

Preparedness



What's In the Data? Insights from Accredited Health Departments

The [mission](#) of the Public Health Accreditation Board (PHAB) is to advance and transform public health practice by championing performance improvement, strong infrastructure, and innovation. Through the PHAB Standards & Measures, PHAB upholds a standardized level of performance for accredited health departments, including measures focused on **preparedness**. Through an examination of performance on these measures, we sought to explore themes and highlights from the data.

Initial Accreditation Performance on Preparedness Measures

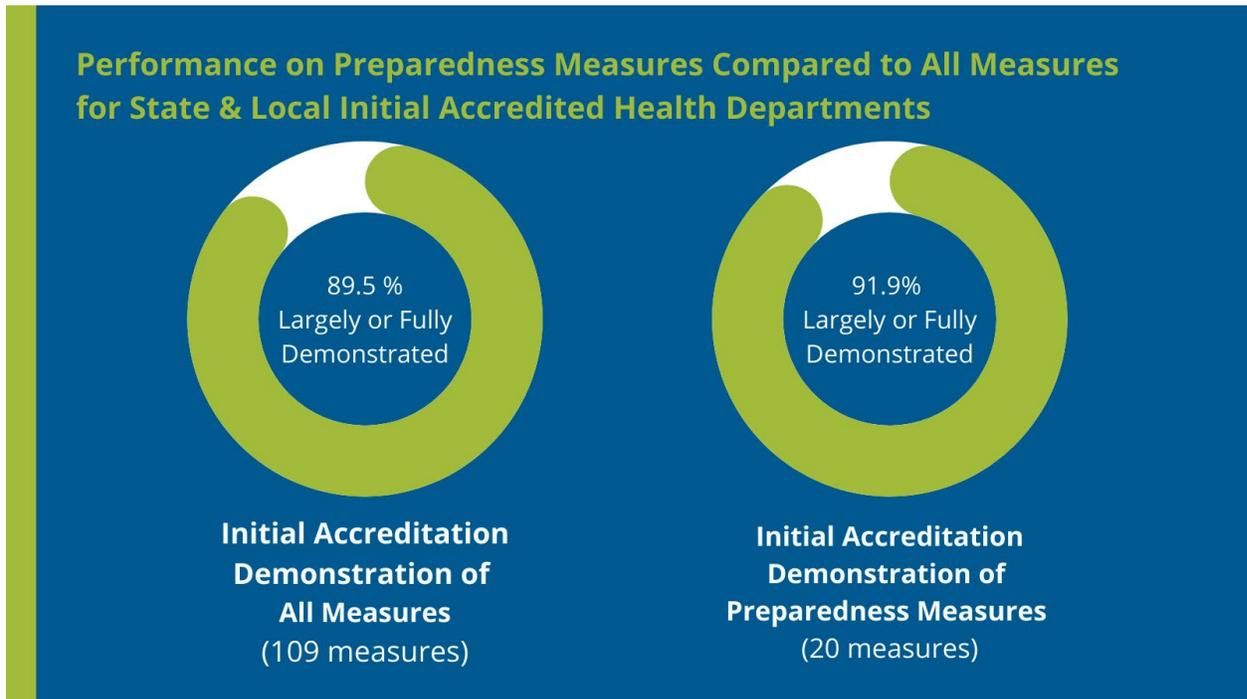
In this insights report, we focus on data from health departments during initial accreditation and their (potential) relationship with preparedness measures. We sought to explore:

- How do health departments perform on preparedness measures compared to all measures?
- Does performance on preparedness measures differ based on health department:
 - Type (i.e., state vs local)?
 - Population size?
- How does performance vary across the twenty preparedness related measures? Which measures have the highest percentage of health departments Largely or Fully Demonstrate the measure?
- For health departments that receive an ACAR for a preparedness measure, what percentage show improvement on those measures?

Please note, Tribal health department data were excluded due to potentially identifiable information.

Data Portal Insights

PHAB initial accredited health departments (n=386) perform *slightly better* on preparedness measures compared to all measures.



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State health departments perform *slightly better* on preparedness measures compared to local health departments.

Performance on Preparedness Measures for State & Local Initial Accredited Health Departments



**State Initial Accreditation
Demonstration of Preparedness
Measures**
(n=40)



**Local Initial Accreditation
Demonstration of Preparedness
Measures**
(n=346)

Health departments that serve larger populations typically had a higher percentage of preparedness measures Largely or Fully Demonstrated than health departments that serve smaller populations.

Performance on Preparedness Measures for State & Local Initial Accredited Health Departments

Population Size	% Largely or Fully Demonstrated	# of HDs
< 50,000	88%	75
50,000 - 100,000	91.4%	72
>100,000 - 200,000	91.2%	65
>200,000 - 500,000	93.7%	69
>500,000 - 1 million	94.9%	43
>1 million to 3 million	92.8%	32
>3 million	94.6%	30

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PHAB accredited health departments' performance *differs* by preparedness measure. *Specifically, health departments have higher performance scores on requirements for Measure 2.3.2 (97.2%, n=391), Measure 2.3.4 (96.9%, n 391), Measure 2.4.1 (97.4%, n=391), Measure 2.4.4 (97.5%, n=40), and Measure 5.4.3 (97.5%, n=40).* These measures focus on:

- 2.3.2: 24/7 access to laboratory resources capable of providing rapid detection, investigation and containment of health problems and environmental public health hazards
- 2.3.4: Collaboration among Tribal, state, and local health departments to build capacity and share resources to address Tribal, state, and local efforts to provide for rapid detection, investigation, and containment/ mitigation of public health problems and environmental public health hazards
- 2.4.1: Written protocols for urgent 24/7 communications
- 2.4.4 (State only): Consultation and technical assistance provided to Tribal and local health departments on the accuracy and clarity of public health information associated with a public health emergency
- 5.4.3S (State only): Consultation and/or technical assistance provided to Tribal and local health departments in the state regarding evidence-based and/or promising practices/templates in EOP development and testing

Health departments applying for PHAB initial accreditation may be asked to conduct further work as part of the Accreditation Committee Additional Requirements (ACAR) process prior to becoming accredited. Of the completed action plan measures related to preparedness, 91% showed improvement.

PHAB received feedback from the field about the preparedness measures, which was considered throughout the revision process of the PHAB Standards & Measures; in [Version 2022 of the PHAB Standards & Measures](#), these measures were revised to more appropriately measure what is relevant in the field today.

Conclusions

As the COVID-19 pandemic has demonstrated, now more than ever preparedness is a critical focus for health departments. Additional data and research are needed to explore the relationship between response to preparedness measures and COVID-19 response. While these standards exist, there is still much more to be done to be prepared for the next emergency. PHAB recently released Version 2022 of the Standards & Measures, which includes revamped requirements related to preparedness. We will continue to monitor performance on those new standards.

We encourage you to share your insights from the PHAB data portal by emailing datainfo@phaboard.org.

Check out other findings via the links below:

- [The Value and Impact of Public Health Department Accreditation](#): Emergency Preparedness section
- [2021 Analysis of PHAB Annual Reports](#): PHAB found emergency preparedness as the emerging public health topic most often addressed by health departments
- [Exploring the Linkage Between Accreditation Outcomes and Public Health Emergency Preparedness and Response](#): a Journal of Public Health Management and Practice research report brief by NORC