PHAB

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Public Health Accreditation Board

National Public Health Department Accreditation

Readiness Checklists

ACCREDITATION READINESS CHECKLISTS
Revised July 2015

OVERVIEW

The Readiness Checklists are tools for health departments to use to determine if they are ready to apply for public health department accreditation. The Checklists itemize important capacities, documents, and activities that the health department should complete before they apply for accreditation. The Checklists assist the department in charting a course of action to prepare for public health department accreditation. PHAB recommends that health departments complete all of the tasks listed in the Checklists before registering on e-PHAB, PHAB's electronic information system.

The items included in these checklists are important activities. However, the lists are not all-inclusive for the preparation for accreditation and their completion does not ensure success in seeking accreditation. Each health department that is considering applying for national public health department accreditation needs to develop its own unique work plan to ensure that it is ready for national public health department accreditation. These Checklists can be helpful to health departments as they prepare that work plan.

The Checklists do not provide guidance for developing documentation. The Checklists do not assist the department in determining if it is in conformity with or meets any of the PHAB standards and measures.

There are four Readiness Checklists:

1.	Initial Accreditation Preparation Checklist	Determines eligibility and support for the health department seeking public health department accreditation.
2.	Plans and Processes Checklist	Determines if important, key, and major plans and processes are in place.
3.	Infrastructure Checklist	Determines if the health department has the capacities that are essential to being prepared for accreditation.
4.	Accreditation Process Checklist	Determines if the health department has the accreditation related processes in place that will help them as they seek public health department accreditation.

How to Use these Checklists:

- These checklists can be used to document progress made in preparing to seek national public health department accreditation.
  - o In completing the checklists for the first time, review each task and indicate the initial status.
  - o The health department may choose to review these checklists on a regular basis to track progress.
  - o In subsequent reviews, the "X" mark for the task may move into other columns until the task is complete or the item is established. The date of completion may be entered into the last column.
- These readiness checklists are for a health department's internal use only. The completed checklists are not to be submitted to PHAB.
- Refer to the PHAB Acronyms and Glossary of Terms, Version 1.5 for the definition of terms.

1. INITIAL ACCREDITATION PREPARATION CHECKLIST

	Questions	No	Yes	Date Completed
1.1	Is the health department eligible for PHAB accreditation? *(See guidelines for eligibility for accreditation in The Guide to Accreditation.)*			
1.2	Does the director of the health department support the health department's seeking PHAB accreditation?			
1.3	Does the appointing authority for the health department director (the person with the authority to hire the director of the health department) support the health department's seeking PHAB accreditation?			
1.4	Has the governing entity been informed about the key elements of the accreditation process, e.g., process, timeframes, required resources, fees, etc.?			
1.5	Does the governing entity support the health department's seeking PHAB accreditation?			
1.6	Has the director of the health department planned for the costs of applying for PHAB accreditation?			
1.7	Has the director of the health department completed PHAB's Online Orientation?			
1.8	Has the director of the health department read the Guide to Accreditation?			
1.9	Has the director of the health department appointed or designated an Accreditation Coordinator who will lead the accreditation process, department wide?			
	TOTAL			
All items in this Initial Accreditation Preparation Checklist of readiness should be answered "yes" before the health department moves forward.				

2. PLANS AND PROCESSES CHECKLIST

	Task	Responsible Staff	Not Yet Started	Underway	Complete	Date Completed
Prerequisites to submitting the application:						
2.1	The health department has an adopted current community health assessment (refer to Standard 1.1 for specific requirements).					
2.2	The health department has an adopted current community health improvement plan (refer to Standard 5.2 for specific requirements).					
2.3	The health department has an adopted current department strategic plan (refer to Standard 5.3 for specific requirements).					
Other important plans and processes that should be completed or near completion:						
2.4	The health department has in place or has substantially completed a department workforce development plan (refer to Standard 8.2 for specific requirements).					
2.5	The health department has in place or has substantially completed a department emergency operations plan (refer to Standard 5.4 for specific requirements).					
2.6	The health department has in place or has substantially completed an organizational branding strategy (refer to Measure 3.2.2 for specific requirements.)					
2.7	The health department has in place or has substantially completed a department quality improvement plan (refer to Standard 9.2 for specific requirements).					
2.8	The health department has a performance management system in place (refer to Standard 9.1 for specific requirements)					
TOTAL COMPLETED AND CURRENT						

*The development of these items requires significant time and effort. If a health department waits until they are in the middle of the accreditation process to develop them, the health department will not have sufficient time for their completion and will not be in conformity with the requirements of the Standards and Measures. For descriptions of these documents and processes and the elements that they should include, see the **PHAB Standards and Measures, Version 1.5**.*

	Task	Responsible Staff	Not Yet Started	Underway	In Place	Date Completed
3.1	Does the health department have collaborative working relationships with community organizations and representatives of the community (including other sectors of the community such as the educational system, parks and recreation, the faith community)?					
3.2	Is the health department an active member of community partnership(s) to address population health?					
3.3	Is there a collaborative working relationship with other levels of public health departments (Tribal, state, and local)?					
3.4	Does the health department work to identify and address health issues of populations that are at a higher risk for poorer health outcomes?					
3.5	Is there a regular process by which the governing entity is briefed on the health department's activities including progress in seeking accreditation?					
3.6	Does the health department have data collection, management, and analysis capacity?					
3.7	Does the health department have the software and scanning ability to convert Word docs to PDFs?					
3.8	Does the health department implement a process to ensure that all department documents are reviewed and, if needed, revised/updated?					
3.9	Does the health department implement a process to ensure that all department documents are dated?					
3.10	Does the health department implement a process to ensure that all department documents have evidence that the document is authentic to the health department (e.g., signature, logo, participant list, etc.)?					
					TOTAL	

It is recommended that all items in this checklist should be in place prior to submitting an application for PHAB accreditation. Please note that the items listed on this checklist are key, but that this list is not an all-inclusive list for the preparation for accreditation. Each health department that is considering applying for national public health department accreditation needs to develop its own unique work plan to ensure that it is ready for national public health department accreditation.

4. ACCREDITATION PROCESS CHECKLIST

	Task	Responsible Staff	Not Yet Started	Underway	Completed	Date Completed
4.1	Is the health department's Accreditation Coordinator prepared?					
	4.1 a	Has the Accreditation Coordinator completed the Online Orientation and received a PIN?					
	4.1 b	Has the Accreditation Coordinator carefully reviewed the Guide to National Public Health Department Accreditation?					
	4.1 c	Has the Accreditation Coordinator read the PHAB Accreditation Coordinator Handbook?					
	4.1 d	Does the Accreditation Coordinator have the authority in the department to make assignments and set deadlines?					
	4.1 e	Does the Accreditation Coordinator have access to the director of the health department?					
	4.1 f	Is the Accreditation Coordinator able to dedicate significant time to accreditation activities?					
	4.1 g	Does the Accreditation Coordinator have administrative support?					
4.2	Has the department designated an internal accreditation team?					
	4.2 a	Have the members of the accreditation team completed the Online Orientation?					
	4.2 b	Has the department accreditation team reviewed the Guide to National Public Health Department Accreditation?					
	4.2 c	Has the department accreditation team reviewed the PHAB webpage (www.phaboard.org) to become familiar with the accreditation resources available there?					

4.3		Has the department accreditation team developed a work plan with objectives, realistic timeframes and assigned responsibilities?					
	4.3 a	Has the department accreditation team discussed individual tasks and how to organize the work?					
	4.3 b	Does the department accreditation team have an internal communications plan to keep department staff and appropriate community partners informed of the department's progress in seeking accreditation?					
4.4		Has a process been developed to identify potential and select final documentation that is the most relevant for each measure and the best example for the department?					
	4.4 a	Have all of the Domains of the Standards and Measures been assigned to a member of the department accreditation team?					
	4.4 b	Does the department accreditation team have a process to involve other department staff in the identification or development of documentation?					
	4.4 c	Does the department accreditation team have a process to review and consider documents to potentially use as documentation?					
	4.4 d	Has the department accreditation team carefully reviewed PHAB's Tip Sheet on "Guidance on Appropriate Examples from Programs and Activities for Use as Documentation for PHAB Accreditation"?					
	4.4 e	Has the department established an internal electronic filing system to be a repository for required documentation and a method to organize documentation with a separate file for the Measures and Required Documentation?					
4.5		Has the department completed a "self-assessment" to review the standards, measures, and required documentation to determine where documentation is present and where documentation needs to be developed/updated?					

	4.5 a	Has the department reviewed the timeframes required for each piece of documentation and ensured that documents meet them? (Documents must be dated.)				
	4.5 b	Has the department developed and begun implementation of strategies to address gaps in documentation?				
4.6	Has the department considered where outside technical assistance is needed by the health department in order to have documentation that is in conformity with PHAB Standards and Measures?					
	4.6 a	Has the department considered how and where needed technical assistance might be accessed to assist the health department be in conformity with PHAB Standards and Measures?				
	4.6 b	Has the department sought and secured technical assistance to address the development or plans, processes, protocols, etc. that are required in the Standards and Measures?				
					TOTAL	

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