

Public health's activities in response to the COVID-19 pandemic are relevant and timely examples of how health departments are responsible for a broad array of functions and services in the communities they serve. Health departments have had to shift staff and resources away from 'normal' business to address various aspects of the pandemic and PHAB recognizes that these departments will likely use COVID-19 related activities for documentation in both initial accreditation and reaccreditation for the foreseeable future. To help health departments identify potential documentation, this document highlights some examples how COVID-19 work might be aligned with PHAB requirements.

PHAB's scope of authority policy provides guidance on the activities and services that are appropriate to submit as documentation for accreditation. This policy was revised in March 2021 and materials related to the revised scope of authority can be found on PHAB's website: [Scope of Authority Policy](#). The areas related to COVID-19 examples that are most likely to be outside of PHAB's scope of authority are those pertaining to individual care. *If your health department has a question about using documentation that doesn't clearly fit within one of the examples listed below, please contact your assigned Accreditation Specialist for guidance.*

NOTE: *The following is not intended to be all-inclusive of the types of examples that can be used for PHAB accreditation.*

Documentation Examples

DOCUMENTATION TIP:

Quality improvement can be applied to many aspects of COVID-19 response, such as testing, vaccines, data collection, communication and more. Reference Standard 9.2 for required elements of a quality improvement project.

COVID-19 testing and vaccine-related examples:

- Informing or educating the community at-large about testing or vaccine benefits, and how and where they can get tested or vaccinated for COVID-19.
- Collaboratively planning a testing or vaccination event.
- Developing or improving a system of testing or vaccine delivery.

For example, several requirements in Domain 3, Domain 7, and Domain 9 may be demonstrated with COVID-19 documentation:

- Provide health education and health promotion policies, programs, processes and interventions to support prevention and wellness (Standard 3.1)
- Identify and implement strategies to improve access to health care services (Standard 7.2)

COVID-19 data-related examples

- Collecting data on COVID-19 test results, vaccine status, hospitalizations, deaths, etc.
- Analyzing community COVID-19 data to:
 - identify disparities in diagnosis, treatment, deaths, etc.;
 - inform policy and strategy development;
 - identify opportunities for improvement; or
 - inform the public of incidence, prevalence, and/or mortality.

For example, several requirements in Domain 1 and Domain 5 may be demonstrated with COVID-19 documentation:

- Collection of and maintenance of reliable, comparable, and valid data (Standard 1.2)
- Provide and use the results of health data analysis to develop recommendations regarding public health policies, processes, programs, or interventions (Standard 1.4)

Utilizing COVID-19 Documentation

- Serve as a primary and expert resource for establishing and maintain public health policies, practices and capacity (Standard 5.1)

COVID-19 contact tracing examples:

- Engaging in quality improvement/rapid cycle improvement efforts to improve contact tracing.
- Working with partners to address systems for social, economic, or other issues (unemployment, housing insecurity, food access, etc.) for use in contract tracing interviews to improve the ability of individuals to quarantine or isolate.
- Developing contact tracing investigation protocols.

For example, several requirements in Domain 2 and Domain 6 may be demonstrated with COVID-19 documentation:

- Conduct timely investigations of health problems and environmental health hazards (Standard 2.1)
- Conduct and monitor public health enforcement activities and coordinate notification of violations among appropriate agencies (Standard 6.3)

COVID-19 communications-related examples:

- Collaboratively developing and/or using messaging about COVID-19 risks, preventive actions the population can take, and restricted and/or required activities developed in collaboration with partner organizations, other health departments, and/or governing entities to reduce or mitigate risk of contracting or spreading COVID-19.
- Using various methods of communication, such as social media, infographics, press releases, video PSAs, or others to share messaging about risks associated with COVID-19, preventive actions the population can take, and restricted and/or required activities developed to reduce or mitigate risk of contracting or spreading COVID-19.

For example, several requirements in Domain 2, Domain 10 and Domain 12 may be demonstrated with COVID-19 documentation:

- Maintain a plan with policies and procedures for urgent and non-urgent communication (Standard 2.4)
- Promote understanding and use of current body of research results, evaluations, and evidence- based practices with appropriate audiences (Standard 10.2)
- Encourage the governing entity's engagement in the public health department's overall obligations and responsibilities (Standard 12.3)

Other COVID-19 examples:

- Working with partners to address system issues related to social, economic, or other issues that are a consequence of COVID-19 (unemployment, housing in security, access to adequate food, etc.).
- Developing and/or enforcing shelter-in-place orders, restaurant/other facility closures or limited capacity, or mask wearing requirements, for example. The health department may be the delegated enforcement authority or may be a partner who assists law enforcement or other authorities.
- Developing systems for community-wide distribution of preventive supplies, such as PPE and masks.
- Developing systems for the distribution of vaccine including planning for mass vaccination clinics.
- Completing After Action Reports following a mass vaccination event.
- Considering, deliberating, and resolving ethical issues, such as distribution of vaccine and/or mandatory vaccination.
- Developing work from home or flexible schedule policies to bolster a supportive work environment.

For example, several requirements in Domain 4, Domain 8, Domain 11 may be demonstrated with COVID-19 documentation:

- Promote the community's understanding of and support for policies and strategies that will improve the public's health (Standard 4.2)
- Ensure a competent workforce through the assessment of staff competencies, the provision of individual training and professional development, and the provision of a supportive work environment (Standard 8.2)
- Ethical issues are identified, and ethical decisions are made (Standard 11.1)