



## ACCREDITATION MOCK SITE VISIT

June 26-27, 2017

### DOMAIN 1: ASSESSMENT OF THE HEALTH OF THE POPULATION THE DEPT SERVES

1.2.1

1. Talk about protocols for the analysis of data of multiple health conditions from multiple sources
  - a. Collection, review and analysis

1.2.2

2. What types of partners do you work with on outbreaks of communicable diseases and environmental PH issues? Please describe how (and which) partners are engaged in these efforts.
  - a. Name a sampling of partners
3. In addition to the onboarding process, please describe your training process for those who use surveillance sites e.g. NEDSS/EpiTrax (continuing education)
4. How are surveillance data distributed?
  - a. Show you are being proactive via listserv, social media promotion, news release, media interviews, etc. and not being reactive or passive (PHAB considers posting to website passive)

1.4.1

1. Describe the process for programs to access data, consider their implications, and adopt changes in policy or programs

#### **1.4.3 CRITICAL**

1. For required documentation 1, please describe how the potential use of IBIS as a data collection/analysis tool is communicated to local and tribal partners
  - a. Please include the tribes and local; how UDOH is communicating IBIS improvements to locals and tribes; mention Tribe DSAs and consider uploading the DSAs to ePHAB

1.2.1, 1.2.2, 1.4.3 please bring all SMEs to the actual site visit



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### DOMAIN 2: INVESTIGATE HEALTH PROBLEMS AND ENVIRONMENTAL PH HAZARDS

2.1.1

1. Please walk through a communicable disease investigation, starting from a physician identifying a communicable disease. Is there a written protocol?
2. Describe how people who have roles in the implementation of protocols are informed of their responsibilities

2.1.2

3. Describe the process used and how the agency conducts multiple, simultaneous investigations of infectious disease. Example?

**2.1.5 CRITICAL**

4. Describe how you monitor timely reporting of notifiable reportable diseases, lab test, results, and investigation results.
  - a. In RD1 there was a 12 pg report submitted, but need a better feel for how UDOH meets that requirement
  - b. Please talk about the individual steps that go into the monitoring and timeliness. Is there anything that gives you alarms or notifications (BioSense, Essence systems are good examples)
  - c. What would the times be?
    - i. Real time alerts as soon as various incidences go above a threshold
5. RD2: Health department notifying CDC- please describe this process
6. How do you communicate with surveillance partners on matters that are urgent and need their attention?

2.2.2

7. Please describe the process for determining when an enviro PH hazard would require an All Hazards Emergency Operations response

**2.2.3 CRITICAL**

8. What is the process for an event that requires an AAR?
9. Please describe if and when the Homeland Security Exercise and Evaluation Program guidelines are used? All recommended improvements for AAR? Are you using the AAR to improve the EOP?

2.3.1

10. Please explain how the HD insures 24/7 oversight and access to support services in emergencies

11. Describe the process for provisions for the health department's 24/7 emergency access to epidemiological and environmental PH resources capable of providing rapid detection, investigation, and containment/mitigation of PH problems and environmental PH
12. For the contracts/MOU's/call down lists- how often are these updated and how do you disperse the information among staff?

2.3.2

13. Tell us about the labs that the department uses and the department's working relationship with them beyond the state's lab

### 2.3.3 CRITICAL

14. Describe how staff are identified in the COOP and how they access info in the COOP

2.4.1

15. Communicating with outside personnel can be difficult- is there a frequent change in those people? How do you keep them updated?
16. Process for communication w/stakeholders and how this communication is different in an emergency situation

2.4.2

17. Describe the frequency the UNIS is tested and how it is tested after hours

2.4.3

18. Describe your relationship with media and how emergencies are communicated with the public



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### DOMAIN 3: INFORM AND EDUCATE ABOUT PH ISSUES AND FUNCTIONS

#### 3.1.2

1. During health promotion activities, what considerations are made in selecting a program for a specific community or population? Describe the process used to gain participation from target audiences
  - a. Try not to repeat what is already in the ePHAB system, as those documents were already reviewed and the site visitor is familiar with what has been submitted. The interviewer is asking in order to find a missing component. In this case, the missing component is the target audience. Was it schools? Geographical? Stakeholders?

#### 3.1.3 CRITICAL

2. Please describe the process you use for analysis of health equity and efforts to address health equity from a population perspective. Describe the inclusion of health equity considerations in internal policies and procedures
  - a. Specifically referring to RD1

#### 3.2.1

3. How are community concerns that would impact UDOH's operations, policies, or processes presented to the HD?
  - a. When the public reaches out, how is that information communicated through the HD?

#### 3.2.3 CRITICAL

4. You provided a marketing and media policy that stated the purpose was to ensure accurate, timely, and effective communication. Please describe the process to do this. How are the messages coordinated with community partners to promote unified PH messages?
  - a. Nice job talking about the process first, and then providing an example of that process. This is a good strategy in answering any PHAB question.



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### DOMAIN 4: ENGAGE WITH THE COMMUNITY TO IDENTIFY AND ADDRESS HEALTH PROBLEMS

1. What do you think your strengths/opportunities for improvement are in this domain?
  - a. Dr. Babitz's example was the best example of health equity within the state of Utah that was given to Susan. Excellent idea to bring up frontier populations, tribal inclusion and challenges.
2. What strategies do you use to keep your community partners involved and engaged?
3. What particular challenges do you have with the diverse populations of the various counties?
  - a. We need to talk more about the difficult to reach populations; there is a real pointed effort to get the states and locals to reach out to the tribal communities
4. How do you bring in a new partner? Are there groups that are particularly difficult to engage and what strategies do you use in these cases?
5. Do you have a systematic process when there's a new kid in town? What is done to bring them up to speed?

#### 4.1.1

6. Describe your working relationship with your partners?
7. How often do those you view as partners attend meetings or participate in coalitions? Are there particular partners you're struggling to get to the table, or are they usually participating?

#### 4.1.2

8. What models of community engagement do you use? How do you provide consultation, TA, etc. to other groups or partners about this model?

#### 4.2.1

9. How do you involve community members/partner organizations/local/government, etc. in the developments of various materials/strategies?
  - a. Be sure to explain that UDOH involves the community before a policy/strategy has been developed, as opposed to after the fact



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### DOMAIN 5: POLICY AND PLANS

#### 5.1.1

1. Can someone talk about how UDOH tracks legislation with public health impacts?
  - a. Describe the system Sheila uses to track (Google Sheets); also bring up the daily agenda and weekly report sent to governor's office
  - b. Who would take charge if Sheila was away? Must be structured process for backup.  
Answer that Dr. Miner would appoint someone from ELT and that Sheila's system is very intuitive- the appointee would be able to pick it up and be able to continue the work.  
Looking for a process that not just one individual holds the key to
2. How do you keep staff informed of relevant legislation?

#### 5.1.2

3. How do you advocate for or against legislation with health impacts to the governing entity?
  - a. Dr. Miner attends weekly meetings with Governor's Cabinet to go over legislation
4. When LHDs and the SHD are looking at legislation with PH impacts, the state health department has a closer niche to legislature than locals. How are you helping LHDs with pieces of legislation that may impact them?
  - a. What is the local health association? How active is it in the legislature?
5. How do you encourage or engage community input in legislation?
  - a. Really liked that this was answered at the programmatic level

#### 5.1.3

6. Do others come to the HD and seek advice on policy? If so, who and how?
7. What is the process to meet? How do they contact you? Do you contact them?

#### Standard 5.3

8. To validate something that was mentioned earlier: how were staff involved in the planning (not implementation) of the Strategic Plan?
  - a. Important to include not only managers and leadership, but also line staff; trying to see that staff at all levels were involved in the process
  - b. How was staff engaged?
    - i. Retreats, workgroups
  - c. How were the priorities chosen?
  - d. It is important to talk about how the SMEs were involved and how they brought data to the table at some point; make sure to mention qualitative and quantitative data were used

5.3.1

9. Validate who was the governing entity?

5.4.1

10. Describe the contribution of community partners in planning and responding to disasters
11. In RD3 of this measure, it requires a collaborative review of the All Hazards Emergency Operations. Please describe the collaborative review process.
  - a. This question is about the All Hazards Emergency, not the PH Emergency Op plan
  - b. Describe the mass email process

5.4.2

12. Describe the process for the review and revision of the Public Health Emergency Operations Plan
  - a. Find an SME who is familiar with this one
  - b. Describe that AARs drove the changes for this plan

Feedback was that 5.4.1- All Hazards & 5.4.2-Public Health need more preparation regarding conformity

Add Dr. Nakashima or a representative from BOE who would have expertise in 5.4.2



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### DOMAIN 6: ENFORCE PUBLIC HEALTH LAWS

1. What do you think your strengths and opportunities are in terms of enforcing public health laws?

6.1.2

2. How is the governing entity engaged in the process of review and revision of public health laws?
3. Please describe how the governing entity or elected officials utilize the department's Analysis of Legislation form
4. Describe the process staff use to inform the need for updates to current or proposed laws

6.2.1

5. Describe efforts used by staff to educate regulated entities regarding their responsibilities to achieve full compliance with PH laws

6.2.3

6. Describe the efforts used by staff to educate regulated entities regarding their responsibilities to achieve full compliance with PH laws

6.3.2

7. Describe if there are prescribed timelines for subsequent inspections after failed inspections and how these are built into logging systems
8. Describe the process whereby the HD would use your log systems to know when the expected inspections should take place, and how log systems can generate statistics about inspections that have not been performed on timely basis

#### 6.3.4 CRITICAL

9. Do you have a formal process for analyzing trends related to enforcement responsibilities and intervening when needed? Describe

6.3.5

10. Describe protocol for notifying the public of enforcement activities

Please give examples of formal trainings in 6.2.1/6.2.3

Please explain what rules are to the site visitor. Are these laws? (This is confusing to outsiders, especially since the site visitors come from different PH and governing structures)



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### DOMAIN 7: STRATEGIES TO IMPROVE ACCESS TO HEALTH CARE

#### 7.1.1

1. With regards to sharing data across the public healthcare system, please explain more about the partners and stakeholders. What role would they play in the planning to improve access to healthcare services?
2. Please identify the positions or background of who (positions, agencies) it was shared with, and explain how the sharing was useful for planning (RD2, Ex. 1)
  - a. Described partners and stakeholders well. Please make sure to also mention which data, and how the data were/are shared in the arena of *access to care*
  - b. In 7.1.1, the intent is to establish that you have an existing collaboration that works on access to care. Do you have stakeholders involved in this process? Do you have outside entities bringing outside data to the table? Are these data being used to improve access to care?
    - i. Looking for an overarching, system-wide collaborative- perhaps describe an oversight committee (e.g. Office of Health Equity) that takes a look at access across the state as a whole. Then, describe the sub-workgroups that emerged from this oversight committee (e.g. minority, rural, tribal, underserved, and low-income)

#### 7.1.2

3. Please describe the process used for the identification of underserved or unserved populations and their barriers to access to care (1 process, 1 report)
4. What are the most significant gaps causing lack of access to care and services in your state?

#### 7.2.1

5. Describe how the department is working with partners to implement strategies to improve access to care
  - a. Important to keep in mind things that are under PHAB's scope of authority- Medicaid, medical home, and oral health are not under PHAB's scope; try to get away from direct care or clinical care and remain in population health areas
6. How are the strategies presented connected to the coalition you submitted in 7.2.1 RD2?
  - a. Connect to what was submitted in 7.1.1 and make sure to loop in tribes

#### 7.2.2

7. Describe a collaborative implementation of strategies to improve access to services for those who experience barriers



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### DOMAIN 8: MAINTAIN A COMPETENT PH WORKFORCE

#### 8.1.1

1. How does the department build relationships to promote future public health workers?
  - a. Internships, job fairs, recruitment fairs were all great examples for this question

#### 8.2.1 CRITICAL

2. Describe the process used to involve staff in the development of the Workforce Development Plan to ensure the plan addresses the training needs of the staff and the development of core competencies
  - a. Explain Council on Linkages' self-assessment questions were adopted
  - b. Explain the Core Competencies for Public Health Professionals survey results were used to develop the Workforce Development Plan
3. Please describe the self-assessment process
4. Discuss ongoing efforts of the HD in relation to workforce development
5. How are staff made aware of training requirements that are identified in the Workforce Development Plan? Training opportunities?
6. Who is the champion of the Workforce Development Plan?
  - a. A workforce development committee is recommended

#### 8.2.3 CRITICAL

7. Please describe how the department builds capacity to assess and improve competency of its workforce through workforce assessment and planning



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### DOMAIN 9: EVALUATE & CONTINUOUSLY IMPROVE PROCESSES, PROGRAMS & INTERVENTIONS

#### 9.1.1

1. Who are the members of your QI Council?
  - a. Who chairs it? Does the chair report to ELT?
  - b. Great to mention every bureau was represented. Please describe whether line staff, managers, and leadership were represented by the group. Additionally, the site visitor will be asking to see if the size of the council is sufficient for the department size.
2. What's the role of the ELT in the QI council?
  - a. The goal here is to link Performance Management Plan to Strategic Plan
  - b. If QI is not part of ELT, where does a communication exchange take place regarding data?
  - c. Be sure to align ELT with QI council. Connectivity must be evident. This may be shown by giving an example of the QI Council doing a project that's driven by data from ELT and vice-versa
3. How are performance expectations and the mission and vision of the HD communicated to the staff?
4. Discuss the staff's involvement in QI efforts
5. What is the expectation for staff with regards to quality improvement?
  - a. Suggestion: engage staff in all QI

#### 9.1.2

6. Describe your performance management system

#### 9.1.3

7. Please describe the process of monitoring and assuring the performance management system and the quality improvement process. How are goals and objectives monitored and evaluated?

#### 9.1.4

8. Regarding the collection of customer satisfaction surveys, how are the results communicated to staff? How are results communicated to customers?

9.2.1: Suggestion: find documents to strengthen; weakest area

It appears documentation is lacking the necessary mechanism to track progress at the organization level



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### DOMAIN 10: CONTRIBUTE TO AND APPLY THE EVIDENCE BASE OF PH

10.1.1

1. How are evidence-based and promising practices identified? Is there a process to tailor them to your community or target population?

10.1.2

2. Describe the process used to promote and support innovation in PH practice and research
  - a. Tribal gestational diabetes example was strong
  - b. Opioid innovation example was strong

#### 10.2.2 CRITICAL

3. Describe how the HD has access to expertise to analyze current research and its PH implication
  - a. Recommended to submit MOUs, credentials, internal and external expertise examples; technical assistance could be used in a broader sense for this measure

#### 10.2.4 CRITICAL

4. Describe an example of providing consultation, technical assistance, advice, direction, or guidance to members of the PH system (i.e. health system organizations) in the application of relevant research or evidence-based and/or promising practices
  - a. Allyn's infectious disease guide was an excellent example, especially since it connects with things previously mentioned in other domains



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### DOMAIN 11: MAINTAIN ADMINISTRATIVE AND MANAGEMENT CAPACITY

#### 11.1.1

1. Has the organizational chart been updated since you submitted documents?

#### 11.1.2 (CRITICAL)

2. How often is training conducted on confidentiality and cybersecurity?
3. How is this tracked?
4. How do you ensure individuals are following UDOH's policy regarding confidentiality and cybersecurity?

#### 11.1.3

5. UDOH submitted an analysis of race, ethnicity and spoken languages using various data sources. How has the HD used this analysis in program development?
6. How were results of the analysis shared with staff and with stakeholders and with governing entities?

#### 11.1.4 (CRITICAL)

7. Does the HD employ contractual staff? How are those contracts developed?
8. How does the department inform staff of where to access the HR policies and procedures?
9. How are employees informed about HR policies and procedures, or changes in policies and procedures?
10. How are contract staff made aware of these policies and procedures? Are there audits that occur to ensure this is happening?

#### 11.2.1

11. Has the department had any audit exceptions or adverse program reports? If so, where and what was done to rectify?
  - a. The audit exception must be within the realm of population health (Medicaid isn't within the realm of PHAB. Immunizations is a great example)
12. The HD submitted evidence of a couple grant proposals. How do you monitor progress on the grant deliverables? Do you have evidence of a report of progress and expenditures?
13. From time to time, programs may fail to meet a performance goal. How has the HD report a performance measure that falls short to a funding entity?
  - a. Heather's discussion of barriers and steps taken to overcome those barriers was an excellent example
  - b.

What are your strengths and weaknesses? (Since this is a smaller domain, this is likely to be asked.)



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### DOMAIN 12: MAINTAIN CAPACITY TO ENGAGE THE PUBLIC HEALTH GOVERNING ENTITY

#### 12.1.1 CRITICAL

1. If the legislature passes new laws, or if UDOH adopts new regulations, what processes do you have in place to track these changes and implement them in a timely manner?
2. What processes do you use to keep track of your mandates and authorities, to ensure governing entity compliance on a continuing basis?

#### 12.1.2 CRITICAL

3. Describe the role of the governing entity in relation to the HD

#### 12.2.1 CRITICAL

4. Describe the process used to inform the governing entity of the responsibilities of the PH department
  - a. Orientation process is an acceptable answer

#### 12.3.1

5. How does UDOH raise issues to the governing entity?

#### 12.3.2

6. How does UDOH keep track of governing entity priorities and actions taken? Do you do this on a regular basis?
  - a. Looking for a tracking *process*, not emails or communications

#### 12.3.3 CRITICAL

7. How is the governing entity involved in planning for future health department's quality improvement efforts?
  - a. When answering, please discuss the PHOM Report and identify who is looking at it, how they are using it, and how they are following up on this
  - b. Healthiest People is a strong example as well
8. Discuss use of story boards- are these shared with others? If so, and how?

Clarity is needed. From the reopened measures, it appears that PHAB is quite confused about Utah's HD and governance structure (how the Governor's Office, GOMB, HAC, UDOH, EDO, ELT, SLT fit together). It was recommended for Dr. Miner to present these details in the Entrance Conference. Advised to add Sheila to SME panel.