

PHAB Accreditation Impact Series

Topic #2: Accreditation increases multi-sector partnerships to promote health in communities.

What has PHAB Learned about Accreditation's Impact on Multi-Sector Partnerships to Promote Health?

Read health departments' descriptions about how accreditation has helped them engage with partners to improve the health of their communities:



PHAB's CHA and CHIP standards strengthen DuPage County Health Department's commitment to "Impact DuPage"

<http://www.phaboard.org/underscoring-the-value-of-a-collaborative-cha-process/>



PHAB accreditation has become a road map for change at Clinton County Health Department in Plattsburgh, NY

<http://www.phaboard.org/in-plattsburgh-ny-accreditations-impact-runs-deep-2/>

Below are additional findings about the link between accreditation and multi-sector partnerships and/or collaborations to promote health.

- Although nearly all health departments report having positive relationships with local community stakeholders prior to applying for accreditation, 74% of those surveyed one year after accreditation agreed or strongly agreed that "Since being accredited, our health department's relationships with local community stakeholders have improved."*
- 96% of health departments that had recently been accredited agreed or strongly agreed that "Community stakeholders provided positive feedback upon hearing accreditation was conferred."*
- In their own words as part of Annual Reports and the evaluation, health departments have described the following benefits of accreditation:
 - There is "much more unified involvement [of community organizations] across our jurisdiction, which was definitely a result of us going through the accreditation process."
 - "The PHAB standards and measures provide a best practice or evidence-based road map or structure to best accomplish along with community partners, all of the things that a health department should be doing."
 - "Since going through the process of developing a CHA and CHIP and making an effort to conform to all of the PHAB standards and measures, the department has [improved its ranking in] the County Health Rankings. We attribute this significant jump in the rankings largely to the work that has been accomplished as a result of our CHIP."
 - "Especially since becoming an accredited health department in 2013, the [health department] has been encouraged to take a higher profile leadership position in the community."
- In their Annual Reports, health departments discuss how they have worked with community partners in a variety of sectors to improve the health in their communities. For example, they have:
 - Increased the number and diversity of partners in their communities, taking a collective impact approach to promoting the public's health.
 - Incorporated a goal in the city's business plan to increase life expectancy across all zip codes.
 - Collaborated with local hospitals to do a joint community health needs assessment.
 - Worked with a range of partners to address such issues as school readiness, criminal justice reform, and adverse childhood experiences.
- Preliminary analysis suggests that jurisdictions that contain an accredited local public health agency are more likely to be considered comprehensive public health systems. <http://systemsforaction.org/projects/accreditation-and-multi-sector-contributions-population-health-activities>

To read more about the link between accreditation and multi-sector partnerships, please see: <https://jphmpdirect.com/2016/11/08/accreditation-and-multi-sector-collaborations-to-promote-health-by-jessica-kronstadt/>

* Findings from the ongoing evaluation of accreditation being conducted by NORC at the University of Chicago. As of December 2016, 69 health departments had responded to the survey one year after they were accredited. For more information on the evaluation, see: www.phaboard.org/research-and-evaluation/.

Accreditation increases multi-sector partnerships to improve health.

Messaging

The table below summarizes some of the key messages related to the link between accreditation and multi-sector partnerships and their potential audiences.

<i>Message</i>	<i>HD Directors</i>	<i>HD Staff</i>	<i>Governing Entities</i>	<i>Policymakers</i>	<i>Community Partners</i>	<i>Funders</i>	<i>News Media</i>	<i>Overall Community</i>
A collaborative Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) are two of the cornerstone requirements for PHAB accreditation.	✓	✓	✓					
Accreditation can increase and enhance partnerships with a wide range of partners, including hospitals, educational institutions, service organizations, businesses, civic organizations, faith-based groups, housing organizations and criminal justice organizations.	✓	✓			✓		✓	✓
Accreditation requires health departments to engage numerous partners as they work to understand the needs and assets in their communities.	✓	✓			✓			✓
Data from multi-sector partnerships can help justify how and where resources should be allocated to best meet a community's public health needs.	✓		✓			✓		
Sharing data among multiple sectors enables decision-makers to develop policies and programs that have the biggest impact in reducing health disparities.	✓		✓	✓				
The health department's efforts to protect and improve the health of the community are more effective when multiple private, public and community partners join together in a strategic and coordinated way.	✓	✓			✓		✓	✓
Collaborating across sectors gives the health department access to partners who may be critical to the success of a certain public health initiative.	✓				✓			
No single health department can protect a community's health on its own; connecting with different sectors helps the health department carry out its important work.		✓			✓		✓	✓
Multi-sector partnerships can better leverage available resources and provide the health department with greater reach and credibility.	✓		✓	✓	✓	✓		
Coordinating resources can reduce duplication of activities and maximize available resources.	✓		✓		✓			
New partnerships established as a result of accreditation can lead to alternative funding sources through grants and other funding mechanisms.	✓		✓			✓		

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Accreditation and multi-sector partnerships improve the health department's accountability, credibility, visibility, and reputation with external stakeholders.	✓	✓	✓					
Engaging with nontraditional partners can help hold leaders accountable and thereby accomplish more ambitious goals.	✓		✓					

Researcher Addendum: Potential Data Sources

The table below describes data that are currently being collected that can increase our understanding of the link between accreditation and multi-sector partners.

<ul style="list-style-type: none"> • Data collection: Starting in 2013, HDs have been surveyed after registration, after notification of accreditation, and 1 year after becoming accredited (Some questions overlapped across surveys, and some questions were edited or added in 2016) • Population: HDs in process/accredited HDs 	<p><u>Evaluation of PHAB conducted by NORC at the University of Chicago</u></p> <p>Health departments are asked to report the degree to which they agree with the following statements on a Likert scale:</p> <ul style="list-style-type: none"> • As a result of being accredited, our health department has had new opportunities for partnerships and/or collaborations. • Since being accredited, our health department's relationships with local community stakeholders have improved. • Because of our participation in the accreditation process, our local community stakeholders' knowledge of our health department's roles and responsibilities have improved.
<ul style="list-style-type: none"> • Data collection: Distributed every 2-3 years. Questions may change over time. • Population: All state and local health departments (NACCHO module only sent to a sample of local HDs) 	<p><u>ASTHO/NACCHO Profiles</u></p> <ul style="list-style-type: none"> • NACCHO 2013 Profile module: Which of the following best describes how your LHD worked in the past year with other organizations in the community to accomplish goals in the following programmatic areas? <ul style="list-style-type: none"> ○ Networking includes the exchange of ideas and information for mutual benefit, often via newsletter, conferences, meetings and electronic information sharing. It is the least formal form of partnership and requires little time or trust between partners. ○ Coordinating involves the exchange of information and the altering of activities for a common purpose. ○ Cooperating involves the exchange of information, altering activities and sharing resources. It requires a significant amount of time, high level of trust and sharing of turf. ○ Collaborating includes enhancing the capacity of the other partner for mutual benefit and a common purpose, in addition to the above activities –the exchange of information, altering activities, and sharing of resources. • NACCHO 2016 module: Have LHDs worked with different types of organizations in the past year in the following ways: shared personnel/resources; written agreements; regularly scheduled meetings; exchanged information? • NACCHO 2016 module: Have you taken any of the following actions in the past three years to implement or sustain your community health improvement plan? <ul style="list-style-type: none"> ○ Participated in a coalition(s) to address one or more priorities ○ Developed or strengthened relationships with community partners ○ Advocated for other community partners to establish or increase activities to support priorities ○ Worked with community partners to advance policy changes related to priorities • NACCHO 2016 module: Which of the following describe how your LHD is collaborating with a non-profit hospital on its CHNA? <ul style="list-style-type: none"> ○ LHD and non-profit hospital jointly conducted an assessment that serves as both the LHD's CHA and the hospital's CHNA ○ LHD coordinated joint efforts by multiple hospitals to pool resources and information for a CHNA ○ LHD assisted in engaging community organizations and residents in CHNA process ○ LHD served as a neutral facilitator to ensure a collaborative CHNA process ○ LHD provided technical assistance to hospital on how to design and implement a CHNA ○ LHD shared local data resources on health status and/or social determinants of health ○ LHD provided technical assistance on data collection, analysis, synthesis, or interpretation ○ LHD provided input on strategies to improve community health • ASTHO 2012/2016 Profile asks about relationships with various partners: <ul style="list-style-type: none"> ○ Exchange Information ○ Work together on activities or projects ○ State/territorial health agency provides financial resources

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	<ul style="list-style-type: none"> ○ State/territorial health agency has the leadership role within the partnership ○ No relationship yet ○ N/A: Organization does not exist in jurisdiction ● ASTHO 2016 asks about whether there are formal partnerships involving more than one sector outside of public health <ul style="list-style-type: none"> ○ In your state public health agency's formal partnerships, have both the health objectives and targets they intend to achieve been specified? ○ In your state public health agency's formal partnerships, have the tools they will use to track and monitor progress been specified? ● ASTHO 2016 Profile asks if HDS have already experienced; anticipate they will experience; or do not anticipate that they will experience these accreditation benefits: <ul style="list-style-type: none"> ○ Strengthen our agency's relationship with key partners in other sectors.
<ul style="list-style-type: none"> ● Data collection: First survey in 2015; future data collection planned ● Population: Staff at some state and local health departments 	<p><u>Public Health Workforce Interests and Needs Survey (PHWINS)</u></p> <ul style="list-style-type: none"> ● Asks “How important is this item in your day-to-day work?” and “What is your skill level?” about the following items: <ul style="list-style-type: none"> ○ Collaborating with diverse communities to identify and solve health problems. ○ Engaging partners outside your health department to collaborate on projects. ● Asks the following questions about “Fostering a culture of quality improvement”: <ul style="list-style-type: none"> ○ How much, if anything, have you heard about the following trends in public health? ○ Please rate the following trends in terms of importance, impact on your work, and perceived level of emphasis
<ul style="list-style-type: none"> ● Data collection: Fielded periodically since 1998 ● Population: Cohort of local public health systems, with an emphasis on jurisdictions of 100,000 or more 	<p><u>National Longitudinal Survey of Public Health Systems (NLSPHS)</u></p> <ul style="list-style-type: none"> ● NLSPHS asks which of the following organizations (state health agency, faith-based organizations, physician practices, schools (K-12), other state government agency, hospitals, community health centers, colleges/universities, local government agencies, health insurers, other nonprofits, federal government agency, employers/business groups) are involved in performing each of 20 functions in the jurisdiction. ● In your jurisdiction, is there a network of support and communication relationships that includes health-related organizations, the media, and the general public? Overall, how well is this activity performed within your jurisdiction?