Emily Elzeftawy, Acting Accreditation Coordinator Tanya Sutton, Public Health Accreditation Associate James "Jim" Osti, Administrative Analyst January 2018

# ACCREDITATION UPDATE



# **CURRENT STATUS - DOCUMENT REVIEW**





**Emily Elzeftawy** Accreditation Coordinator

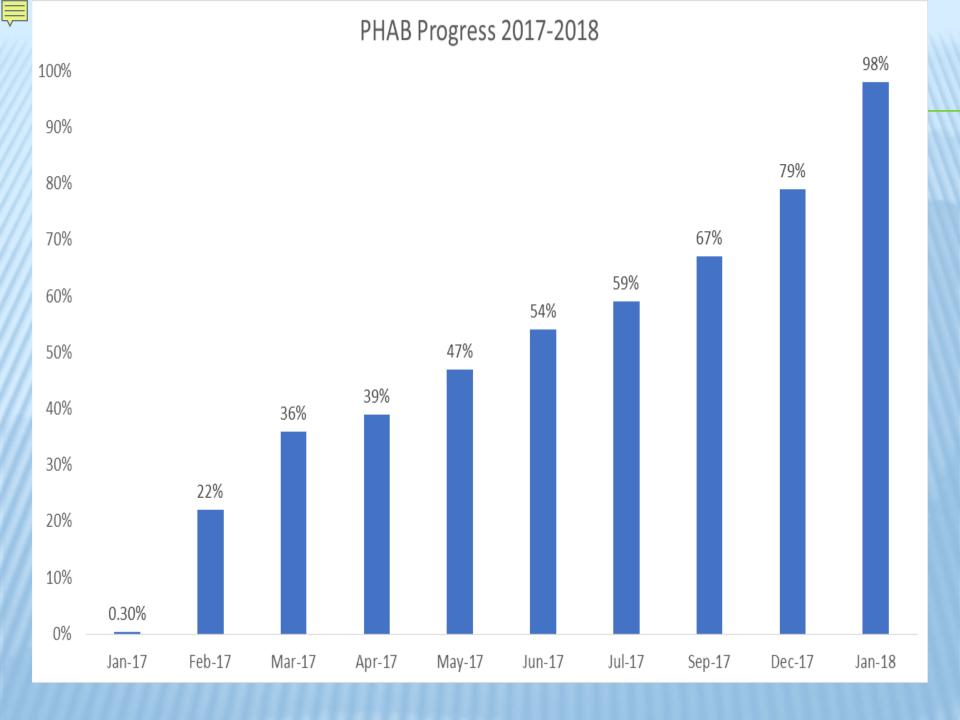


Southern Nevada Health District

my account

### HOME STAFF PROFILE OFFICIALS REGISTRATION APPLICATION BILLING TRAINING DOC. SUBMISSION NOTES GROUPS EMAIL HELP

how: Pro	gress Status		▼ Filte	r by: All	<b>v</b>				Not Started	In Progre	ess Read	dy for AC Rev	iew Req	uires HDD R	eview Re	eady for Subm	ission to Pi
nowing: F	Progress St	atus of All.															
1.1.1 L	1.1.2 L	1.1.3 A	1.2.1 A	1.2.2 A	1.2.3 A	1.2.4 L	1.3.1 A	1.3.2 L	1.4.1 A	1.4.2 L	2.1.1 A	2.1.2 L	2.1.3 A	2.1.4 A	2.1.5 A	2.2.1 A	2.2.2 A
22,3 A	2.3.1 A	2.3.2 A	2.3.3 A	2.3.4 A	2.4.1 A	2.4.2 A	2.4.3 A	3.1.1.A	3.1.2 A	3.1.3 A	3.2.1 A	3.2.2 A	3.2,3 A	3.2.4 A	3.2.5 A	3.2,6 A	4.1.1 A
4.1.2 L	4.2.1 A	42.2 A	5.1,1 A	5.1.2 A	5.1.3 A	5.2.1 L	5.2.2 L	5.2,3 A	5.2.4 A	5.3.1 A	5.3.2 A	5.3.3 A	5.4.1 A	5.4.2 A	8.1.1 A	6.1.2 A	8.2.1 A
6 2.2 A	8.2.3 A	6.3.1 A	6.3.2 A	8.3.3 A	8.3.4 A	6.3.5 A	7.1.1 A	7.1.2 A	7.1.3 A	7.2.1 A	7.2.2 A	7.2.3 A	8.1.1 L	8.2.1 A	8.2.2 A	8.2.3 A	8.2.4 A
9.1.1.A	9.1.2 A	9.1.3 A	9.1.4 A	9.1.5 A	9.2.1 A	9.2.2 A	10.1.1 A	10.2.1 A	10.2.2 A	10.2.3 A	11.1.1 A	11.1.2 A	11.1.3 A	11.1.4 A	11.1.5 A	11.1.6 A	11.1.7 A
1.2.1 A	11.2.2 A	11.2.3 A	11.2.4 A	12.1.1 A	12.1.2 A	12.2.1 A	12,3.1 A	12.3.2 A	12.3.3 A	All				2			



# BY THE NUMBERS....

# +329 unique submissions have been gathered

- + Documents come from all areas of SNHD to meet the 12 domains in the accreditation application.
- + This encompasses thousands of pages that have been reviewed individually.
- + I have been uploading documents since December 15, 2017

### BY THE (BUDGET) NUMBERS....

- + We have used about half the budget for our Consultant Public Health Institute hired last year (\$28,100 out of \$40,000).
- + We are hoping to use the remaining budget funds to conduct a mock site visit to help prepare staff for the actual site visit.
- + Tamara Bannan of PHI has reviewed documents across all domains and made suggestions for changes that will help assure we meet PHAB standards.



## BY THE (BUDGET) NUMBERS....

- + Costs are calculated from January 2017 (when current accreditation application was submitted)
- + Personnel Costs \$112,926.31 (including salary for previous accreditation coordinator and staff who have worked on accreditation)
- + Travel \$4,550.20 (includes required trainee fee and air travel to Virginia for PHAB training).
- + Operating \$45,248.00 (\$14,000 Application Fee and the \$28,100 paid to PHI, mileage, printing etc.)

# **EXAMPLE OF UPLOAD PAGES**

\* 11.1.6 is one Domain but has 5 Required Documentations, some of which require multiple examples.

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	11.1.6 A	Information management function that supports the health department's mission and workforce by providing infrastructure for data storage, protection, and management; and data analysis and reporting	Requires HDD Review	None Selected	2018-01-19 12:27 Emily Elzeftawy	Emily Elzeftawy	Write	

# 11.1.6 - REQUIRED DOCUMENT 1

Standard 11.1: Develop and maintain an operational infrastructure to support the performance of public health functions.

### **MEASURE**

### Measure 11.1.6 A

Information management function that supports the health department's mission and workforce by providing infrastructure for data storage, protection, and management; and data analysis and reporting

### **PURPOSE**

The purpose of this measure is to assess the health department's capacity and capability to store, manage, protect, and utilize electronic information and data in order to provide relevant information for operational efficiency and informed decision making.

### **SIGNIFICANCE**

Effective public health decisions require accurate information and data. Health departments have access to a wealth of data, either created by the department or collected by others. To use data effectively, the health department must organize and process data in a manner to appropriately protect data and also make it available for decision making. The health department must maintain an information management system that provides the ability to store, protect, process, manage, analyze, utilize, and communicate information and data available from multiple sources.

### REQUIRED DOCUMENTATION

1. Information technology infrastructure that supports public health functions

### **GUIDANCE**

1. The health department must document that information technology supports public health and administrative functions of the department.

Documentation could be, for example, a scanning system to preserve records, a grant management system, vital records systems, program (such as WIC or immunization) information systems, licensing information systems, inspections and violations records, and on-line data services.

### NUMBER OF EXAMPLES

#### 2 examples;

The two examples must be from different areas. The health department may select the areas.

### DATED WITHIN

#### 5 years

# 11.1.6 - REQUIRED DOCUMENTS 2 - 5

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2. Secure information systems	2. The health department must document information vulnerability audits, security policies, and/or internal controls to ensure the privacy and security of information.	1 example	3 years
3. Maintenance of confidentiality of data	3. The health department must provide a policy that the department adheres to federal, state, and local privacy protection regulations for handling data.	1 policy	5 years
4. Maintenance of information management system	4. The health department must provide a written process for reviewing and developing information management business system requirements to guide systems changes and development.	1 example	5 years
5. Management of information assets	5. The health department must provide an inventory of data or data systems (either collected by the health department or by others) available to the health departments.	1 example	3 years

# WE ARE THERE (EARLY!!)

- + We will submit all documentation on January 30, 2018 and Dr. Iser will formally enter our application on January 31, 2018.
- + February 13, 2018 is the formal due date.

### SO WHAT HAPPENS NEXT?

- \* After documents are submitted, we will be assigned a site visit team within 3-6 months.
- \* The site visit team is made up of 3 people who will review our documents prior to their arrival.
- \* They will meet with individuals on each of the 12 domains to ensure our documentation accurately reflects what we do.
- Decision regarding accreditation will be received shortly after site visit

### IF WE ARE FULLY ACCREDITED...

- \* We will be accredited for 5 years at which point, SNHD will need to apply for re-accreditation.
- \* During this 5 years, we will be implementing and improving our Workforce Development Plan, Quality Improvement and Performance Management Plans on an ongoing basis.
  - + To this end, a Quality and Performance

    Management Coordinator has been selected to
    ensure this process continues to thrive.

### IF WE ARE NOT INITIALLY ACCREDITED...

- \* We will receive an action plan which gives us a limited period of time in which to strengthen any areas of weakness that are indicated.
- \* We must complete the action plan as described or we will receive the "not accredited" status.
  - + PHAB has indicated they would prefer NOT to give this, so they will work with us to ensure this does not happen.

# ANY QUESTIONS?