

**DOCUMENTATION COVER SHEET TEMPLATES**

For use with PHAB Standards and Measures v1.5

March 2020

**DOMAIN 6**

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 # 6.1.1** | Laws reviewed in order to determine the need for revisions. | |
| RD # 1 | Reviews of public health laws or laws with public health implications that include the following: | 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 its evaluation of laws for their public health implications. Health departments must document that the review of the law included: |  |  |
| 1a | Consideration of evidence-based practices, promising practices, or practice based evidence. |  |  |
| The impact of the law on health equity in the health department’s jurisdiction, if any, must also be considered. |  |  |
| 1b | The use of model public laws, check lists, templates, or some other standard outline or guide. |  |  |
| 1c | Input from key partners and stakeholders. |  |  |
| 1d | Collaboration with other levels of government health departments. (only required for one example)   * State health departments must document that it has collaborated with Tribal or local health departments in reviewing laws that may impact those Tribal or local health departments. * Local health departments must document how they consult with Tribes when reviewing laws that impact multiple jurisdictions, for example, disease reporting, isolation and quarantine, and immunizations. * Tribal health departments must document work with its local Tribal units in addition to other partners, when reviewing existing laws and revising or creating new laws. |  |  |
|  | Examples are from different programs and one example must demonstrate collaboration with other levels of health departments (Tribal, state, and/or local). |  |  |

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| **Measure # 6.1.1** | Laws reviewed in order to determine the need for revisions. | |
| RD # 1 | Reviews of public health laws or laws with public health implications that include the following: | 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 its evaluation of laws for their public health implications. Health departments must document that the review of the law included: |  |  |
| 1a | Consideration of evidence-based practices, promising practices, or practice based evidence. |  |  |
| The impact of the law on health equity in the health department’s jurisdiction, if any, must also be considered. |  |  |
| 1b | The use of model public laws, check lists, templates, or some other standard outline or guide. |  |  |
| 1c | Input from key partners and stakeholders. |  |  |
| 1d | Collaboration with other levels of government health departments. (only required for one example)   * State health departments must document that it has collaborated with Tribal or local health departments in reviewing laws that may impact those Tribal or local health departments. * Local health departments must document how they consult with Tribes when reviewing laws that impact multiple jurisdictions, for example, disease reporting, isolation and quarantine, and immunizations. * Tribal health departments must document work with its local Tribal units in addition to other partners, when reviewing existing laws and revising or creating new laws. |  |  |
|  | Examples are from different programs and one example must demonstrate collaboration with other levels of health departments (Tribal, state, and/or local). |  |  |

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| **Measure # 6.1.1** | Laws reviewed in order to determine the need for revisions. | |
| RD # 2 | Access to legal counsel. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document that it has access to legal counsel review and advice for use, as needed. |  |  |

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| **Measure # 6.1.2** | Information provided to the governing entity and/or elected/appointed officials concerning needed updates/amendments to current laws and/or proposed new laws. | |
| RD # 1 | The provision of written recommendations to governing entity and/or elected/appointed officials concerning amendments or updates to current laws and/or proposed new laws. | 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 submitted written reviews of current laws or proposals for new laws to the governing entity and/or elected/appointed officials. |  |  |
| The documentation must show distribution to the targeted audiences of governing entities and/or elected/appointed officials. |  |  |

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| **Measure # 6.1.2** | Information provided to the governing entity and/or elected/appointed officials concerning needed updates/amendments to current laws and/or proposed new laws | |
| RD # 1 | The provision of written recommendations to governing entity and/or elected/appointed officials concerning amendments or updates to current laws and/or proposed new laws. | 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 submitted written reviews of current laws or proposals for new laws to the governing entity and/or elected/appointed officials. |  |  |
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| **Measure # 6.2.1** | Department knowledge maintained and public health laws applied in a consistent manner. | |
| RD # 1 | Provisions of training for staff in laws to support public health interventions and practice. | 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 the staff are trained in laws that support public health interventions and practice.  Note: Examples must demonstrate training in public health laws that the health department enforces. Examples of laws the department must abide by would not fit this requirement. |  |  |
| Staff must be trained on the specific aspects of the law for which they are programmatically responsible. |  |  |

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| **Measure # 6.2.1** | Department knowledge maintained and public health laws applied in a consistent manner. | |
| RD # 1 | Provisions of training for staff in laws to support public health interventions and practice. | 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 the staff are trained in laws that support public health interventions and practice.  Note: Examples must demonstrate training in public health laws that the health department enforces. Examples of laws the department must abide by would not fit this requirement. |  |  |
| Staff must be trained on the specific aspects of the law for which they are programmatically responsible. |  |  |

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| **Measure # 6.2.1** | Department knowledge maintained and public health laws applied in a consistent manner. | |
| RD # 2 | Efforts to ensure the consistent application of public health laws. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document efforts to ensure the consistent application of public health laws. |  |  |
| Documentation may be a review of either health department staff’s application of laws or other organizations’ application of public health laws for which the health department is not responsible for enforcement. Coordination with other organizations that  apply laws must be evidenced. |  |  |

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| **Measure # 6.2.1** | Department knowledge maintained and public health laws applied in a consistent manner. | |
| RD # 2 | Efforts to ensure the consistent application of public health laws. | Example # 2 |

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| 2 | The health department must document efforts to ensure the consistent application of public health laws. |  |  |
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| **Measure # 6.2.2** | Laws and permit/license application requirements are accessible to the public. | |
| RD # 1 | Public access to information about laws and permit/license application processes. | 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 how it makes information concerning public health related laws and permits/license applications available to members of the public who request it. |  |  |

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| **Measure # 6.2.3** | Information or education provided to regulated entities regarding their responsibilities and methods to achieve full compliance with public health related laws. | |
| RD # 1 | Provision of information or education to regulated entities concerning their responsibilities for compliance with public health laws. | 1 written record |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide a written record of the provision of information to regulated individuals or entities about their responsibilities related to public health laws. |  |  |
| Documentation must include both the information provided and evidence of its distribution. |  |  |

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| **Measure # 6.3.1** | Written procedures and protocols for conducting enforcement actions. | |
| RD # 1 | Authority to conduct enforcement activities. | 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 its authority to conduct enforcement activities. |  |  |
| If the department has little or no authority to conduct enforcement actions, the department must be coordinating and sharing information with agencies that do have public health related enforcement authority and must provide documentation of the authority of the other entity that conducts enforcement. |  |  |

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| **Measure # 6.3.1** | Written procedures and protocols for conducting enforcement actions. | |
| RD # 1 | Authority to conduct enforcement activities. | 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 its authority to conduct enforcement activities. |  |  |
| If the department has little or no authority to conduct enforcement actions, the department must be coordinating and sharing information with agencies that do have public health related enforcement authority and must provide documentation of the authority of the other entity that conducts enforcement. |  |  |

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| **Measure # 6.3.1** | Written procedures and protocols for conducting enforcement actions. | |
| RD # 2 | Procedures and protocols for achieving  Compliance with laws or enforcement actions. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must provide copies of procedures, protocols or processes for enforcement program areas. |  |  |
| Where the health department does not conduct public health enforcement actions, the protocols used by the enforcement agency must be provided and must demonstrate cooperation between the enforcement agency and the health  department. |  |  |
| One of the examples must address infectious disease. |  |  |

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| **Measure # 6.3.1** | Written procedures and protocols for conducting enforcement actions. | |
| RD # 2 | Procedures and protocols for achieving  Compliance with laws or enforcement actions. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must provide copies of procedures, protocols or processes for enforcement program areas. |  |  |
| Where the health department does not conduct public health enforcement actions, the protocols used by the enforcement agency must be provided and must demonstrate cooperation between the enforcement agency and the health  department. |  |  |
| One of the examples must address infectious disease. |  |  |

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| **Measure # 6.3.2** | Inspection activities of regulated entities conducted and monitored  according to mandated frequency and/or a risk analysis method that  guides the frequency and scheduling of inspections of regulated entities. | |
| RD # 1 | Protocol/algorithm for scheduling inspections of regulated entities. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide schedules for inspections. The health department may select the areas or programs. |  |  |
| The selected schedules must be in programs where the health department has authority to conduct an inspection of the regulated entity, unless the health department has no such authority. |  |  |
| Two examples from 2 different programs. |  |  |

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| RD # 1 | Protocol/algorithm for scheduling inspections of regulated entities. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide schedules for inspections. The health department may select the areas or programs. |  |  |
| The selected schedules must be in programs where the health department has authority to conduct an inspection of the regulated entity, unless the health department has no such authority. |  |  |
| Two examples from 2 different programs. |  |  |

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| **Measure # 6.3.2** | Inspection activities of regulated entities conducted and monitored  according to mandated frequency and/or a risk analysis method that  guides the frequency and scheduling of inspections of regulated entities. | |
| RD # 2 | Inspections that meet defined frequencies with reports of actions, status, follow-up,  re-inspections, and final disposition | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document a database or provide a log of inspection reports with   * actions taken, * current status, * follow-up, * return inspections and * final disposition. |  |  |
| When the department has little or no authority to conduct enforcement actions, the department must: coordinate and share information with agencies that do have public health related enforcement authority;  provide documentation of the authority of the other entity that conducts enforcement; and provide documentation that it is informed of inspection protocols and reports showing the results of inspection. |  |  |
| Documentation of inspections must relate to the same programs for which schedules were provided in RD1, above. |  |  |

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| **Measure # 6.3.2** | Inspection activities of regulated entities conducted and monitored  according to mandated frequency and/or a risk analysis method that  guides the frequency and scheduling of inspections of regulated entities. | |
| RD # 2 | Inspections that meet defined frequencies with reports of actions, status, follow-up,  re-inspections, and final disposition. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document a database or provide a log of inspection reports with   * actions taken, * current status, * follow-up, * return inspections and * final disposition. |  |  |
| When the department has little or no authority to conduct enforcement actions, the department must: coordinate and share information with agencies that do have public health related enforcement authority;  provide documentation of the authority of the other entity that conducts enforcement; and provide documentation that it is informed of inspection protocols and reports showing the results of inspection. |  |  |
| Documentation of inspections must relate to the same programs for which schedules were provided in RD1, above. |  |  |

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| **Measure # 6.3.3** | Procedures and protocols followed for both routine and emergency situations requiring enforcement activities and complaint follow-up. | |
| RD # 1 | Actions taken in response to complaints. | 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 actions taken as a result of investigations or follow-up of complaints, as well as analysis of the situation and standards for follow-up. |  |  |
| The standards for follow-up may be within the procedures and protocols. If separate, the standards must be included with the database or log for the documentation. |  |  |
| Two examples from 2 different programs. |  |  |

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| **Measure # 6.3.3** | Procedures and protocols followed for both routine and emergency situations requiring enforcement activities and complaint follow-up. | |
| RD # 1 | Actions taken in response to complaints. | 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 actions taken as a result of investigations or follow-up of complaints, as well as analysis of the situation and standards for follow-up. |  |  |
| The standards for follow-up may be within the procedures and protocols. If separate, the standards must be included with the database or log for the documentation. |  |  |
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| **Measure # 6.3.3** | Procedures and protocols followed for both routine and emergency situations requiring enforcement activities and complaint follow-up. | |
| RD # 2 | Communications with regulated entities regarding a complaint or compliance plan. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document hearings, meetings, or other official communications with regulated entities regarding a complaint and any resulting compliance plans. |  |  |
| When the department has little or no authority to conduct enforcement actions, the department must: coordinate and share information with agencies that do have public health related enforcement authority;  provide documentation of the authority of the other entity to conduct enforcement; and provide documentation that it is informed of inspection protocols and reports showing the results of inspection. |  |  |

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| **Measure # 6.3.4** | Patterns or trends identified in compliance from enforcement activities and complaints. | |
| RD # 1 | Enforcement programs’ annual reports summarizing complaints, enforcement activities, and compliance. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide annual reports that summarize complaints, enforcement activities, or compliance. |  |  |
| Reports must include   * patterns, * trends, and * compliance. |  |  |
| If the department operates an enforcement program that is out of compliance with state law or is under sanctions or a performance improvement plan, then one of the examples must be from that program and must be labeled as being out of compliance. |  |  |

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| **Measure # 6.3.4** | Patterns or trends identified in compliance from enforcement activities and complaints. | |
| RD # 1 | Enforcement programs’ annual reports summarizing complaints, enforcement activities, and compliance. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide annual reports that summarize complaints, enforcement activities, or compliance. |  |  |
| Reports must include   * patterns, * trends, and * compliance. |  |  |
| If the department operates an enforcement program that is out of compliance with state law or is under sanctions or a performance improvement plan, then one of the examples must be from that program and must be labeled as being out of compliance. |  |  |

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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 # 6.3.4** | Patterns or trends identified in compliance from enforcement activities and complaints. | |
| RD # 2 | Debriefings or other evaluations on enforcement for process improvements. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document debriefings or other methods to evaluate what worked well, problems that arose, issues and recommended changes in investigation/response procedures, and other process improvements to enforcement protocols or procedures. |  |  |
| All other process improvements discussed  must be noted in the documentation. |  |  |
| When the department has little or no authority to conduct enforcement actions, the department must: coordinate and share information with agencies that do have public health related enforcement authority; provide documentation of the authority of the other entity to conduct enforcement; and document that it is informed of patterns, trends, and compliance. |  |  |

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| **Measure # 6.3.4** | Patterns or trends identified in compliance from enforcement activities and complaints. | |
| RD # 2 | Debriefings or other evaluations on enforcement for process improvements. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must document debriefings or other methods to evaluate what worked well, problems that arose, issues and recommended changes in investigation/response procedures, and other process improvements to enforcement protocols or procedures. |  |  |
| All other process improvements discussed  must be noted in the documentation. |  |  |
| When the department has little or no authority to conduct enforcement actions, the department must: coordinate and share information with agencies that do have public health related enforcement authority; provide documentation of the authority of the other entity to conduct enforcement; and document that it is informed of patterns, trends, and compliance. |  |  |

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| **Measure # 6.3.5** | Coordinated notification of violations to the public, when required, and coordinated sharing of information among appropriate agencies about enforcement activities, follow-up activities, and trends or patterns. | |
| RD # 1 | Communication protocol for interagency  Notifications. | 1 protocol |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 1 | The health department must provide a communication protocol for interagency notifications. |  |  |
|  | Note: protocol(s) must be a department -wide protocol that directs communication of all areas that the department enforces. |  |  |

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| **Measure # 6.3.5** | Coordinated notification of violations to the public, when required,  and coordinated sharing of information among appropriate agencies about enforcement activities, follow-up activities, and trends or patterns. | |
| RD # 2 | Protocol for notification of the public of enforcement activities. | 1 department-wide protocol or 2 examples |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 2 | The health department must provide a protocol for notifying the public of enforcement activities.  Note: protocol(s) must be a department-wide (comprehensive) protocol OR 2 individual protocols for notifying the public of enforcement activities. |  |  |
| If there are laws that require public notification, the reference must be submitted. |  |  |

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| **Measure # 6.3.5** | Coordinated notification of violations to the public, when required, and coordinated sharing of information among appropriate agencies about enforcement activities, follow-up activities, and trends or patterns. | |
| RD # 3 | Notifications of enforcement actions and other sharing of information concerning enforcement activities. | Example # 1 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 3 | The health department must document the notification of enforcement actions. |  |  |
| Documentation must demonstrate that protocols from RD1 and/or RD2 were followed. |  |  |
| When other agencies have enforcement authority, the health department must provide documentation that it is informed of patterns, trends, and compliance. |  |  |
| Two examples must be from 2 different enforcement programs. |  |  |

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| **Measure # 6.3.5** | Coordinated notification of violations to the public, when required, and coordinated sharing of information among appropriate agencies about enforcement activities, follow-up activities, and trends or patterns. | |
| RD # 3 | Notifications of enforcement actions and other sharing of information concerning enforcement activities. | Example # 2 |

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| **Required Elements from Guidance** (including bulleted items) | | PDF Page Number(s) | Explanatory Notes |
| 3 | The health department must document the notification of enforcement actions. |  |  |
| Documentation must demonstrate that protocols from RD1 and/or RD2 were followed. |  |  |
| When other agencies have enforcement authority, the health department must provide documentation that it is informed of patterns, trends, and compliance. |  |  |
| Two examples must be from 2 different enforcement programs. |  |  |

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