Provide an overarching plan, process or policy, to guide the development of health promotion activities across the department (D3).
- **Have a system to continuously revise our work, plans and protocols (D2,D5,D8, D9)**
  - Ex: How does the HD incorporate feedback from our partners, customers, or revise plans after events and outbreaks on a continuous basis.
  - Document how we communicate with other HDs, state or local, or how other agencies or stakeholders are involved in our process.
- **How QMS is used for decision making, guides budget relocation, and is communicated with leadership and the board (D9)**

# DPH Reaccreditation Timeline

- ✓ 1<sup>st</sup> PHAB Annual Report Due

**2018**



- ✓ Collect narratives & docs.
- ✓ Revise all documents
- ✓ Reconvene meetings to focus on gaps
- ✓ Finalize Population Health Outcome req.
- ✓ 3<sup>rd</sup> PHAB Annual Report Due

**2020**



- ✓ Jan. E-phab System is open for submission
- ✓ **Submit all documents by March deadline**
- ✓ PHAB reviews application
- ✓ **PHAB conducts virtual site visit**

**2022**

**2019**

- ✓ Review Domains & Requirements
- ✓ ID Domain Champions
- ✓ Assemble & meet with Domain Teams
- ✓ 2<sup>nd</sup> PHAB Annual Report due

**2021**

- ✓ Close gaps & submit narratives
- ✓ Final revision and approval of documents
- ✓ Begin uploading documents to the e-phab system
- ✓ 4<sup>th</sup> Annual Report is due



# Domain 9: Customer Satisfaction

## PHAB Domain

- 1 – Assess
- 2 - Investigate
- 3 – Inform & Educate
- 4- Community Engagement
- 5 – Policies & Plans
- 6 – Public Health Law
- 7 – Access to Care
- 8 - Workforce
- 9 – Quality Improvement**
- 10 – Evidence-Based Practices
- 11- Administration & Management
- 12 – Governance

*d. A systematic process for the regular consideration of **customer feedback** on programs and interventions for improvement of population based health promotion, protection, or improvement efforts.*

*Describe how customer feedback is gathered and analyzed. Describe how results are considered for quality improvement of policies, programs, and/or interventions.*

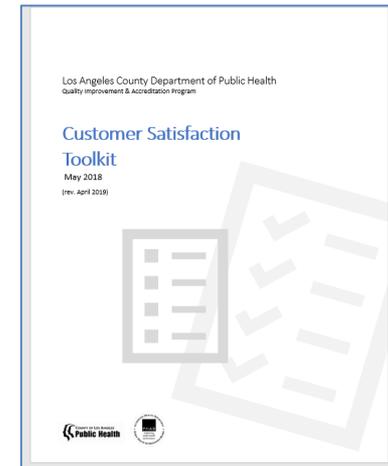
PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



# DPH Customer Satisfaction Initiative-Year 2

## Goals and Objectives

**The goal of the Customer Satisfaction Initiative:**  
to improve overall, and program-level customer satisfaction with DPH programs and services.



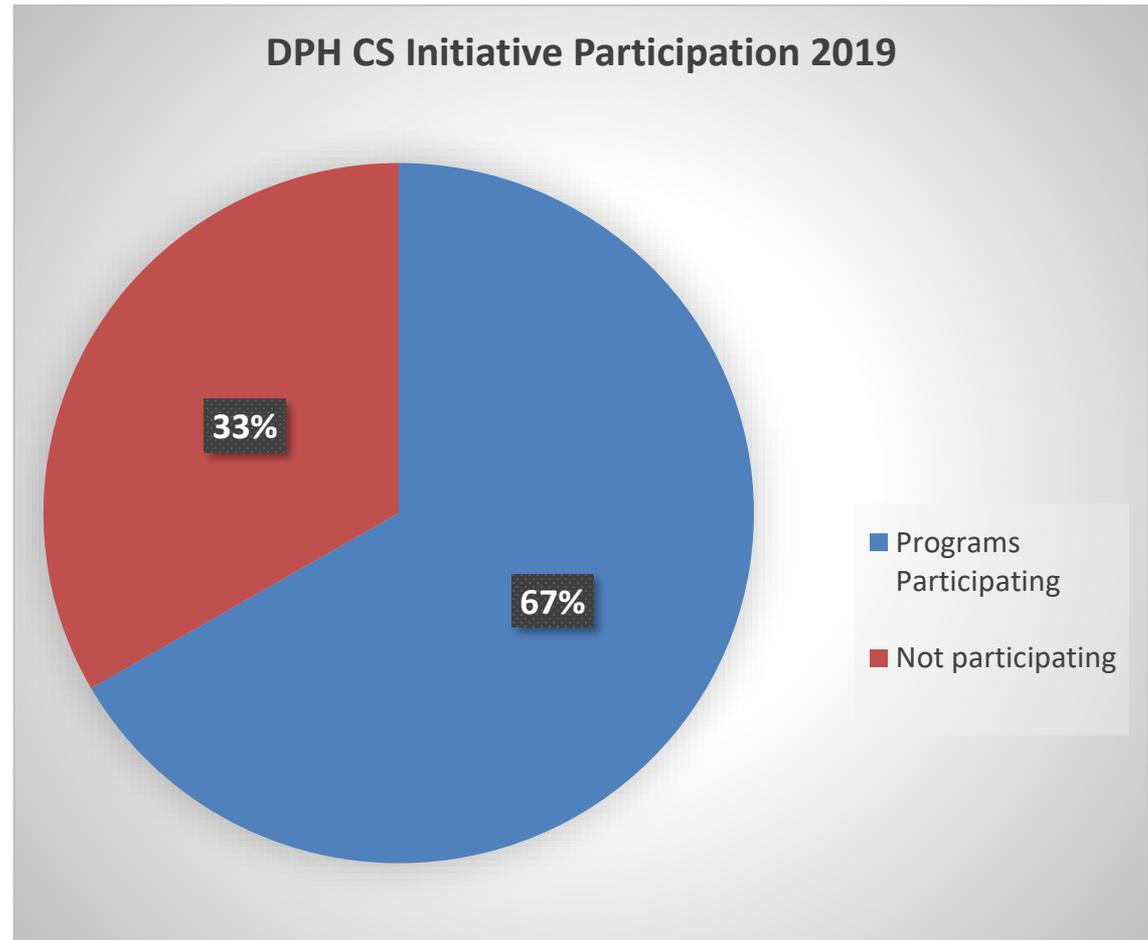
For 2019, there were 3 objectives:

- ✓ **Objective 1:** By July 31, 2019, all DPH programs will conduct a customer satisfaction survey, using DPH's core questions, with at least **TWO customer groups, one of which is the group surveyed last year.**
- ✓ **Objective 2:** By August 31, 2019, all DPH programs will **analyze** their customer satisfaction survey data.
- ✓ **Objective 3:** All DPH programs will **develop a Quality Improvement project** to address customer satisfaction results if needed.

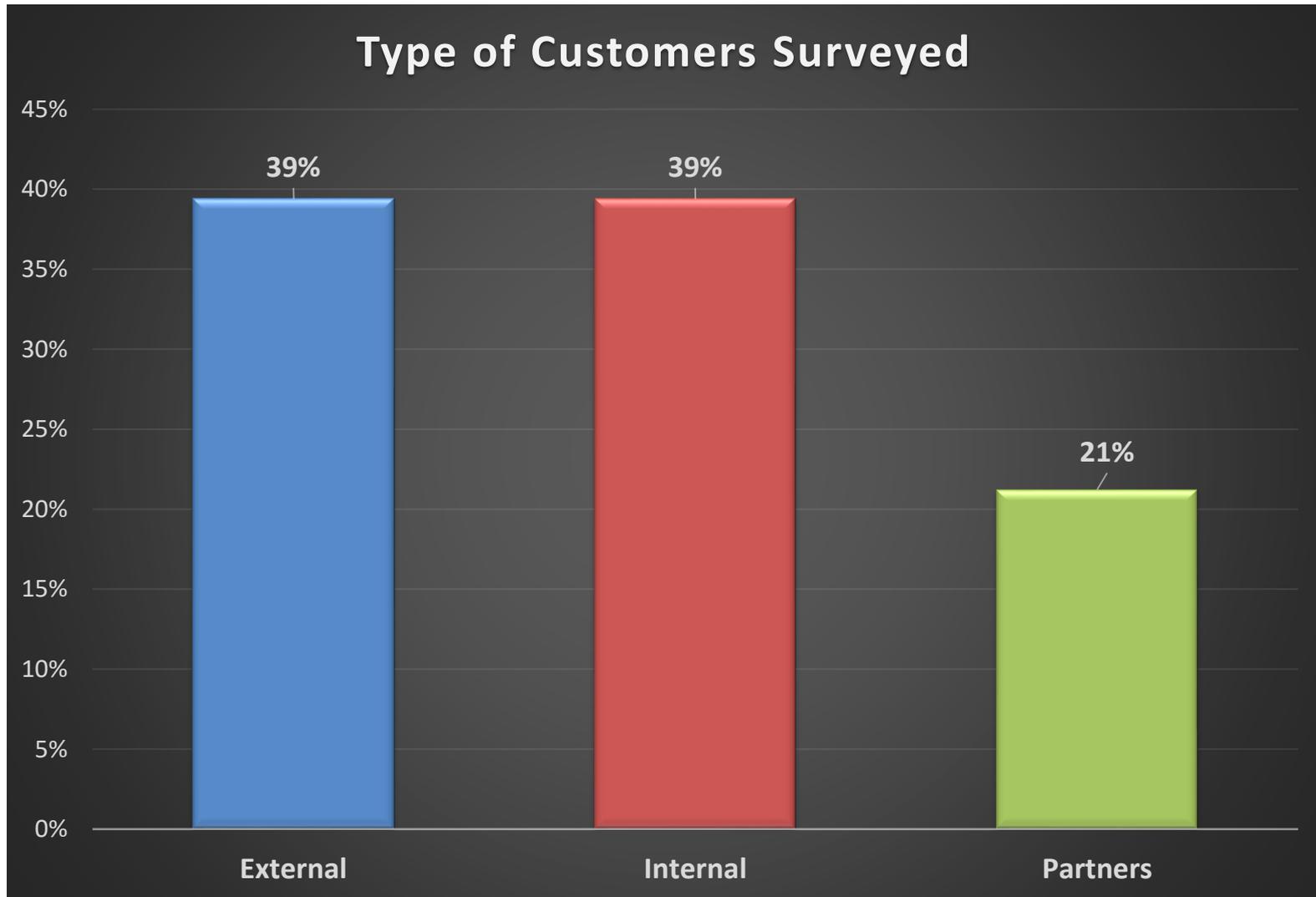
# DPH Customer Satisfaction Participation: 2019

<b>Total QI Programs</b>	<b>36</b>	<b>100%</b>
Participating	24	67%
Not participating	12	33%

- Customer Groups surveyed= 33



# Our Customers



# Our Customers



## Internal

DPH Directors  
Procurement Coordinators  
Facility Administrators  
DPH staff who fulfill Speakers' Bureau request  
Learning Net Customers  
Contract Liaisons  
QI Specialists  
Tuition Reimbursement customers  
Supervising Clinic Nurses, Area Nurse Managers, SPA Directors  
DPH Training Participants



## External

LAC Residents  
Community Event attendees  
Patients  
Training Participants  
HQ walk-ins  
Community organizations that submit requests for presentations, outreach fair tabling, or vaccine clinics  
Community Organizations  
CHDP Providers  
Contracted Agencies

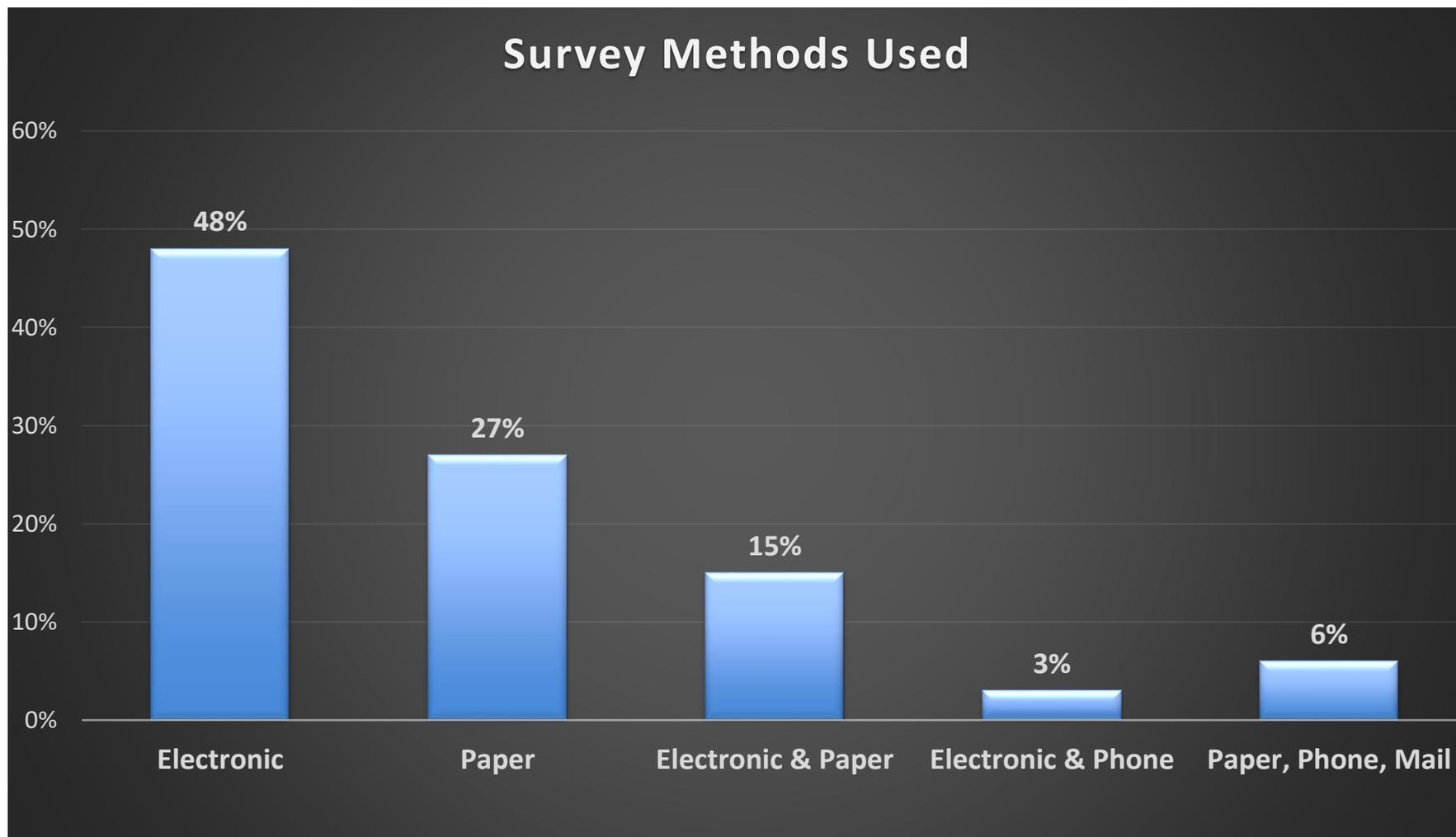


## Partners

Members of our task forces, workgroups, and committees  
Community Prevention & Population Health Task Force  
Public and Non-Profit VFC Providers  
DPSS Social Workers who receive trainings/presentations  
DPH contracted domestic violence (DV) shelter-based program and support service providers  
Partner organization from The Wellness Center  
Community Organizations



# Methods used to Survey



# How Satisfied were your Customers in 2019?

*“I was satisfied with my overall experience”= 97%*

*“I was extremely satisfied with my overall experience”= 90%*

**Response Rate: 44%**

Los Angeles County Department of Public Health  
Customer Satisfaction Survey for DPH Staff

Your DPH colleagues would like to hear from you! Please take a few moments to share your thoughts about **[PROGRAM NAME]** and the information and support services provided. Your participation is voluntary and your responses are confidential.

1. What information or support did you most recently receive from **[program name]**? Check (✓) all that apply.  
 option 1    option 2    Other: \_\_\_\_\_    N/A  
*(tailor the response options for your program)*

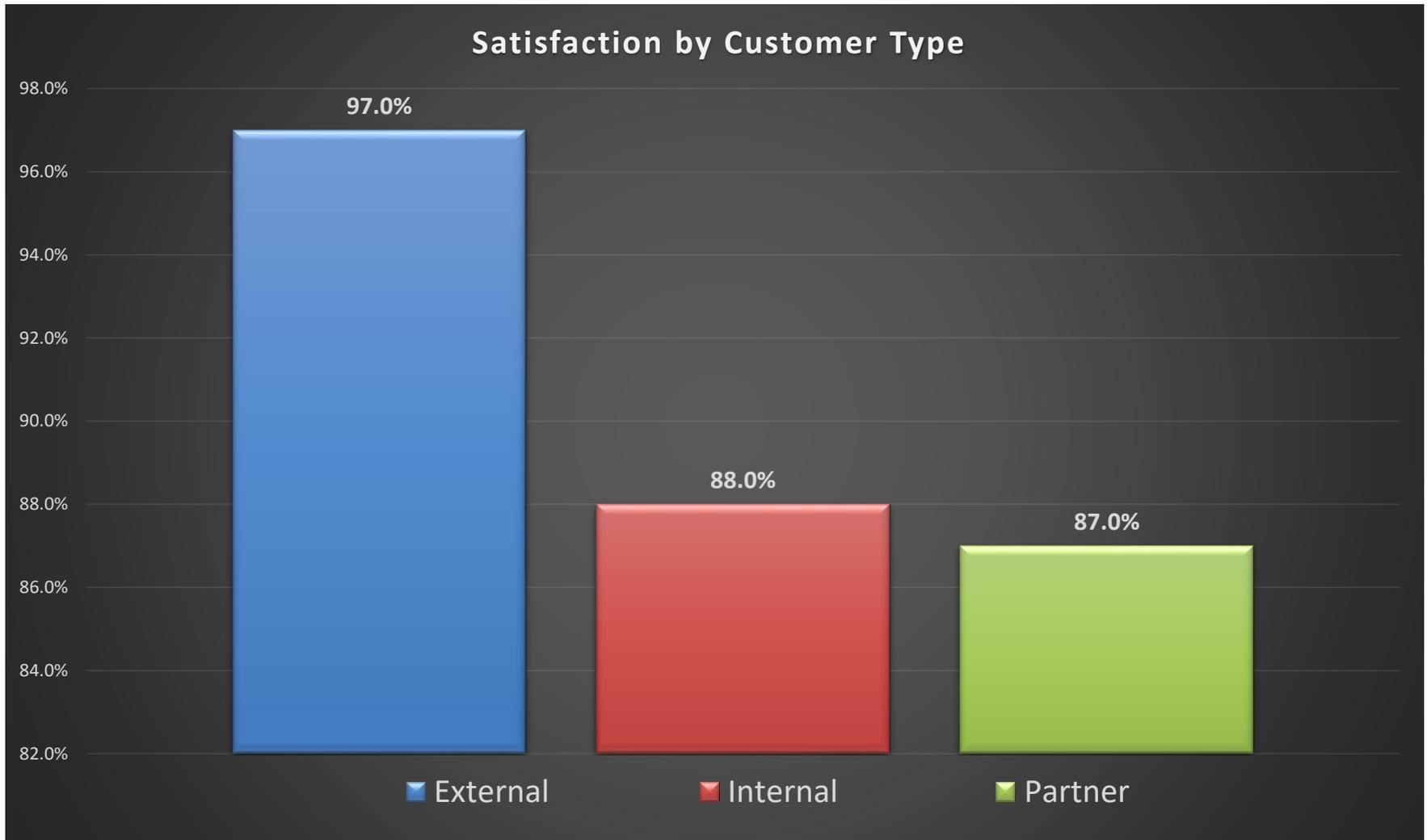
Using a scale of 1 to 10, please tell us how much you agree or disagree with the following statements:  
Circle your response.

	Strongly Disagree										Strongly Agree
2. I received the information or support I needed.	1	2	3	4	5	6	7	8	9	10	N/A
3. It was easy to find the information or support I needed.	1	2	3	4	5	6	7	8	9	10	N/A
4. I received assistance in a timely manner.	1	2	3	4	5	6	7	8	9	10	N/A
5. The staff communicated effectively.	1	2	3	4	5	6	7	8	9	10	N/A
6. I was treated with respect.	1	2	3	4	5	6	7	8	9	10	N/A
7. I was satisfied with my overall experience.	1	2	3	4	5	6	7	8	9	10	N/A





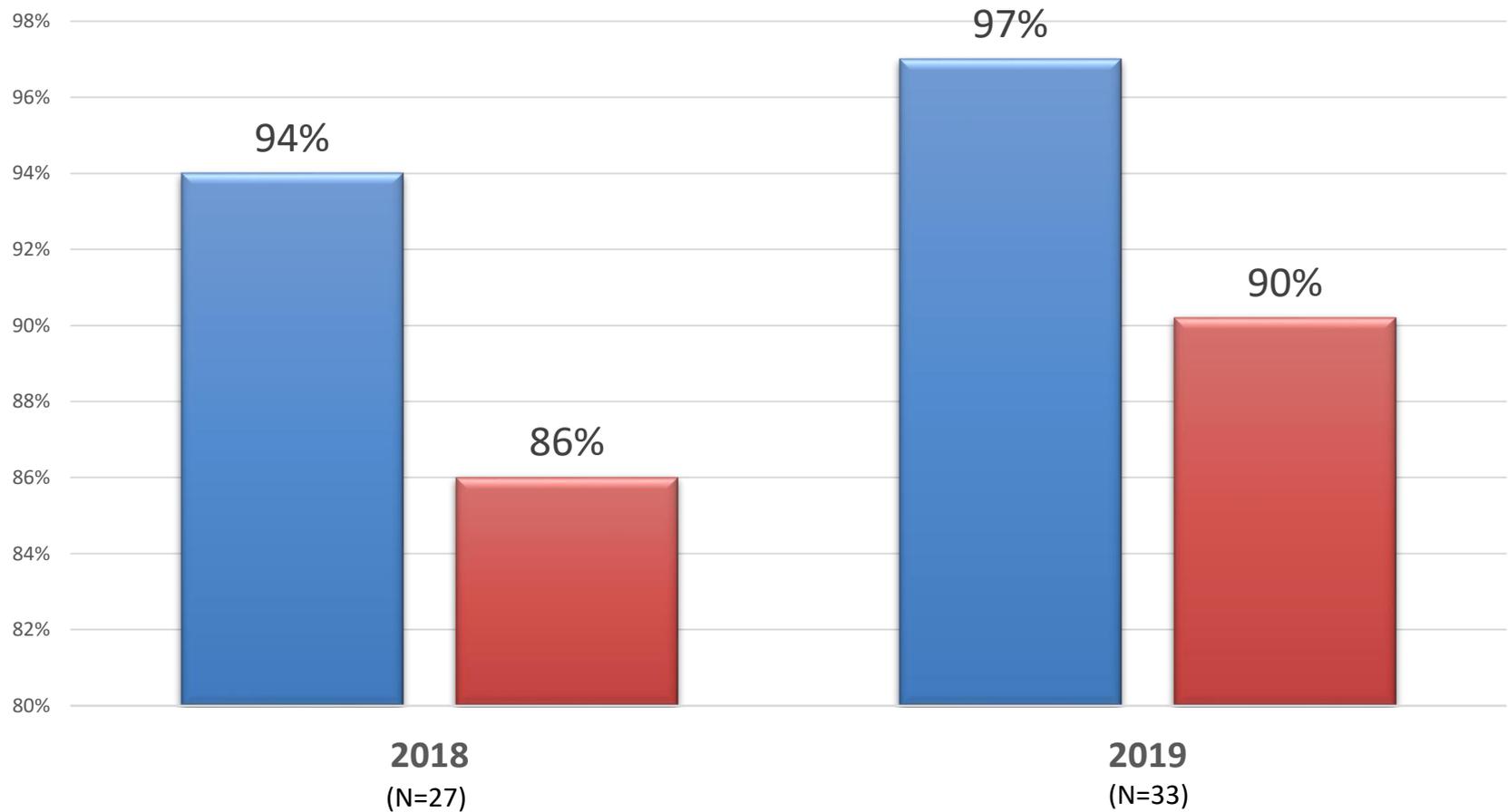
# Satisfaction by Customer Type





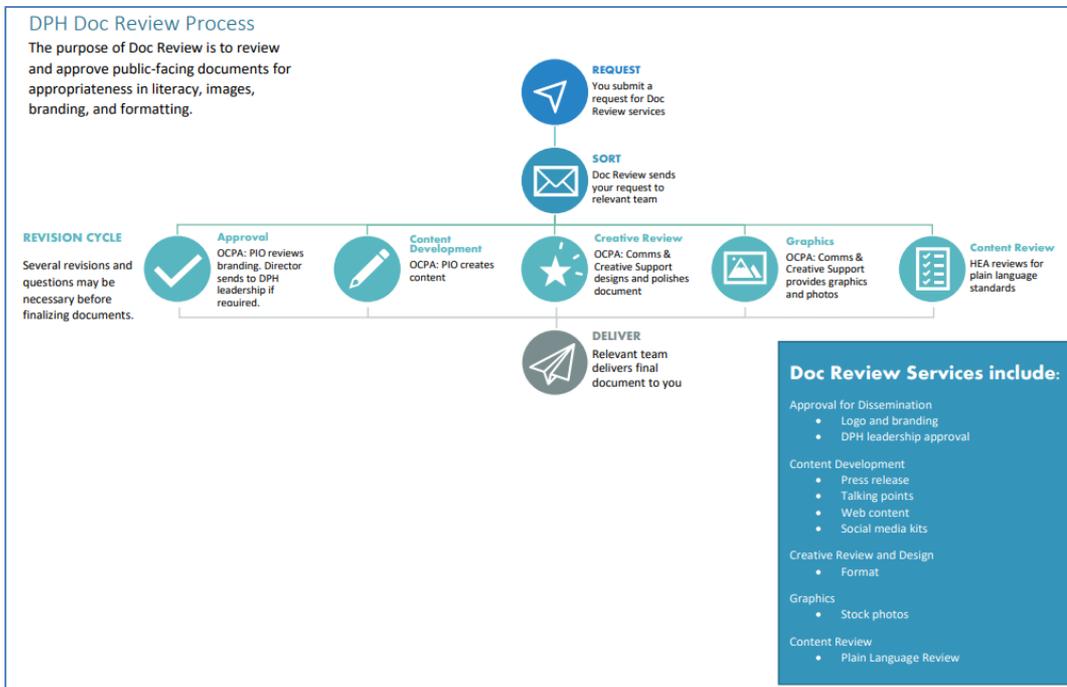
## DPH Customer Satisfaction 2018 & 2019

■ Overall Satisfaction    ■ Overall Extremely Satisfied



# What's Next?

- ✓ QI projects to address customer's concerns
- Ex: Doc Review Process






Los Angeles County Registrar-Recorder/County Clerk

DEAN C. LOGAN  
Registrar-Recorder/County Clerk

**PROJECT CHARTER:** DPH: Document Review Process

<p><b>PROBLEM STATEMENT:</b> The DPH Document (Doc) Review Process, housed in the Office of Communications &amp; Public Affairs, serves all programs in the department. Its purpose is to review and approve public-facing documents for appropriateness in literacy, images, branding, and formatting. According to the DPH Customer Satisfaction Initiative results, there is low customer satisfaction on the timeliness of DPH's Document (Doc) Review Process. The current average cycle time is 4.9 days. We believe that this may be a result of too many hand-offs (average 2-4.) Also, due to organizational changes, the staff involved in the process, as well as users, are unclear of how the process works.</p>	<p><b>BUSINESS CASE AND BENEFITS:</b></p> <p>The business case is that the delay in this process impacts the public's access to correct information from the department, which puts them at risk for being misinformed or misled. The delay also causes the programs waiting for the document to be reviewed to be less efficient and effective in doing their work.</p> <p>Potential benefits of doing this project include improving customer satisfaction, informing the public in a timely manner, and improving program compliance with the DPH branding policy.</p>
<p><b>GOAL STATEMENT:</b> The goals are two-fold:</p> <ol style="list-style-type: none"> <li>1) To reduce the cycle time by 20%</li> <li>2) To improve the percent of users satisfied with the response time for the Doc Review process from 25% to 50%, and to provide clarity to users and staff involved in the process.</li> </ol>	
<p><b>SCOPE IN:</b> -Processes between the Health Education &amp; Communication Programs - Current Doc Review Policy</p>	<p><b>SCOPE OUT:</b> -Staffing needs -Department-wide policies regarding branding and communications</p>
<p><b>TEAM LEADS</b> Health Education Administration &amp; Communication representatives: - Lindsey Pandes, Missy Eusebio &amp; Katie Martel</p> <p>Subject Matter Experts: Bernard Tolliver, Nicole Vick, Zena Yusuf</p> <p>LSS Team: Karen Swanson &amp; Disly Juarez</p>	



## DocReview

Submission Guidelines

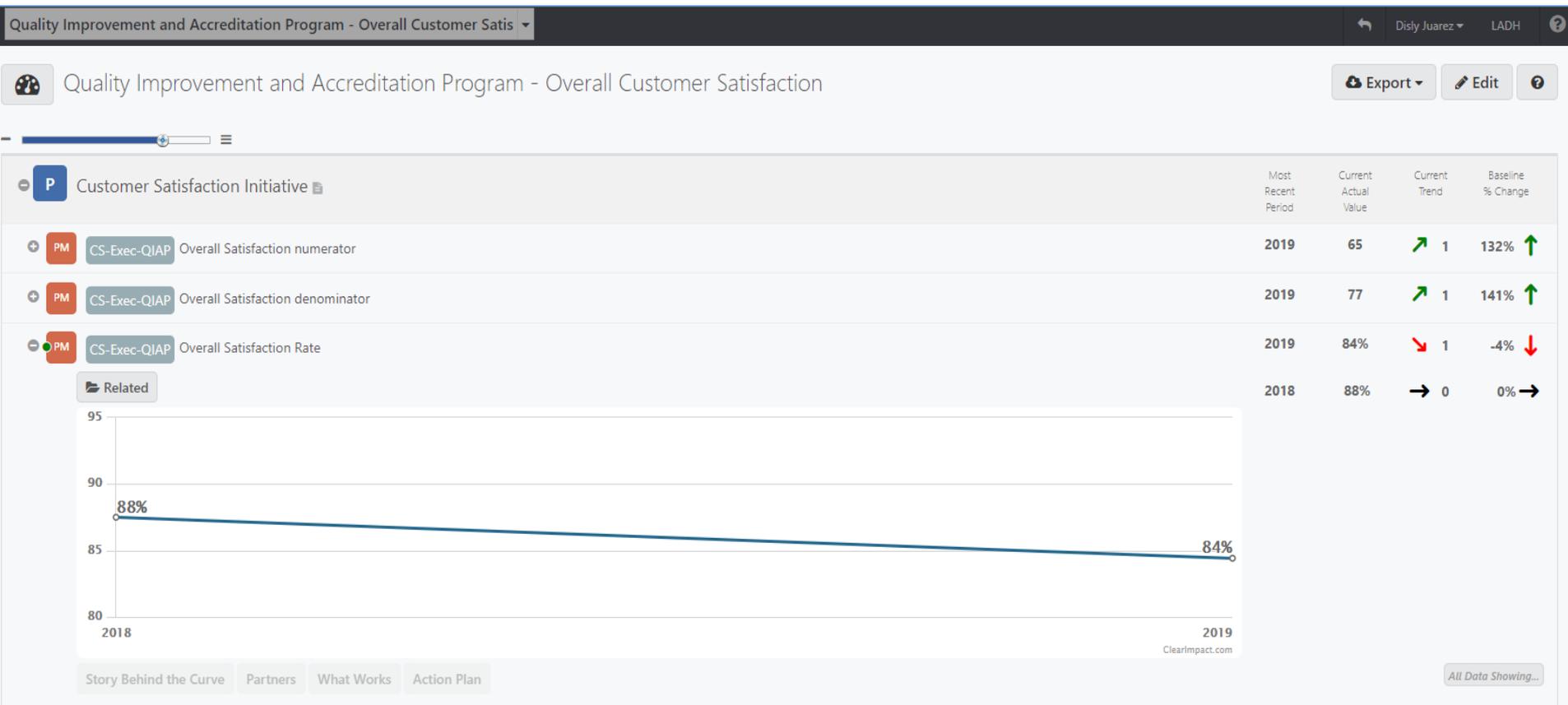


Contact Information:  
 Los Angeles County Department of Public Health  
 Office of Communications & Public Affairs  
 313 N. Figueroa Street, Room 500  
 Los Angeles, CA 90012  
 Phone: (213) 240-8144  
 Email: [media@ph.lacounty.gov](mailto:media@ph.lacounty.gov)



# What's Next?

✓ Track CS data annually in Clear Impact





**Thank You!**

**Any Questions?**

