

**DOCUMENTATION COVER SHEET TEMPLATES**

For use with PHAB Standards and Measures v1.5

March 2020

**DOMAIN 10**

For each example submitted as documentation, complete the appropriate cover sheet template. Ensure that each required element for the measure is specified with a PDF page number and include any brief explanatory notes, if needed.

The documentation cover sheet templates do not take the place of the Standards and Measures. Remember, each example must fit within the context of the Domain and standard and meet the intent of the measure, as described in the Purpose and Significance statements.

Throughout the templates, specific words and phrases are underlined. These words and phrases are requirements that have been frequently missed. These underlines are intended to direct the reader to the element, but do not indicate that the word or phrase is more important than any other element of the requirement.

Some measures include a “NOTE.” These notes are from PHAB’s Accreditation Specialists and are intended to help with the interpretation of the requirement.

Please direct any measure interpretation questions to your assigned Accreditation Specialist.

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| **Measure # 10.1.1** | Applicable evidence-based and/or promising practices identified and used when implementing new or revised processes, programs, and/or interventions. |
| RD # 1 | The use of evidence-based or promising practices, including: | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document the incorporation of an evidence-based or promising practice in a public health process, program, or intervention.Examples must be from 2 different program areas, one of which must be a chronic disease related program. |  |  |
| 1a | The health department must document the source of the information concerning the evidence-based or promising practice. |  |  |
| 1b | The health department must provide a description of how the evidence-based or promising practice identified in (a) above was incorporated into the design of a new or revised process, program, or intervention. |  |  |
| Incorporation of the evidence-based or promising practice must be appropriate to the particular group or community or it must be modified to be appropriate. |  |  |

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| Evidence of Authenticity and Date are required within the documentation itself. If this evidence is difficult to locate or is found within supporting documentation, please provide a brief explanation of the location here and/or provide the supporting documentation to demonstrate the date and/or evidence of authenticity.  |
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| **Measure # 10.1.1** | Applicable evidence-based and/or promising practices identified and used when implementing new or revised processes, programs, and/or interventions. |
| RD # 1 | The use of evidence-based or promisingpractices, including: | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document the incorporation of an evidence-based or promising practice in a public health process, program, or intervention.Examples must be from 2 different program areas, one of which must be a chronic disease related program. |  |  |
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| **Measure # 10.1.2 T/S (Tribal and State only)** | Fostered innovation in practice and research. |
| RD # 1 | Relationships with academic institutions, research centers/institutes. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The Tribal or state health department must document that it has a working relationship with academic institutions, research centers/institutes, and/or Tribal organizations and Tribal Epidemiology Centers. |  |  |

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| **Measure # 10.1.2 T/S (Tribal and State only)** | Fostered innovation in practice and research. |
| RD # 2 | Participation in research agenda-setting, practice-based research networks, or other research efforts. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 2 | The Tribal or state health department must document that it is engaged with the work of the research community.  |  |  |
| The Tribal or state health department must demonstrate involvement of the community in the development of the research agenda. |  |  |

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| 2 | The Tribal or state health department must document that it is engaged with the work of the research community.  |  |  |
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| **Measure # 10.2.1** | Protection of human subjects when the health department is involved in or supports research activities. |
| RD # 1 | An adopted human subjects research protection policy. | 1 policy |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must provide a copy of a policy regarding research, such as an IRB review policy. |  |  |
| If the health department does not have its own internal IRB process, the health department must have a copy of the IRB approval from the institution where the IRB review was done. |  |  |
| If the health department does not currently engage in research that involves human subjects, a statement to that effect could be accepted as documentation. |  |  |

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| **Measure # 10.2.2** | Access to expertise to analyze current research and its public health Implications. |
| RD # 1 | The availability of expertise (internal or external) for analysis of research. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document that it has expert staff or access to outside experts who can analyze research and its public health implications. |  |  |
| If the expertise is outside of the health department, the health department must show a written agreement (contract, MOA/MOU, etc.) that demonstrates access to such expertise. |  |  |

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| **Measure # 10.2.2** | Access to expertise to analyze current research and its public health Implications. |
| RD # 1 | The availability of expertise (internal or external) for analysis of research. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document that it has expert staff or access to outside experts who can analyze research and its public health implications. |  |  |
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| **Measure # 10.2.3** | Communicated research findings, including public health implications. |
| RD # 1 | The communication of research findings and their public health implications to stakeholders, public health system partners, and/or the public. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document the provision of communication through which the department conveyed research findings and their public health implications to stakeholders, other health departments, members of the public health system and non-public health system partners, and/or the public. |  |  |
| The research must have been evaluated by experts to provide valid implications, for example, peer-review for publication in journals. |  |  |
| The state health department distribution list of research findings must include the Tribal and local health departments in the state. |  |  |
| The local health department distribution list of research findings must include the state health department and Tribal health department(s) in the state with which the local health department coordinates. |  |  |
| The Tribal health department distribution list of research findings must include the state and local health department(s) in the state with which the Tribal health departments coordinates. |  |  |
| Note: The intent of this measure is to take research that someone else has conducted and then translate the research findings and communicate the translation and findings to others. A presentation of data is not research.  |  |  |

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| **Measure # 10.2.3** | Communicated research findings, including public health implications. |
| RD # 1 | The communication of research findings and their public health implications to stakeholders, public health system partners, and/or the public. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The health department must document the provision of communication through which the department conveyed research findings and their public health implications to stakeholders, other health departments, members of the public health system and non-public health system partners, and/or the public. |  |  |
| The research must have been evaluated by experts to provide valid implications, for example, peer-review for publication in journals. |  |  |
| The state health department distribution list of research findings must include the Tribal and local health departments in the state. |  |  |
| The local health department distribution list of research findings must include the state health department and Tribal health department(s) in the state with which the local health department coordinates. |  |  |
| The Tribal health department distribution list of research findings must include the state and local health department(s) in the state with which the Tribal health departments coordinates. |  |  |
| Note: The intent of this measure is to take research that someone else has conducted and then translate the research findings and communicate the translation and findings to others. A presentation of data is not research.  |  |  |

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| **Measure # 10.2.4 S (State only)** | Consultation or technical assistance provided to Tribal and local health departments and other public health system partners in applying relevant research results, evidence-based and/or promising practices.  |
| RD # 1 | Provision of consultation or technical assistance to Tribal and/or local health departments, and/or other public health system organizations in applying relevant research, evidence-based, and/or promising practices. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The state health department must document how it has provided consultation, technical assistance, advice, direction, or guidance to Tribal and/or local health departments and/or members of the public health system in the application of relevant research, evidence-based, and/or promising practices. |  |  |
| This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices.  |  |  |

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| RD # 1 | Provision of consultation or technical assistance to Tribal and/or local health departments, and/or other public health system organizations in applying relevant research, evidence-based, and/or promising practices. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The state health department must document how it has provided consultation, technical assistance, advice, direction, or guidance to Tribal and/or local health departments and/or members of the public health system in the application of relevant research, evidence-based, and/or promising practices. |  |  |
| This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices.  |  |  |

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| **Measure # 10.2.4 T** | Technical assistance provided to the state health department, local health departments, and other public health system partners in applying relevant research results, evidence-based and/or promising practices.  |
| RD # 1 | Provision of consultation or technical assistance to state and/or local health departments, other Tribal health departments, and/or Tribal organizations in applying relevant research, evidence-based, promising practices, and/or practice-based evidence. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The Tribal health department must document the provision of consultation, technical assistance, advice, direction, or guidance to others in the application of relevant research or evidence-based, promising practices, and/or practice-based evidence. |  |  |
| This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices. |  |  |

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| **Measure # 10.2.4 T** | Technical assistance provided to the state health department, local health departments, and other public health system partners in applying relevant research results, evidence-based and/or promising practices.  |
| RD # 1 | Provision of consultation or technical assistance to state and/or local health departments, other Tribal health departments, and/or Tribal organizations in applying relevant research, evidence-based, promising practices, and/or practice-based evidence. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | PDF Page Number(s)  | Explanatory Notes  |
| 1 | The Tribal health department must document the provision of consultation, technical assistance, advice, direction, or guidance to others in the application of relevant research or evidence-based, promising practices, and/or practice-based evidence. |  |  |
| This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices. |  |  |

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