



Guide to Reaccreditation Version 2016 Addendum:
Supplemental Guidance for PHAB Accreditation Procedures
Approved February 2022

This document includes the supplemental guidance initially released by PHAB in July 2020. The Supplemental Guidance was updated, as needed, between July 2020 and February 2022 to be reflective of the change situation due to the COVID pandemic.

The following Supplemental Guidance for Version 2016 (v2016) Reaccreditation supersedes the related policies in the Guide to Reaccreditation (v2016) and will be in effect until the date listed in the table below.

<p>Timelines</p> <p>Health departments will have up to 6 months to submit Reaccreditation Documentation and Population Health Outcomes after the Reaccreditation Application is approved by PHAB (previously 8 weeks).</p> <p>Health departments will have up to 12 months to submit ACAR Documentation after being notified by the Accreditation Committee that an ACAR is required.</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>
<p>Extensions</p> <p>The revised Extension Policy (See Policy for Reaccreditation Version 2022, Appendix 2) will remain in effect for health departments that have applied under v2016.</p> <p>This revision allows the Accreditation Specialist to grant a health department an extension up to 90-days (cumulative). Requests for extensions for periods greater than 90 days should also be made to your Accreditation Specialist using the Extension Request Form and will be reviewed and approved by PHAB’s Senior Management.</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>
<p>Time Frames for Documentation</p> <p>Health departments working on documentation through an extension may encounter having some of their documentation “age out” and fall outside the acceptable timeframe requirements outlined in the Standards & Measures. PHAB is lengthening the acceptable timeframe by one year for all measures for reaccreditation v2016. For example, the Standards & Measures require that a Community Health Improvement Plan be dated within the last five years from the date of a health department’s submission of their documentation. PHAB will accept community health improvement plans that are dated within six years of the document submission date.</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>
<p>Documentation Examples</p>	<p>In effect for all</p>

<p>PHAB will allow the submission of examples that were created or revised after the health department’s original documentation submission date (for responses to pre-site visit reviews and requests for additional documentation during the site visit).</p>	<p>health departments using v2016 Standards & Measures</p>
<p>Reaccreditation Form Requirements</p> <p>Currently, there is a question concerning “continued advancement” for each reaccreditation requirement that is a Narrative Description or Narrative Description of Example. Answering this question is no longer required; it is optional for narratives and narratives of examples on the current version of reaccreditation (approved 2016).</p> <p>When a narrative description of an example is required, health departments may provide either a narrative description of an example <u>or</u> an example so long as it covers the components in the Standards & Measures Requirements and Guidance.</p> <p>Health departments can use the simplified version of the “Reaccreditation Documentation Form – Relationships with Other Health Departments.”</p> <p>All other guidance in the Guide to Reaccreditation (v2016) related to Reaccreditation Forms and Documentation requirements is still in effect.</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>
<p>Documentation Review</p> <p>PHAB revised its documentation review process to utilize PHAB staff’s comprehensive knowledge of PHAB’s measure requirements and reduce the overall time commitment and demand for site visitors. The aim of these process changes is to shorten the overall accreditation review process, while maintaining the peer review as an important component of accreditation. <i>This applies to reaccreditation Pre-site Visit Reviews and Accreditation Committee Action Requirements (ACAR) reviews.</i></p> <p>In the revised documentation review process, the assigned Accreditation Specialist will conduct the Completeness Review and the Pre-Site Visit Review simultaneously. The health department will then respond to reopened measures from the Completeness Review and the Pre-Site Visit Review at the same time, rather than in two separate steps. All measures scored less than Largely Demonstrated will be reopened and the health department will have 45 calendar days to respond with additional documentation.</p> <p>When a measure is assessed as Met in the site visit report, the Accreditation Committee concludes the health department has demonstrated adequate conformity to PHAB requirements. Therefore, only measures scored Not Met will typically be reopened during PHAB’s combined Completeness and Pre-Site Visit Review.</p> <p>After the health department’s response, trained volunteer site visitors will</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>

<p>conduct an independent review of all measures that staff assessed as Not Met and all core measures. PHAB will assign up to two site visitors to each health department based on the number of reopened measures. The Site Visit Team is comprised of the Accreditation Specialist and Site Visitor(s). The Site Visit Team will conduct the site visit and write the Site Visit Report.</p> <p>A similar process is used for ACAR reviews, with the Accreditation Specialist conducting an initial review of documents and site visitors assessing any measures scored Not Met and all core measures. The Site Visit Team works together to finalize the ACAR Report.</p>	
<p>Site Visit Preparation</p> <p>In preparation for the reaccreditation site visit, the site visitor(s) and Accreditation Specialist will prepare questions about specific measures. PHAB will provide applicant health departments with a list of those measures in advance of the site visit. This will help the health department prepare and ensure they have the right staff available during the site visit.</p> <p>Other measures may come up during the site visit. If additional documentation is requested and the needed staff person is not available at the time of the site visit, the Accreditation Specialist will open the measure if it has been assessed as Not Met for the health department to gather the requested documentation and upload it into e-PHAB within two business days after the site visit.</p>	<p>In effect for all health departments using v2016 Standards & Measures</p>
<p>Annual Reports</p> <p>Templates for Section 2 of the Annual Report have been revised in two ways: (1) to make answering an increased number of questions optional and (2) to point out where COVID-19 work can be described. These new forms are posted on Bridge and on the Accredited health department page on the PHAB website. (If you have already started the process using the old Section 2 templates, you can use the old templates.)</p> <p>It should be noted that a health department provided an extension to the due date of their Annual Report will be expected to meet their original due date for the next year’s Annual Report and for reaccreditation. For example, if a health department’s Annual Report is due no later than June 30 and they are provided a 90-day extension for this year’s Annual Report, the health department would still have the deadline of June 30 for the next year’s Annual Report and, when the time comes, the reaccreditation application would be due June 30. The impact of this would be that health departments may have to submit two Annual Reports within the same 12-month period. PHAB wants to help keep health departments on track for reaccreditation.</p>	<p>The current Annual Report templates may continue to be used until PHAB releases new Annual Report forms. Health departments will be provided sufficient time to prepare after the new forms are released.</p>
<p>Appeals & Complaints</p>	<p>In effect for all health departments</p>

The appeals and complaints processes have been revised and can be found as appendices to the Reaccreditation Version 2022 Policy (See Appendix 3 and Appendix 4).	using v2016 Standards & Measures
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