

2012-2013 Accreditation Support Initiative (ASI) for Large Metropolitan Local Health Departments

FINAL REPORT

1. Community Description

Briefly characterize the community(ies) served by your health department (location, population served, jurisdiction type, organization structure, etc). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

The Boston Public Health Commission (BPHC) is the country's oldest health department serving a population of 617,594 residents. BPHC is a city agency governed by a seven-member Board of Health appointed by the city's mayor. Boston is racially diverse with 47% of residents identifying as white, 22.4% identifying as Black, 17.5% identifying as Latino, and 8.9% of residents identifying as Asian.

2. Work Plan Overview

*Provide an overview of the work you conducted with or because of this funding, including the significant accomplishments/deliverables completed between December 2012-July 2013 under the auspices of this grant, and the key activities you engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others. *Note: Work with connector sites will be addressed in question #8.*

The Boston Public Health Commission (BPHC) was funded to assess and advance its PHAB accreditation readiness. This funding supported an accreditation coordinator who developed shared understanding and leadership support for accreditation preparation. The senior leadership team used this understanding of PHAB standards and the NACCHO Turning Point Collaborative tools to explore the feasibility of different models of organization-wide performance management systems. The accreditation coordinator also developed a database to assess our organization's compliance with PHAB measures and to collect required documents. The resulting gap analysis was used to develop a targeted work plan to guide accreditation readiness objectives and activities.

3. Challenges

*Describe any challenges or barriers encountered during the implementation of your work plan. These can be challenges you may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities. If challenges were noted in your interim report, please **do** include them here as well.*

- Progress on work plan activities which required active input/approval from the senior leadership could be delayed by "external threats" which required a Commission-wide response (e.g., Influenza State of Emergency in Boston, and 2013 Boston Marathon Bombing). Planning and communication with staff to maintain

“buy-in” helped to re-establish progress.

- Neither the state nor other local public health departments in Massachusetts have applied for accreditation so local technical assistance and experience with accreditation are unavailable.
- Senior leadership identified the lack of dedicated resources for a performance management system as the major barrier to development of an organization-wide system. BPHC is a large local health department numbering over 1100 staff with diverse functions and programming. Development of an effective organization-wide performance management and quality improvement infrastructure will require significant resource allocations.
- BPHC has ongoing organization-wide initiatives which are essential to our mission of promoting, protecting and preserving the health and well-being of all Boston’s residents, particularly the most vulnerable, including five year overarching strategic goals and the promotion of racial justice and health equity. Prioritizing accreditation readiness which requires organization-wide commitment, energy, and resources in the midst of competing ongoing initiatives is particularly challenging at a time when public health funding is limited.

4. **Facilitators of Success**

Describe factors or strategies that helped to facilitate completion of your work. These may be conditions at your organization that generally contributed to your successes, or specific actions you took that helped make your project successful or mitigated challenges described above.

Our organization has regular meetings with staff operating at multiple levels. We had the opportunity to push out accreditation information and solicit input at multiple levels because of the availability of these meetings. The Board of Health (our governing entity), the senior leadership team, and program directors were kept informed about our accreditation readiness activities throughout the grant period. Additionally, several bureaus and programs within our organization which have already had formal training and experience using continuous quality improvement tools were able to support our efforts.

5. **Lessons Learned**

Please describe your overall lessons learned from participating in the ASI. These may be things you might do differently if you could repeat the process, or the kinds of advice you might give to other health departments who are pursuing similar types of funding opportunities or technical assistance activities.

Accreditation activities require shared understanding and commitment from organizational leadership. Capacities critical to successful PHAB accreditation such as an effective performance management system, require support from leadership who set organization-wide priorities and who can develop new funding, or realign existing resources. Partnering with other local public health departments may facilitate the readiness process through shared information, tools and, potentially, resources.

6. **Funding Impact**

Describe the impact that the ASI funding has had on your health department. In other words, thinking about the work you have done over the last eight months, how has this funding advanced your health department's accreditation readiness or quality improvement efforts?

The funding allowed us to dedicate staff time toward accreditation self-assessment and the development of accreditation tools like an accreditation documentation collection and management system. This funding also helped us identify our existing capacities as well as high priority areas for capacity building. We were able to better understand our existing performance management and quality improvement infrastructure and explore potential designs that may meet PHAB accreditation standards.

7. **Next Steps**

What are your health department's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement?

- Completing 2 out of 3 accreditation prerequisites—the CHA and CHIP
- Adjusting our strategic plan based upon the CHA and CHIP
- Completing our work plan to develop a performance management system and quality improvement teams
- Completing written administrative policies and protocols necessary to meet PHAB accreditation documentation requirements.

8. **Working With Connector Sites**

Describe your health department's work with your connector site(s) during this initiative. Include the following:

- *How did you identify your connector site(s)?*
- *What type of TA or resources did you provide to the site(s)?*
- *How do you think this TA helped advance the site's accreditation readiness?*
- *What benefits did you experience?*
- *What challenges did you face?*

Connector site choice was based upon geographic proximity, historical relationships, and input from the state department of public health which has expressed interest in developing a local learning network regarding accreditation. We shared our document database system, conference and training material, presentations to staff and governing body, and information on our experience beginning to develop a performance management system. The work with our connector site is anticipated to expand as we expand our learning collaborative to include other local health departments in the state. The major challenge is limited time and staff resources.