

VERSION 2.0 WORK IN PROGRESS: Public Health Laboratories Expert Panel Summary September 2018



The Public Health Accreditation Board is a 501(c)3 nonprofit organization dedicated to improving and protecting the health of the public by advancing and ultimately transforming the quality and performance of state, local, tribal, and territorial public health departments.



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- PHAB is continually working to ensure that the accreditation requirements are current and reflect state-of-the-art public health practice, as public health evolves. PHAB is in the information-gathering phase of the development of a Version 2.0 of the accreditation Standards and Measures. In 2019, PHAB will develop a proposed set of Version 2.0 standards and measures for public vetting in 2020.
- One of the key areas that PHAB identified for review and potential refreshing of the standards and measures is the public health laboratory. In partnership with the Association of Public Health Laboratories, PHAB held an Expert Panel meeting on September 6, 2018. The purposes of the expert panel were to review the current health department accreditation standards and measures related to public health laboratory capacity; to discuss any pertinent changes in public health laboratory practice and/or support for health departments work; and, to recommend potential revisions in the accreditation standards and measures as PHAB prepares Version 2.0.
- In general, health departments going through the accreditation process have performed well on the public health laboratory related measures. Specifics about the measures are included in a document entitled “What We Have Learned from Accredited Health Departments about Public Health Laboratory Capacity”.
- One of PHAB's early think tanks prior to the launch of the accreditation program was a Public Health Laboratory Think Tank. That report from 2010 was reviewed as part of this recent expert panel meeting and is posted on the website with the other public health laboratory documents.
- In terms of the current standards and measures, some clarification regarding the following was discussed:
 - When discussing plans for surge capacity, greater clarity and some updated language is needed. Also, the requirement for a list of equipment is confusing. PHAB will explore concepts related to continuity of operations and will also consider the need for laboratories to sustain expanded capacity over a

- longer period of time.
 - There have been some changes in the way that states manage notifiable disease follow-up. PHAB should connect with CSTE and others before Version 2.0 is finalized.
 - PHAB needs to clarify when a local health department handles only one type of specimen, the protocol will be less comprehensive than for those who handle multiple types of specimen.
 - Some additional clarification is needed regarding the types of services requiring certifications/accreditations by the public health laboratory and documenting those certificates accordingly.
 - Select agent certification is no longer required.
- There are several places in the current standards and measures related to the public health laboratory where recommendations were made to combine some areas to avoid redundancy.
- Since many of the public health laboratory related standards and measures also include emergency preparedness and epidemiology content, it is essential that PHAB connect with any of those updated requirements before changes are proposed.
- Measures should demonstrate an ongoing collaborative relationship of the laboratory with programs across the department, especially epidemiology and environmental health.
- Measures need to assure routine and 24/7 emergency access to laboratory services.
- Measures should address timeliness of laboratory services and reporting (e.g., newborn screening).
- In terms of emerging public health laboratory issues, the following were discussed:
 - The state health department laboratory's role in maintaining a statewide lab network to support public health functions.
 - The role of the laboratory as a source of information, analysis, and interpretation for decision making, as well as its production role.
 - Cross and inter-jurisdictional, as well as cross-border collaboration is a stronger need than ever before.
 - Bio-monitoring for environmental and other community health hazards
 - Radiological testing
 - Genomic sequencing
 - Point of care capacity
- Several suggestions related to workforce capacity and workforce development were discussed, including attention to the licensure and certifications needed for lab personnel. Inclusion of the laboratory staff in training others about safe, clean and timely specimen collection, packaging and shipping was also identified as a recommendation.
- In terms of ensuring that the health departments have good examples to consider as they prepare their documentation, PHAB will work with APHL to develop tip sheets and case examples for technical assistance use. This will highlight areas where laboratory examples could be included for measures that do not specifically reference labs—for example, related to strategic planning, policy work, etc.—to better engage laboratories throughout the accreditation and reaccreditation process.

- PHAB will consider APHL's Eleven Core Functions of Public Health Laboratories as it proposes revisions to the Standards and Measures.
- In terms of PHAB site visitors, there were two recommendations:
 - PHAB and APHL will work to recruit some additional public health laboratorians to serve as site visitors.
 - For those site visit teams where none of the site visitors have direct public health laboratory expertise, PHAB and APHL could develop some additional tips so that the measures that are public health laboratory focused can be assessed accurately.

Expert Panel Participants

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