Webinar Series Overview:
PHAB accreditation uses an established framework of standards based on twelve domains. The first ten address the Ten Essential Services of Public Health. The last two focus on your health department’s infrastructure and governance. This 12-part video series provides information, tips, and resources on how you can use the specific performance measures in each domain to advance the quality and performance of your department. Applying the standards now will help your department reach its strategic goals, even as you consider taking the next steps towards accreditation.

Domain 7 Introduction:
The goal of this presentation is to provide an overview of PHAB Domain 11. Domain 11 provides requirements for Maintaining Administrative and Management Capacity.

My name is James Hodina. I am the Environmental Manager for Linn County Public Health in Cedar Rapids, Iowa. I served as the Accreditation Coordinator for our agency when we went through the PHAB Accreditation process. Our agency was accredited by PHAB in March of 2015.

I’d also like to recognize Dr. Ron Eckoff, co-author of this presentation. Dr. Eckoff has been a member of the Dallas County Board of Health for 13 years and, prior to that, worked in the Iowa DPF for 37 years.

There are 12 domains shown here. This presentation is just going to focus on Domain 11: Maintain Administrative and Management Capacity.

A strong operational infrastructure is necessary in order to administer public health services efficiently and effectively. Sound financial practices are basic to any organization. They are required to manage resources wisely, to analyze present and future needs, to sustain operations, and demonstrate accountability.

There is a close relationship between Domain 11 and 12. If the governing entity is involved in the Administrative & Management measures of Domain 11, it may be possible to use some of the same documentation in Domain 12, as well.

Domain 11 is broken down into areas called Standards. There are two standards in Domain 11. These standards are broken down further into separate measures. Within the two standards of Domain 11, there are 11 measures.
Even if you have never considered accreditation, you probably are doing many of the things required in this domain. As with much of the accreditation standards, you need to document what you are doing. For example, if your agency has a contract with the Department of Public Health, the general conditions of that contract includes many of the requirements in this domain.

**Standard 11.1:**  
The first standard in Domain 11 is “Develop and Maintain an Operational Infrastructure to Support the Performance of Public Health Functions.”

**Measure 11.1.1:**  
Measure 11.1.1. is “Policies and procedures regarding health department operations.” PHAB is seeking internal policies, not external-facing policies required in Domain 5. These are operations policies. Human resource policies are addressed in Measure 11.1.5. Examples include: records retention and back-up procedures, invoicing, emergency/evacuation, facilities operations, use of department vehicles, and scheduling of meeting rooms. There should also be a policy or procedure that includes who needs to sign what types of policies and how often they are reviewed. In demonstrating conformance with this standard, the Local Public Health Department should be able to:

- Document a policies and procedures manual or a table of contents for the manual and two example policies.
- Document a current department organization chart showing leadership, upper management, and organization of programs. You should show position titles and program names, but individual names are not required. Does not need to detail every staff position.
- You should also document the regular review of policies and procedures. Provide two examples showing policies were reviewed and dated within the last five years.
- Document how the staff has access to the policies. This could be paper copies distributed to all staff, paper copies available in certain locations, or electronic copies accessible to all staff.

**Measure 11.1.2:**  
Measure 11.1.2 is seeking the health department’s consideration of the ethical dimensions of policies and decisions. Such considerations are important for the provision of effective public health and public health management. Defining and addressing ethical issues should be handled through an explicit, rigorous, and standard manner that uses critical reasoning. Examples of a process include the adoption of the Public Health Code of Ethics, the establishment of an ethics board, the designation of a committee or process of the governing entity, or other related processes. Examples of ethical issues include privately constructed sewers, distribution of vaccine in a shortage situation, staff mandatory immunizations, an employee’s use of social media, or an employee’s acceptance of gifts.
**Measure 11.1.3:**
The purpose of Measure 11.1.3 is to assess how the health department protects customer confidentiality. Lack of attention to confidentiality policies and their implementation can lead to violations of confidentiality. This creates liability to the health department and lessens credibility.

When developing these policies, you may consider such processes as clinical protocols, staff access to records, computer use, business associate agreements, and electronic transfer of data. You may also acquire confidential business information when working with industry, institutions, and commercial establishments. Training documentation could be, for example, a copy of training materials and an agenda for the training session. The health department must have a record of who attended the training. Documentation could also be a log, a sign-in sheet or a record/statement from web-based training. With the signed confidentiality form, staff must acknowledge their responsibilities for protecting confidentiality.

**Measure 11.1.4:**
Public health departments are responsible for all residents in the health department’s jurisdiction, and that usually includes people of various backgrounds, languages, and cultures. It is important for health departments to understand how values, norms, and traditions of populations served affect how individuals perceive, think about, and make judgments about health, health behaviors, and public health services.

PHAB Measure 11.1.4 has four documentation requirements:
- Policies and procedures must ensure that social, cultural, and linguistic characteristics of the population it serves are considered and addressed.
- Documentation of interpretation services or materials in other languages may be provided as evidence.
- PHAB provides several specific examples of cultural and linguistic competency assessment tools in their guidance.
- Examples of training may include: examining biases and prejudices; developing cross-cultural skills; learning about specific populations’ values, norms, and traditions; and/or learning about how to develop programs and materials for low literacy individuals or the visually or hearing impaired. Documentation must show the content of the training and who attended.

**Measure 11.1.5:**
Measure 11.1.5 is about the human resource function, which is separate from Measure 11.1.1, which focused on internal operations. Human resources policies and procedures can be government-wide or part of an umbrella agency. For example, at Linn County, we adhere to the policies issued by the human resources department and approved by the Board of Supervisors. The policies and procedures must address a comprehensive list of requirements as specified in the PHAB Standards and
Measures. Where the health department uses a human resource system that is government-wide (such as at a tribe, state, city, or county level), it is acceptable that the policies and procedures are not specific to only the health department. Access may be web-based, health department intranet, server access, or distribution of hard copies that is available from supervisors or located in central locations. Examples of documents used to establish working relationships may include employee agreements, contract templates, letter of employment templates, contracts, or labor agreements. This does not include contracts for service. Evidence of being a responsive partner may include human resource staff that are educated and experienced in public health for the purpose of assessing workforce needs, enabling workforce development, and recruiting candidates for public health positions. It may also include human resource policies that support the public health program functions or programs and the human resource functions working together to develop policies and provide training and development.

Measure 11.1.6:
Measure 11.1.6 addresses the information management function and how that supports the health department’s mission and workforce. To use data effectively, the health department must organize and process data. It must be performed in a manner to appropriately protect data while also making 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.

Examples of information technology supporting public health could include scanning systems to preserve records, a grant management system, vital records system, program information system such as for programs like WIC or immunization, licensing information systems, inspections and violation records, and on-line data services.

PHAB requires two examples. One example of the following must be provided:
• Information vulnerability audits, security policies, or internal controls to ensure the privacy and security of information
• A policy that the department adheres to federal, state, and local privacy protection regulations for handling data
• A written process for reviewing and developing information management business system requirements
• An inventory of data or data systems (either collected by the health department or by others) used by the health department.

Measure 11.1.7:
The purpose of Measure 11.1.7 is to assess the health department’s facilities for use by both staff and the public.
Access to a laboratory that has Select Agent certification is required. And, if applicable, the health department must provide copies of licenses to meet national or state requirements appropriate for the laboratory services provided.

Examples of inspection reports may be OSHA reports, internal reports conducted by the department, or external reports conducted by an independent organization, inspection reports, cleaning and maintenance policies, logs, records, a certificate of occupancy, contracts or orders. Other examples of documentation include environmental public health and safety committee meeting minutes and federal or Tribal environmental audits.

PHAB will accept a copy of the ADA compliance report or the health department’s self-evaluation, as described by federal regulations. PHAB requires documentation of the health department’s procedures to serve members of the public and health department staff who have physical disabilities, are sight impaired, or are hearing impaired.

**Standard 11.2:**
The second standard in Domain 11 is “Establish Effective Financial Management Systems.”

**Measure 11.2.1:**
The purpose of Measure 11.2.1 is to assess the health department’s ability to manage grants and contracts and comply with external governmental funding requirements. Audits are formal examinations of the health department’s financial accounts performed by external auditors. The health department’s audit may be part of a large audit of the governmental unit (for example, the umbrella agency, county government, or state government) of which the health department is a part. However, the documentation must demonstrate that the health department’s funding was specifically part of the auditor’s review.

Documentation of program reports could be, for example, compliance reports to federal funders, reports to legislature or local city/county/Tribal councils, and reports to foundations.

Contracts or agreements between state, local, or Tribal health departments to provide services may show the expectations for how the funding may be used but might not show the compliance with funding agency requirements. If such contracts are used, they must be combined with the follow-up reports that validate compliance.

Self-disclosure of the health department being identified as a “high-risk grantee” must be provided if applicable. Instances include the department being put on a manual draw-down; the department being put on a corrective action plan; placement on a ‘do not fund’ list; receivership status; and instances of malfeasance or misappropriations of funds. Documentation must also include a description of follow-up actions and
internal controls that have occurred to remedy the situation. If there have been no communications regarding “high-risk grantee” status, the health director must provide a signed statement attesting to that fact.

**Measure 11.2.2:**
Measure 11.2.2 addresses “Written agreements with entities which the health department purchases or serves.” There may be services that the Health Department may not directly deliver. Rather, they may contract these services with another public health partner organization. In these circumstances, the health department must provide contracts or MOUs/MOAs or other written agreements that have been executed with other organizations or departments.

**Measure 11.2.3:**
The purpose of Measure 11.2.3 is to assess the health department’s ability to manage finances. The health department must provide the approved budget that is in effect when the documentation for accreditation is submitted to PHAB. The budget may be approved by the governing entity or other body with approval authority, such as a governor or county budget office. If a new budget is approved between the submission of documentation to PHAB and the site visit, the health department must provide a copy of the new budget to the Site Visit Team.

The health department must also provide quarterly financial reports. The examples provided may demonstrate two different types of reporting or may be two successive reports of the same type. Documentation could be, for example, expense reports, reimbursement reports, reports to governing entities, or monthly budget reports – either summarized or itemized.

**Measure 11.2.4:**
The purpose of Measure 11.2.4 is to assess the health department’s activities to increase financial resources to support its infrastructure and to enhance or develop processes, programs, and interventions.

The health department must provide two examples of grant applications (funded or unfunded) or must document the leveraging funds to obtain additional resources (for example, providing matching funds).

The health department must also provide two examples of its communication concerning the need for additional investment in public health. Communication could address a specific issue or address public health in general. For example, documentation could include articles or letters to the editor of a newspaper, presentations to the community, or testimony to elected officials. Tribal health department documentation could be, for example, Tribal letters or resolutions of support, Tribal public health assessments for the purpose of demonstrating resources needed, or executive order adding resources.
Conclusion:
That concludes our presentation on Domain 11: Maintain Administrative and Management Capacity. We hope this overview was helpful.

Here is a list of additional resources for operational infrastructure and financial management systems:
- NACCHO
  - Accreditation Preparation
- National Center for Cultural Competence
  - Cultural and Linguistic Competence Policy Assessment (CLCPA)

On behalf of the Gaining Ground Coalition, thank you for joining us today.