Evaluation Findings

Assessing Outcomes from Public Health Accreditation

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The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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Background
NORC conducts **five ongoing surveys** of health departments.

**Surveys***

- **Applicant Survey**  
  (following registration in ePHAB)

- **Accredited Survey**  
  (following accreditation decision)

- **Post-Accreditation Survey**  
  (one year following accreditation)

- **Year 4 Accreditation Survey**  
  (four years following accreditation)

- **Reaccreditation Survey**  
  (following reaccreditation decision)

*OMB No. 0920-1295*
The response rate is at least 78% for all five surveys.

<table>
<thead>
<tr>
<th>Survey Name</th>
<th>Start Date</th>
<th>Total Number of Responses</th>
<th>Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant Survey</td>
<td>October 2013</td>
<td>344</td>
<td>88%</td>
</tr>
<tr>
<td>Accredited Survey</td>
<td>December 2013</td>
<td>310</td>
<td>93%</td>
</tr>
<tr>
<td>Post-Accreditation Survey</td>
<td>April 2014</td>
<td>265</td>
<td>85%</td>
</tr>
<tr>
<td>Year 4 Accreditation Survey</td>
<td>July 2017</td>
<td>183</td>
<td>83%</td>
</tr>
<tr>
<td>Reaccreditation Survey</td>
<td>July 2020</td>
<td>51</td>
<td>78%</td>
</tr>
</tbody>
</table>
Findings

Outcomes from Initial Accreditation
Applicant health departments report many motivators for applying for accreditation.

<table>
<thead>
<tr>
<th>Motivator</th>
<th>% Strongly Agreed or Agreed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulate QI and performance improvement opportunities within HD</td>
<td>98%</td>
</tr>
<tr>
<td>Allow HD to better identify strengths and weaknesses</td>
<td>93%</td>
</tr>
<tr>
<td>Improve management processes used by leadership team</td>
<td>92%</td>
</tr>
<tr>
<td>Stimulate greater accountability and transparency within HD</td>
<td>91%</td>
</tr>
<tr>
<td>Part of strategic plan</td>
<td>90%</td>
</tr>
<tr>
<td>Help document capacity to deliver Three Core Functions of Public Health and Ten Essential Public Health Services</td>
<td>90%</td>
</tr>
<tr>
<td>Improve accountability to external stakeholders</td>
<td>84%</td>
</tr>
<tr>
<td>Improve credibility within community/state</td>
<td>84%</td>
</tr>
<tr>
<td>Improve competitiveness for funding opportunities</td>
<td>79%</td>
</tr>
<tr>
<td>Improve relationship with key partners in other sectors</td>
<td>78%</td>
</tr>
<tr>
<td>Improve communication with Board of Health/governing entity</td>
<td>66%</td>
</tr>
</tbody>
</table>

95% of accredited health departments reported they made the correct decision to apply for accreditation.

Source: Accredited Survey, 2013-2022, N=307
Reported = Strongly agreed or agreed with statement
As a result of accreditation, health departments have experienced numerous short-term benefits.

**One year after accreditation**

- **95%** reported accreditation has *stimulated quality* and performance improvement opportunities within the health department.
- **94%** reported accreditation has allowed the health department to better *identify strengths and weaknesses*.
- **91%** reported accreditation has helped the health department *document capacity* to deliver the three core functions of public health and the Ten Essential Public Health Services.
- **89%** reported accreditation has stimulated greater *accountability* and *transparency* within the health department.
- **88%** reported accreditation has stimulated *greater collaboration* across departments or units within the health department.*

“We are better internal customers to one another, team to team - silos remain but much lower - and we continue to chisel away at them.”

Source: Post-Accreditation Survey (2014)

Source: Post-Accreditation Survey, 2014-2022, N=265; *N=130 (Data collection occurred between Apr 2017 and Jan 2020) Reported = Strongly agreed or agreed with statement
As a result of accreditation, health departments have experienced numerous short-term benefits.

**One year after accreditation**

- **82%** reported accreditation has improved the health department’s overall capacity to *provide high quality programs and services.*

- **86%** reported accreditation has improved the *management processes* used by the leadership team in the health department.

- **79%** reported accreditation has improved the health department’s *accountability* to external stakeholders.

- **75%** reported accreditation has increased the health department’s capacity to *identify and address health priorities.*

- **69%** reported accreditation has increased the extent to which the health department uses *evidence-based practices* for public health programs and/or business practices.

“Accreditation led to a standard operating procedure used to gather community input [and] feedback and allows our Health Education Department to provide evidence-based programs that are wanted/needed in our community.”

Source: Post-Accreditation Survey (2016)
We believe that the overall and most important value that accreditation has brought to our agency is more teamwork among the department. Before we became an accredited health department we worked in silos. During the accreditation process we had to work together in order to achieve accreditation. Since then, we have continued to build and strengthen those relationships across divisions. There is more of a 'team' feeling throughout the department.

Source: Post-Accreditation Survey (2017)

Accreditation reinforces the need to focus on many of the basics (e.g., workforce, measurement, training, planning) that are often ignored when trying to prioritize or meet various deliverables from authorities, especially with limited resources. Accreditation now serves as an internal accountability mechanism and an extra reason for other agencies to engage with public health to address identified gaps.

Source: Post-Accreditation Survey (2016)
Accreditation has supported workforce development and training and employee pride and engagement.

One year after accreditation

- **90%** reported accreditation has improved our health department’s ability to identify and address gaps in *employee training* and *workforce development*.^  
- **73%** of respondents reported that accreditation strengthened *employee pride* in the agency.**  
- **69%** reported that as a result of being accredited, health department’s *staff competencies* have improved.*

Other internal benefits mentioned:

- Employment recruitment strategy to attract more highly qualified public health personnel  
- Increased employee morale and engagement  
- Increased staff confidence

“Accreditation is of high value to our department. It has improved our self image, enhanced the quality of our work, and proven valuable in developing staff.”

Source: Post-Accreditation Survey (2018)

Source: Post-Accreditation Survey, ^N=182 (Data collection began in Apr 2017); *N=167 (Data collection occurred between Dec 2015 and Jan 2020); **N=51 (Data collection began in July 2020).  
Reported = Strongly agreed or agreed with statement
Accreditation has had a notable impact on QI activities within health departments.

<table>
<thead>
<tr>
<th>Implemented strategies for QI</th>
<th>Uses strategies to monitor and evaluate effectiveness and quality</th>
<th>Uses information from QI processes to inform decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant Survey</td>
<td>Accredited Survey</td>
<td></td>
</tr>
<tr>
<td>17%</td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td>Strongly agree</td>
<td>Agree</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>55%</td>
<td>50%</td>
<td>48%</td>
</tr>
<tr>
<td>Agree</td>
<td>46%</td>
<td>49%</td>
</tr>
<tr>
<td>Don’t Know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disagree</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Longitudinal Analysis of QI Activities among Applicant and Accredited Health Departments.**

(Health Departments that Responded to Both the Applicant and Accredited Survey, 2013-2022, N=216).
It changed our culture and demonstrated that despite we are a staff of 10, we could accomplish a major feat and be stronger for it, formalizing how we conduct business, how we infuse continued and never ending improvement into our culture and measuring and managing performance—all with improving our community's health and experience.

Accreditation has helped transform our health department from “good enough” and “this is the way we’ve always done it” to being “great” and “how can we do things better/more efficiently/more effectively?” There is a night and day difference in our agency from when we began our accreditation journey in 2010 to where we are now, one year post-accreditation. We still have many improvements we’d like to make and know we need to make, but achieving accreditation has given us the knowledge and the confidence needed to continue our transformation.

Source: Post-Accreditation Survey (2017)
A key outcome of accreditation is a strengthened QI culture.

QI Culture Reported across Surveys, Percent Reporting QI is “Conducted Formally” or “Our Culture.” (Applicant Survey, N=204; Accredited Survey, N=257; Post-Accreditation Survey, N=217; Year 4 Accreditation Survey, N=183; Reaccreditation Survey, N=51; 2015-2022).
Accredited health departments have reported higher levels of QI and PM training and practice among staff compared to applicant health departments.

QI/PM Training and Practice among Health Department Staff. (Applicant Survey, N=204, *N=189 for “Greater than 75% of staff have received training in QI and/or PM; Accredited Survey, N=257; Post-Accreditation Survey, N=217; Year 4 Accreditation Survey, N=183; Reaccreditation Survey, N=51; 2015-2022).
Accreditation has resulted in enhanced credibility, reputation, and collaboration.

**Credibility**

- 75%

Accreditation has improved the credibility of the health department within the community or state.

**Reputation**

- 66%

Accreditation has improved the health department’s visibility or reputation to external stakeholders.

**Collaboration**

- 63%

As a result of being accredited, the health department has had new opportunities for partnerships and collaborations.

Source: Year 4 Accreditation Survey, 2017-2022, N=183
Sample quotes in response to: *What do you perceive as the overall value of accreditation to your agency?*

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Increased credibility; focus on being a higher performing health department; we are better able to tell our story and better able to communicate the value of public health.

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The overall value of accreditation is that it helps brand the health department, reassuring the community that the services offered and information provided are of high quality, and the health department is dedicated to addressing social and physical determinants of health and justice for all.

Source: Post-Accreditation Survey (2019)
Accreditation has resulted in improved relationships between health departments and their partners.

**Cross-Sector**

- 77%
  - Accreditation has strengthened the health department’s relationship with key partners in other sectors (e.g., health care, social services, education).

**HD Collaboration**

- 63%
  - Accreditation has led to increased collaboration with other health departments.*

**New Partners**

- 53%
  - Accreditation has helped build relationships with new partners across sectors (e.g., health care, social services, education).

*Source: Year 4 Accreditation Survey, 2017-2022, N=183; *N=96 (Data collection began in Jul 2020)
Accredited health departments experience improved utilization of resources and competitiveness for funding opportunities.

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Competitiveness</th>
<th>Budget</th>
<th>New Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>65%</td>
<td>40%</td>
<td>37%</td>
<td>27%</td>
</tr>
</tbody>
</table>

- Accreditation has improved utilization of resources within the health department.
- Accreditation has improved the health department’s competitiveness for funding.
- Accreditation has had a positive impact on the health department budget.*
- Accreditation has resulted in new funding for the health department.

Examples of new funding reported by health departments.

**Four years after accreditation**

- Funding for mentoring other agencies or training
- Performance incentive from state health department
- Funding for health improvement initiatives and plans
- Public health property tax increase
- State subsidy per capita doubled
- Accreditation or data collected through accreditation processes helped make the case for funding requests

“We believe that as an accredited health department, our grant applications are strengthened and this has resulted in new grant funding.”

Source: Year 4 Accreditation Survey (2018)
Accreditation helps health departments apply health equity principles and, ultimately, positively influence health outcomes.

Four years after accreditation

- **74%** reported that accreditation has helped the health department use *health equity as a lens for identifying and addressing health priorities.*

- **68%** reported as a result of accreditation, the health department has *applied health equity to internal planning, policies, or processes.*

- **51%** reported that health department activities implemented as a result of being accredited have led to *improved health outcomes* in the community.

“Since being accredited, our health department has strengthened and depended more effective partnerships with our community to address health equity and improve the overall wellness of people [in our community].”

Source: Year 4 Accreditation Survey, 2017-2022, N=183; *N=96 (Data collection began in Jul 2020).
 Reported = Strongly agreed or agreed with statement

Source: Year 4 Accreditation Survey (2020)
While COVID-19 has derailed some of our formal plans, we have carried the QI mindset into our COVID-19 response.

During the COVID-19 crisis community and partners have been very impressed how we have communicated and been open to our county agencies.

Accreditation has particularly helped us quantify and address health equity issues in our community. It has also helped us establish stronger working relationships with certain partners that have since proved invaluable in our COVID response (e.g., public and private schools, health care systems, chamber of commerce, etc.).

Source: Post-Accreditation Survey (2020)
Source: Year 4 Accreditation Survey (2020)
Findings

Outcomes from Reaccreditation
The majority of health departments accredited for four years intend to apply for reaccreditation.

- Maintain our status as an accredited health department: 96%
- Maintain our visibility or reputation within the community as a high-performing health department: 75%
- Continue to demonstrate conformity with PHAB Standards and Measures: 66%
- Engage in continuous QI: 62%
- Improve the health of our population served: 61%

**89% of health departments accredited for four years intend to apply for reaccreditation**

Reasons for Deciding to Apply for Reaccreditation, Among Those Intending to Apply. (Year 4 Accreditation Survey, 2017-2022, N=163).

*Source: Year 4 Accreditation Survey (2017-2022, N=183)*
The Reaccreditation Standards and Measures provide an accurate assessment of health department performance.

Reaccreditation Standards and Measures

100%
Allow for accurate measurement of public health capabilities and performance

98%
Accurately assess improvements and advancements

94%
Accurately reflect practice of high-performing health departments

Source: Reaccreditation Survey, 2020-2022, N=51
The process of developing the Measure narratives for reaccreditation benefits health departments.

Measure Narratives

- **88%**
  - Process of developing Measure narratives provided insights on how to improve health department performance

- **86%**
  - Process of developing Measure narratives led them to assess the health department overall (i.e., as a system or cross-departmental, rather than program by program)

Although the narrative approach was possibly 2-3 times as difficult, we benefited at least 5 times as much as the original accreditation process.

Source: Reaccreditation Survey, 2020-2022, N=51
As a result of reaccreditation, health departments have experienced benefits including a strengthened culture of QI, greater collaboration, and benchmarking performance.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage</th>
<th>Description</th>
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<tbody>
<tr>
<td>Quality Improvement</td>
<td>67%</td>
<td>Strengthened the culture of QI in the health department</td>
</tr>
<tr>
<td>Collaboration</td>
<td>65%</td>
<td>Stimulated greater collaboration across departments or units within the health department</td>
</tr>
<tr>
<td>Benchmarking</td>
<td>63%</td>
<td>Led us to compare health department’s programs, processes, and/or outcomes against other similar health departments as a benchmark for performance</td>
</tr>
</tbody>
</table>

Source: Reaccreditation Survey, 2020-2022, N=51
Kept us on our toes, brought us more into areas of health equity, workforce development, performance management, and communications.

This was very valuable time to reflect on not only what we are doing, but how we are doing it. Reaccreditation challenged us to not rest on our laurels but to continually evaluate and improve upon our work.

The reaccreditation process required us to demonstrate how we used the resources/tools that we had and or developed from initial accreditation. The reaccreditation process required us to evaluate our work and efforts and tell the story of how we have advanced and improved upon our work within the community. Reaccreditation does not allow the health department to remain status quo, it definitely requires that the foundation be built upon to continue to excel and grow (i.e. CQI and PM).

Source: Reaccreditation Survey (2020)

Source: Reaccreditation Survey (2021)
The reaccreditation process has helped health departments implement practices that advance health equity.*

<table>
<thead>
<tr>
<th>63%</th>
<th>63%</th>
</tr>
</thead>
<tbody>
<tr>
<td>33%</td>
<td>37%</td>
</tr>
</tbody>
</table>

Led our health department to apply health equity to internal planning, policies, or processes  
Helped our health department use health equity as a lens for identifying and addressing health priorities

**Health Equity Outcomes Experienced Because of Participation in Reaccreditation.** (Reaccreditation Survey, 2020-2022, N=51)

*To date, all reaccredited health departments were initially accredited under Standards & Measures Version 1.0. The evolution of the Standards & Measures may account for the change in its impact.
88% of reaccredited health departments said they made the **correct decision** to apply for reaccreditation.*

*12% said “Don’t Know”; 0% disagreed

76% of reaccredited health departments said the health department experienced benefits from participating in the reaccreditation process that went **beyond benefits of participating in initial accreditation**.

Source: Reaccredited Survey, 2020-2022, N=51
Reported = Strongly agreed or agreed with statement
For more information:

Visit Assessing Outcomes from Public Health Accreditation

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