How to Work Together to Achieve Reaccreditation

Date: 5/2/2018

Presented by: Susan Ramsey
ASTHO Consultant
Pearls of Wisdom Consulting &
Tom Reizes
Reaccreditation Coordinator
New York State Department of Health
Reaccreditation Coordinating Team (RCT)

Reaccreditation Coordinating Team (RCT)
• Tom Reizes (Coordinator), Jan Chytilo, Isaac Michaels, Asante Shipp-Hilts, Starann Dowling, Robert Schmidt, Ngozi Akubuo
• Designated liaison(s) between the Department and PHAB.
• Coordinate development and implementation of NYSDOH’s internal reaccreditation plan
• Engage departmental staff in the reaccreditation process

The RCT will:
• Provide training and support to Domain Team Leads and Members
• Monitor Domain Team progress
• Provide feedback / strategies to support completion of the Domain’s required documentation
• Provide guidance on using the Reaccreditation SharePoint site
Association of State and Territorial Health Officials (ASTHO)

ASTHO Team
• Susan Ramsey, ASTHO Consultant, Pearls of Wisdom Consulting
• Jamie Ishcomer, Senior Analyst, Quality Improvement and Performance Management, ASTHO

Accreditation Readiness and Performance Improvement TA to NYSDOH:
• Establish the Reaccreditation Charter
• Develop a Staff Engagement Plan
  • Communication Plan
  • Reaccreditation Orientation
  • Narrative Writing Guidance
Susan Ramsey

- More than 25 years in public service for the State of Washington

- Co-Chair for the Standards and Accreditation Workgroup for the Public Health Improvement Partnership in Washington State

- National trainer and presenter for PMQI, strategic planning, and accreditation
  - 10 states and for ASTHO, PHAB, NNPHI, and RWJF

- Public Health Accreditation Board and Malcolm Baldrige site reviewer

- Member of the PHAB Evaluation and Quality Improvement Committee

- Washington State Reviewer and led the State Department of Health to become nationally accredited in 2013
Learning Objectives

• Value of PHAB accreditation
• Review the structure of the Standards and Measures for reaccreditation and required documentation
  • Intro to Documentation
  • Intro to Narratives
• Walk through Domain Team Roles and Responsibilities, Timeline and Process
Value of Accreditation
Value of PHAB Accreditation

The value of PHAB Accreditation

- Stimulates QI & PM opportunities: 96%
- Improves local community stakeholder relationships: 74%
- Improves accountability to external stakeholders: 83%
- Allows a health department to better recognize strengths and weaknesses: 94%

As of April 1, 2018

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local</td>
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<tr>
<td>State</td>
<td>31</td>
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<tr>
<td>Tribe</td>
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</tr>
<tr>
<td>Centralized System</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>220 + 1 system</strong></td>
</tr>
</tbody>
</table>

NORC independent PHAB evaluation surveys: http://www.phaboard.org/research-and-evaluation/
Based on the 10 Essential Public Health Services

- Are we using data to inform decision making?
- What evidence-based practices might work for our conditions for the community that we serve?

- Are we ready to respond to health threats?
  - How quickly do we find out about problems?
  - How effective is our response?

- Are we up-to-date, fair, and effective in enforcing health regulations?
  - Do we notify everyone we needed to?

- What is going on in our community?
  - Do we know how healthy we are?
    - Community Health Assessment (CHA)

- How well are our internal processes performing?
  - What improvements are we making?
    - Performance Management System
    - Quality Improvement Plan

- Do we have a competent public health staff?
  - Can we be sure we receive updated training?
    - Workforce Development Plan

- Are people receiving the medical care they need?
  - Are we working with partners to help assure care?

- What policies promote health in our state?
  - How effective are we in planning and setting policies?
    - State Health Improvement Plan; Strategic Plan; Emergency Operations Plan

- How well are our internal processes performing?
  - Are we up-to-date, fair, and effective in enforcing health regulations?
    - State Health Improvement Plan; Strategic Plan; Emergency Operations Plan

- Are we working with partners to help assure care?

- Are we ready to respond to health threats?
  - How quickly do we find out about problems?
  - How effective is our response?

- Are we notified everyone we needed to?

- Are we using data to inform decision making?
  - What evidence-based practices might work for our conditions for the community that we serve?
Reaccreditation Standards and Measures
Guide to National Public Health Department Reaccreditation

• Sets forth the process and timeframes
• Includes the Standards and Measures
• Based on PHAB S&M Version 1.5
• New: Ethics and branding were added to 1.5 and were not apart of initial Accreditation for NYSDOH
• Is available on PHAB’s website
Reaccreditation Standards and Measures

• The Tell versus the Show:
  Health departments will explain the “bigger picture” to understand who they are, what they do, and how they do it
• Increased emphasis throughout on:
  • Collaboration and partnership
  • Community involvement
  • Leadership for community health development
  • Health equity and population health outcomes
  • System-level actions
  • Mobilization of the community
  • Culture of quality improvement
Reaccreditation Standards and Measures (cont’d.)

• Did not revise the Domains or Standards – The same for reaccreditation as initial accreditation
• Measures reworded to describe the intended impact of meeting the measure
• Requirements for each Measure
• RCT providing you with Domain Summaries and Forms annotated with detailed guidance

Accreditation ≠ Reaccreditation
Upload the department’s Protocol(s) no older than 5 years old

Make sure that the Protocols cover these items

Upload a narrative of the current process on form provided

Make sure that the Narrative covers
**Example of a Measure Requirement**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Guidance</th>
<th>Document(s)</th>
<th>Dated Within</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Community public health practice, cultural competence, health equity, and effective community engagement are advanced by the health department</td>
<td>1. Describe the methods used by the health department in its role as a leader and advocate for addressing social determinants of health and health equity. The narrative must include: a. A description of methods the health department uses to influence others to adopt and implement evidence-based public health practice, cultural competence, health equity, and effective community engagement methods. b. A description of the methods the health department uses to encourage others to mobilize the community and the community resources to improve the public's health. c. A description of how the health department works with leaders of other health departments (Tribal, state and/or local health departments) to incorporate health equity goals and metrics into strategies, program development, and policies.</td>
<td>Narrative description</td>
<td>Describe current methods used</td>
</tr>
</tbody>
</table>
Reaccreditation Domain Summaries

The RCT have provided you with Domain summaries for ease of review and discussion.
Documentation
Types of Documents

1. Narrative descriptions of processes, procedures, activities (use PHAB form)
2. Narrative descriptions of examples (use PHAB form)
3. Examples (e.g., communications)*
4. Adopted items (e.g., plan, protocol, report, template)*

* Use Cover Page
Documentation Guidance: Narratives

- Reaccreditation documentation form MUST be used for all requirements that ask for a narrative
- A unique form for every requirement
  - Some coversheets
  - Most ask for the details in the Guidance
- Each form will ask: “Describe plans for advancement of your health department’s work in the area addressed by this requirement”
- When a form is filled out it, it must be no more than 5 pages long
Measure 1.1: The community health assessment is continually updated to broaden and deepen the community’s understanding of public health issues and resources.

Requirement 1: Collaborative process for the enhancement of the community health assessment

Health Department Name
New York State Department of Health

Requirement Narrative
Provide a narrative description of the ongoing community collaborative process for continuous (at least annually) enhancement of the community health assessment. Ensure that the health assessment includes items (a) through (d) of the Guidance. Do not upload documentation of an example. Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.

Describe the CURRENT ongoing community collaborative process for continuous (at least annual) enhancement of the community health assessment.

The narrative must include:

a. A description of the community partnership’s membership, structure, and methods of communication, sharing of data, and partnering on information gathering.

b. A description of the ongoing community collaborative process for updating and
Continued Advancement Text Box

• **Address Continuous Improvement**
  • What are the health department’s plans for improvement?
  • If the health department doesn’t meet all of the required elements, how do they plan to meet them in the future?
• Will not be used in your assessment (Met or Not Met)
• Some plans will be more detailed than others
<table>
<thead>
<tr>
<th>MEASURE</th>
<th>GUIDANCE</th>
<th>DOCUMENT</th>
<th>DATED WITHIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Describe the ongoing community collaborative process for continuous enhancement of the CHA</td>
<td>Narrative Description</td>
<td>Current process</td>
</tr>
<tr>
<td>1.2</td>
<td>Provide the most recent community health assessment</td>
<td>1 Community Health Assessment</td>
<td>5 Years</td>
</tr>
<tr>
<td>1.3</td>
<td>Provide examples of primary data that have been collected and incorporated into CHA since initial adoption</td>
<td>2 Examples</td>
<td>1 Example w/in 2 years, the other example may be within 5 years</td>
</tr>
<tr>
<td>1.4</td>
<td>Describe examples of how the partnership informs other organizations and the public about the availability of the CHA</td>
<td>Narrative Description of 2 Examples; One informing other organizations and one informing the general public</td>
<td>5 Years</td>
</tr>
</tbody>
</table>
Narrative Descriptions of Processes, Procedures, Activities

• Describe how the health department currently operates
  • Not what the health department did last year
  • Not how the health department plans to address this in the future
  • Not an opinion of how the health department thinks they are doing
• Address each of the elements in the Guidance
  • If the health department does not meet the measure, they must still describe what is currently in place
Narrative Descriptions of Processes, Procedures, Activities (cont’d)

• **Describe in the form of a story**
  • Describes the department as a whole, rather than one or two programs (unless a narrative is required to describe examples)

• **Succinct yet thorough**
  • Develop CONCISE narratives
  • Address only what is required in the Guidance of the Standards and Measures
  • Maximum five pages per required narrative
  • Many may be shorter
  • More is not better
Your Story

• Site reviewers love a good story
  • Hook the reviewer in
  • Easy to understand, sticks with the reviewer
What Does Every Good Story Have?

Beginning

Middle

End

The beginning is the most important part of the work. ~ Plato ~
The Beginning

• The beginning of a story gives the site visitor a common ground and shared experience from which to work
• Use it to frame the PHAB requirement
• Use it to tell the site visitor what requirements you are trying to address, why it’s important, and what the main constructs are you’ll be writing about
The Middle

- Where most of the action occurs
- It’s here where you develop the shared information that will move your story forward
- These are your main ideas: What are issues you’ve grappled with? What evidence are you bringing to bear on them? These are the complicated ideas that you want to make sure the site visitor understands
- In developing the story, it helps me to focus on what the site visitor needs to know for us all to stay on the same page
- Have you introduced each character (customer, stakeholder, partner) that is important in the story?
- Have you made it clear how these ideas and characters interconnect and relate to each other?
- Does your story move forward in a logical fashion?
- Have you answered the questions that will arise in the minds of your audience? (the site visitor)
The End

• The end of the story is when you determine your plan of action
• Where you tie up loose ends
• What is the main idea/feeling/plan that you want the site visitor to take home with them (score you with)
Narrative Descriptions of Examples

**Requirement Narrative**

1. Provide a narrative that describes one example of how the partnership informs other organizations about the availability of the community health assessment. The example must have occurred within the last 5 years. Do not upload documentation of an example. Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.

2. Provide a narrative that describes one example of how the partnership informs the public about the availability of the community health assessment. The second example must have occurred within the last 5 years. Do not upload documentation of an example. Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.

**Continued Advancement**

Describe plans for advancement of the health department’s work in the particular area addressed by this Requirement.
New York Narrative Description of Example

PHAB Reaccreditation Documentation Form
January 2017

Measure 1.1: The community health assessment is continually updated to broaden and deepen the community’s understanding of public health issues and resources.

Requirement 4: Availability of the community health assessment.

Health Department Name
New York State Department of Health

Requirement Narrative
1. Provide a narrative that describes one example of how the partnership informs other organizations about the availability of the community health assessment. The example must have occurred within the last 5 years. Do not upload documentation of an example. Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.

Describe examples of how the partnership informs other organizations and the public about the availability of the community health assessment. A community dashboard may be one method of communicating with the community.

2. Provide a narrative that describes one example of how the partnership informs the public about the availability of the community health assessment. The second example must have occurred within the last 5 years. Do not upload documentation of an example. Please be succinct and do not provide more narrative than necessary to describe conformity with this requirement.

Describe examples of how the partnership informs other organizations and the public about the availability of the community health assessment. A community dashboard may be one method of communicating with the community.

Continued Advancement
Describe plans for advancement of the health department’s work in the particular area addressed by this Requirement.
Examples

PHAB Reaccreditation
Documentation Form
January 2017

Measure 3.3: The community receives accurate, timely, and culturally appropriate health communications

Requirement 2: Culturally sensitive and/or linguistically appropriate communication

Instructions:

Upload two examples of the use of culturally sensitive and/or linguistically appropriate communication for the population served.

The examples must have occurred within the last 5 years.

The second example must be from a different program than the program used for the first example.

Provide program examples of culturally sensitive and/or linguistically appropriate communication for the population served.

Examples must be culturally appropriate, in other languages, using plain language (communications that the audience can understand the first time they read or hear it), and/or address a specific population that may have difficulty with the receipt or understanding of public health communications.
**Sample Measure/Document Cover Page**

**Name of Health Department**

<table>
<thead>
<tr>
<th>Measure #</th>
<th>R D #</th>
<th>Example or Document #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Document Date</td>
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</tbody>
</table>

**Document Description**

<table>
<thead>
<tr>
<th>Page #</th>
<th>Required Element</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
## Adopted Items

<table>
<thead>
<tr>
<th>SPECIFIC ITEMS REQUIRED TO BE UPLOADED FOR REACCREDITATION</th>
<th>MEASURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community health assessment</td>
<td>1.1.2</td>
</tr>
<tr>
<td>Report of analysis of health inequities</td>
<td>1.3.5</td>
</tr>
<tr>
<td>Protocol(s) for conducting investigations for all problems/hazards</td>
<td>2.1.1</td>
</tr>
<tr>
<td>Protocol(s) for the containment/mitigation of public health problems and environmental public health hazards</td>
<td>2.2.1</td>
</tr>
<tr>
<td>Protocol(s) for communications with partners</td>
<td>2.2.2</td>
</tr>
<tr>
<td>Plan, process or procedure for developing and implementing health promotion program activities</td>
<td>3.1.1</td>
</tr>
<tr>
<td>Brand strategy</td>
<td>3.2.1</td>
</tr>
<tr>
<td>Procedure or process for accurate and timely communications with the public</td>
<td>3.3.1</td>
</tr>
<tr>
<td>Risk communications plan</td>
<td>3.3.3</td>
</tr>
<tr>
<td>Community health improvement plan</td>
<td>5.2.2</td>
</tr>
<tr>
<td>Strategic plan</td>
<td>5.3.2</td>
</tr>
<tr>
<td>Emergency operations plan</td>
<td>5.4.2</td>
</tr>
<tr>
<td>Protocol for the conduct of After Action Reports</td>
<td>5.4.3</td>
</tr>
<tr>
<td>Workforce development plan</td>
<td>8.1.1</td>
</tr>
<tr>
<td>Template for job descriptions</td>
<td>8.2.4</td>
</tr>
<tr>
<td>Template for annual employee performance evaluations</td>
<td>8.2.5</td>
</tr>
<tr>
<td>Quality improvement plan</td>
<td>9.2.2</td>
</tr>
<tr>
<td>Policies and procedures for the identification, consideration, deliberation, and resolution of ethical issues</td>
<td>11.2.1</td>
</tr>
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Specific Examples

<table>
<thead>
<tr>
<th>SPECIFIC EXAMPLES REQUIRED TO BE UPLOADED FOR REACCREDITATION</th>
<th>MEASURE</th>
</tr>
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<tbody>
<tr>
<td>Examples of primary data that have been collected and incorporated into the community health assessment since it was initially adopted</td>
<td>1.1.3</td>
</tr>
<tr>
<td>Examples of the collect of public health data</td>
<td>1.3.1</td>
</tr>
<tr>
<td>Examples of programs using data to revise/improve a program</td>
<td>1.3.3</td>
</tr>
<tr>
<td>Examples of analysis of an issue that included multiple factors through the consideration of data from multiple databases and/or data sources</td>
<td>1.3.4</td>
</tr>
<tr>
<td>Example of the use of the department’s logo and of signage inside or outside the health department facility</td>
<td>3.2.2</td>
</tr>
<tr>
<td>Examples of how the health department integrates brand messaging into organizational communication strategies and external communications</td>
<td>3.2.3</td>
</tr>
<tr>
<td>Examples of the use of culturally sensitive and/or linguistically appropriate communication for the population served</td>
<td>3.3.2</td>
</tr>
<tr>
<td>Examples of implementation of the health department’s written risk communication plan during a crisis, disaster, outbreak, or other health threat</td>
<td>3.3.4</td>
</tr>
<tr>
<td>Examples of how the media carried a public health message from the health department to the public</td>
<td>3.3.6</td>
</tr>
<tr>
<td>After Action Report of a real emergency or exercise for an emergency</td>
<td>5.4.4</td>
</tr>
<tr>
<td>Examples of information and education provided to those who adopt laws concerning the actual or potential impact on public health</td>
<td>6.1.2</td>
</tr>
<tr>
<td>Examples of the health department’s communication with the public about public health related laws and their purpose and/or importance to the public’s health</td>
<td>6.2.1</td>
</tr>
<tr>
<td>Examples of the health department’s communication on a topic provided through two different communication vehicles</td>
<td>6.2.3</td>
</tr>
<tr>
<td>Examples of how regulated entities or individuals who engage in regulated activities are informed of the law and compliance requirements</td>
<td>6.3.1</td>
</tr>
<tr>
<td>Examples of information provided to the governing entity concerning the health department’s activities, programs, and public health impact</td>
<td>12.1.3</td>
</tr>
</tbody>
</table>
Reminders: Adopted Items and Examples

Domain Team:
• Provide evidence of authenticity & Date Requirements
• Highlight and/or bookmark the areas you want reviewers to see
• Use Cover Pages to point to location of specific requirements
• Use examples that are within PHAB’s Scope of Authority

RCT:
• Upload in correct orientation – not sideways
• Check signature lines
• No confidential information / No drafts
• PDF Only
Roles and Responsibilities
**Domain Team Leads (DTLs)**

<table>
<thead>
<tr>
<th><strong>Guide Domain Teams through reaccreditation Documentation Preparation Process</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Guide</strong></td>
</tr>
<tr>
<td><strong>Facilitate</strong></td>
</tr>
<tr>
<td><strong>Coordinate</strong></td>
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<tr>
<td><strong>Manage</strong></td>
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<tr>
<td><strong>Analyze</strong></td>
</tr>
<tr>
<td><strong>Communicate</strong></td>
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</table>
## Domain Team Leads (DTLs)

<table>
<thead>
<tr>
<th>Domain</th>
<th>Team Leads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domain 1</td>
<td>Community Health Assessment Trang Nguyen (OPHP)</td>
</tr>
<tr>
<td>Domain 2</td>
<td>Investigate Ernie Clement (CCH-DEPI-BHAI)</td>
</tr>
<tr>
<td>Domain 3</td>
<td>Inform and Educate Gary Holmes (PAG)</td>
</tr>
<tr>
<td>Domain 4</td>
<td>Engagement with Community Assante Shipp-Hilts (OPHP)</td>
</tr>
<tr>
<td>Domain 5</td>
<td>Public Health Policies Karen Hagos (AI)</td>
</tr>
<tr>
<td>Domain 6</td>
<td>Enforce Public Health Laws Richard Thomas (DLA)</td>
</tr>
<tr>
<td>Domain 7</td>
<td>Access to Health Care Services Jan Chytilo (OPHP)</td>
</tr>
<tr>
<td>Domain 8</td>
<td>Competent Public Health Workforce Tom Reizes (OPHP)</td>
</tr>
<tr>
<td>Domain 9</td>
<td>Quality Improvement Robert Schmidt (SPPIG)</td>
</tr>
<tr>
<td>Domain 10</td>
<td>Evidence-Based Public Health Ian Brissette (CCH-DEPI-DCDP)</td>
</tr>
<tr>
<td>Domain 11</td>
<td>Admin and Management Capacity Mary Beth Hefner (DOA)</td>
</tr>
<tr>
<td>Domain 12</td>
<td>Governing Authority Sylvia Pirani (OPHP)</td>
</tr>
</tbody>
</table>
## Domain Team Members

### “Tell the Story” of How NYSDOH Demonstrates Conformity to PHAB Reaccreditation Domain Measures

| **Inform** | NYSDOH staff from centers/offices demonstrate:  
|            | • Program knowledge and public health experience and expertise during team discussions  
|            | • documentation preparation, and when connecting departmental activities to domain intent |
| **Analyze** | Assess PHAB Reaccreditation Standards and Measures to:  
|            | • Identify NYSDOH programs, processes, policies, and plans that meet PHAB requirements  
|            | • Detect gaps and risks and recommend resources to address concerns  
|            | • Provide documentation, write narratives, and describe plans for advancement in areas addressed by requirements |
| **Engage** | Attend team meetings and complete deliverables in a timely manner |
| **“Listener”** | Participate in Orientation, Domain Gap Analysis and Narrative Writing Training. Consult with DTL and designee’s section leadership to determine value of participation as a Domain Team Member and/or Domain documentation reviewer. |
## Next Steps – Domain Team Timeline

<table>
<thead>
<tr>
<th>DATE</th>
<th>ACTIVITY</th>
<th>LOCATION</th>
</tr>
</thead>
</table>
| May 22\textsuperscript{nd}, 2018 9:30am-12:30pm | **Conduct Domain Team Orientation and Gap Analysis Meeting:**  
  • Meet with and Review Your Domain  
  • Assess Gaps in Team and Ability to Meet Each Measure  
  • Consider Measure-specific Workgroups  
  • Plan for Next Individual Domain Meeting | SPH CR 110A  |
| May – June 2018            | **Domain Team Lead (DTL) & Members Schedule 1st Follow-up Meeting:**  
  • Participate in a Strategic Plan Training & Narrative Writing Training  
  • Determine Domain Team Meeting Schedule  
  • Establish Domain and Measure Narrative Writing Teams | TBD          |
| June 2018 – January 2019   | **DTL & Members Work Together to Address Their Assigned Domain(s)**  
  • Complete Required Documentation Forms  
  • Use Designated Reaccreditation SharePoint Site to Manage Required Documentation Collection | TBD          |
| February – June 2019      | • Provide Mock Review for Other Domains                                  | NA           |
| July 2019 and Beyond       | • Ad-hoc Support as Needed if Requested by the NYSDOH Reaccreditation Coordinating Team | NA           |
Next Steps – Domain Team Timeline (cont’d)

May – June 2018:

• Review the Domain Measures for which you are responsible
• Participate in Domain Review and Gap Analysis
• Work with Domain Team Lead (DTL) and Members
• Consider forming smaller teams around specific Measures

• Participate in upcoming training on:
  • Strategic Plan (May 3rd, 10th & 16th, enroll thru www.NYLeanrsPH.com)
  • Narrative Writing (June 5th)
• Stay connected
Next Steps – Domain Team Timeline (cont’d)

June 2018 – January 2019:
• Stay connected
• Work on your documentation
  • Specifically address the items listed in the Guidance for each Required Document
• Develop CONCISE narratives – More is not better
• Target completion date – January 31, 2019
Next Steps – Domain Team Timeline (cont’d)

February – April 2019
• Complete any outstanding documentation including:
  • “Continued Advancement” section
  • Cover sheets as needed

April – June 2019:
• Documentation Review
• Note any updates / changes
• Finalize:
  • Remove guidance from Forms
  • Check PDFs for version and orientation
Virtual Site Visit
Site Visit: Overview

- Opportunity for reviewers to ask questions about the HD documents, the health department, specific to the Measures and their Requirements.
- Reviewers will conduct the site visit virtually
- 4 hours
- Reviewers may ask for additional documentation – HD provide within 2 business days
My Biggest Concern Moving Forward Is?

- Finding the time – Competing priorities
- Reporting Writing Narratives
- Staff Turnover
- Staff Capacity
- Other – please specify
Thank You

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Thomas.Reizes@health.ny.gov