

Overview

For nearly eight weeks, PHAB conducted a public vetting period for draft Version 2022 Standards & Measures. We received almost 2,000 responses about specific measures and approximately 700 comments. We very much appreciate health department staff and other public health practitioners for providing their feedback. PHAB staff will work with the Accreditation Improvement Committee to incorporate that feedback into final versions of the Standards & Measures for Initial Accreditation and Reaccreditation, to be approved by the Board of Directors in February 2022.

For the drafts of the Standards & Measures that were used for vetting, as well as a list of Frequently Asked Questions and other resources, please see: <https://phaboard.org/version-2022/>.

Data Collection

On September 14, 2021, PHAB launched the public vetting for the draft Standards & Measures Version 2022 for both initial accreditation and reaccreditation. The documents presented for vetting reflected feedback gathered over the course of several years through public health practitioners, researchers, and national partners under the oversight of the Accreditation Improvement Committee. Prior to releasing the drafts for public vetting, PHAB staff shared selected draft measures with national and state partners who represent various customer groups. Their feedback was incorporated in the drafts that were shared publicly. The vetting was primarily conducted via a survey where participants were encouraged to provide feedback about as many (or as few) measures as they wanted. In addition, PHAB collected feedback about select measures using polling software during the APHA Annual Meeting and through online polls on our LinkedIn page. The vetting opportunity was disseminated broadly through: the PHAB newsletter; social media; newsletters of partner organizations; a webinar; and outreach to accredited and in-process health departments, site visitors, and think tank participants. Vetting was formally closed on November 7, 2021.

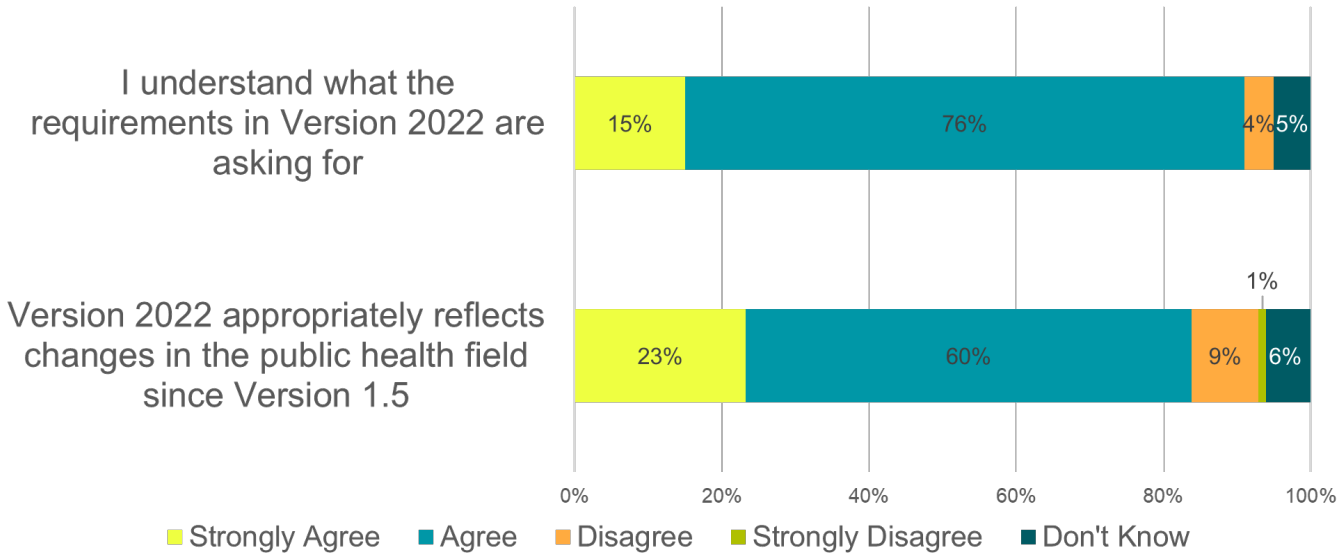
Responses

Across the data collection mechanisms, PHAB received approximately 2,000 responses about individual measures and 700 comments. Among survey takers, nearly one-third of respondents indicated that they were submitting the survey on behalf of a group. Respondents most commonly identified themselves as being from local health departments, followed by state health departments. PHAB received more responses to the survey about the reaccreditation Standards & Measures than the survey about initial accreditation.¹

Overarching Feedback

To understand how well respondents felt the Standards & Measures met several goals of the revision process, the vetting survey included two overarching questions. As shown in the graph below, more than 90% of respondents agreed that they understand what the requirements in Version 2022 were asking for and 83% agreed that Version 2022 appropriately reflects changes in the public health field since Version 1.5.

¹ The vetting was conducted anonymously. Respondents were instructed that they could complete multiple surveys if, for example, they wanted to respond about different measures at different points of time. In addition, it is possible that the same individuals responded to multiple types of data collection (e.g., participated in the online survey and the APHA session). Furthermore, respondents were encouraged to review the Standards as a group and submit their responses in one survey. As a result, it is difficult to provide specific information about the number of respondents or to break it down by organization type.

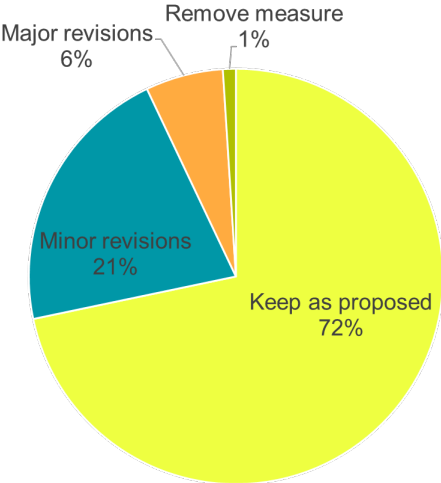


For each measure, respondents were given the option to indicate if PHAB should:

- Keep Measure as proposed
- Make minor revisions
- Make major revisions
- Remove Measure

As shown in the graph below, across the nearly 2,000 responses, nearly three-quarter (72%) said to keep as proposed, with another 21% recommending minor revisions.

Nearly 2,000 Responses About Specific Measures



In reviewing the approximately 700 comments that were provided in response to specific measures or the overarching questions, approximately 100 included compliments. 75 raised concerns about the ability of health departments to meet the measures. Those concerns were commonly centered around the capacity of smaller health departments or the ability of health departments to meet the requirements due to the COVID-19 response. A smaller number of those

comments raised concerns about other constraints to meeting requirements (for example, not having the authority to meet them).²

Implications for Revisions

With review and input from the Accreditation Improvement Committee, PHAB staff is reviewing all the comments to identify potential revisions to the draft Standards & Measures. The number of comments per measure ranges between 0 and 35 and, for two-thirds of the measures, we received 5 or fewer comments.³

Based on our review of those comments, we anticipate that the majority of the changes will be clarifications to the requirements or additional information provided in the guidance. However, we anticipate that for select measures we will be considering changes that may be more substantive. Below we highlight some of the areas where we anticipate specific conversations with the Accreditation Improvement Committee about potential revisions:

- **Data:** We received a number of comments about the requirements related to data collection, sharing, and analysis in Standards 1.2 and 1.3. We will be reviewing those to determine what requirements appropriately reflect health department capacity and the current needs for public health data infrastructure.
- **Relationship between state and local/Tribal health departments:** In particular, we will review the implications for the data-related Measures.
- **Equity:** As outlined [here](#), Version 2022 has a specific emphasis on equity-related concepts throughout each domain. Vetting feedback about these changes was very positive. There may be some opportunities for greater clarity, however, in particular with regard to Reaccreditation Measure 4.1.1.

As PHAB staff continue to review vetting feedback, additional areas of conversation with the AIC may be identified. We anticipate the final Standards & Measures will be approved by the Board and released to the public in the first quarter 2022.

² 17% of the comments about capacity came from a single respondent who raised capacity concerns related to a many specific measures.

³ If the Measure is identical in the proposed Standards & Measures for initial accreditation and reaccreditation, the data were combined. If the requirements differ between the two versions, we kept the data separate. For that reason—and because respondents were given the flexibility to respond to whichever measures were of greater interest and because only selected measures were included in the APHA session and the LinkedIn polls—the number of responses about each measure varied widely.