

Form Approved
OMB No. XXXX-XXXX
Expiration Date XX/XX/XXXX

Welcome

NORC at the University of Chicago (NORC) is asking health departments that have been reaccredited to participate in a survey about national public health department reaccreditation. The survey includes questions about the reaccreditation process, challenges, benefits, and short-term outcomes from reaccreditation. NORC is conducting this survey on behalf of the Public Health Accreditation Board (PHAB) and the Centers for Disease Control and Prevention (CDC) to evaluate the outcomes of the national public health accreditation program. The questions and topics in this survey are intended for the Director of your health department, or a designee, if the Director is unable to complete the survey. Thank you for participating in this survey.

Directions

Use your mouse to click on the circle or box to indicate your answer. Click "Next" to advance to the next page, and scroll to the bottom of each page and click "Previous" to return to the previous page. On the last page of the questionnaire, click "Done" to complete the questionnaire. Note: once you click "Done," you will not be able to edit or return to your questionnaire responses.

If you have technical difficulties, contact Megan Heffernan at heffernan-megan@norc.org or 301-634-9412. Thank you again for your participation.

Background

The survey is estimated to take 20 minutes or less to complete. Your open and honest feedback is appreciated. Findings from this assessment will be included in a report to PHAB and CDC and may be publicly available. All data will be presented in the aggregate. Report findings will not be linked to the organization that completed the survey. For more information about this assessment, please contact Project Director Michael Meit at meit-michael@norc.org.

CDC estimates the average public reporting burden for this collection of information as 20 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE MS H21-8, Atlanta GA 30333 (ATTN: PRA (0920-xxxx)).

Reaccreditation Survey (Survey 5)

Information About Your Health Department

* 1. Name of Health Department:

Note: This information will be used to analyze findings by health department structure, size, and geographic region; responses will not be linked to any specific health department.

* 2. Respondent Role:

- Director of Health Department
- Accreditation Coordinator
- Other, please describe:

Reaccreditation Survey (Survey 5)

PHAB Reaccreditation Standards and Measures

3. For each statement below, consider your impressions of and experiences with the PHAB Reaccreditation Standards and Measures. Please check the appropriate column to indicate whether you *Strongly Agree*, *Agree*, *Disagree*, or *Strongly Disagree*. If you are unsure, please select *Don't Know*.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
The PHAB Reaccreditation Standards and Measures allow for accurate measurement of the public health capabilities and performance in our health department.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The PHAB Reaccreditation Standards and Measures accurately assess health departments' improvements and advancements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The PHAB Reaccreditation Standards and Measures accurately reflect the practice of high-performing health departments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Reaccreditation Survey (Survey 5)

Reaccreditation Process

4. For each statement below, consider your impressions of, and experiences with, the PHAB Reaccreditation Process.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
The Population Health Outcomes Reporting requirement led our health department to place greater emphasis on tracking health outcomes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preparing for reaccreditation led our health department to make useful changes in the way we track population health outcomes (e.g., adding new metrics or benchmarks or changing targets)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The process of developing the Measure narratives provided insights on how to improve our health department's performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The process of developing the Measure narratives led us to assess our health department overall (i.e., as a system or cross-departmental, rather than program by program).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Reaccreditation Report provided insights about how to improve our health department's performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Please describe any strategic changes that your health department made as a result of the process of developing the Measures narratives?

6. Please provide any additional feedback about the PHAB Reaccreditation Standards and Measures and/or process to help inform improvements.

Accreditation Committee Action Requirements (ACAR)

7. Did the Accreditation Committee require your health department to develop any Accreditation Committee Action Requirements (ACAR)?

- Yes
- No
- Don't know

Reaccreditation Survey (Survey 5)

Accreditation Committee Action Requirements (ACAR)

8. It was beneficial for our health department to implement the activities identified in the ACAR.

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Don't know

9. Please provide additional comments about the ACAR process, if desired.

Challenges

Please answer the following questions about the challenges your health department experienced as you completed the PHAB Reaccreditation Process.

10. Did your health department experience any of the following challenges while applying for reaccreditation?

Select all that apply.

- Leadership changes
- Staff turnover or loss of key staff
- Limited staff time or other schedule limitations
- Decreased perceived value or benefit
- Decreased priority for our health department
- Decreased support from board of health or governing entity
- Decreased support from other elected leaders
- Decreased support from health department leadership team
- Limited funding or financial constraints
- Difficulty writing narrative responses
- Difficulty identifying population health outcomes to report
- Unanticipated costs
- None
- Other, please describe:

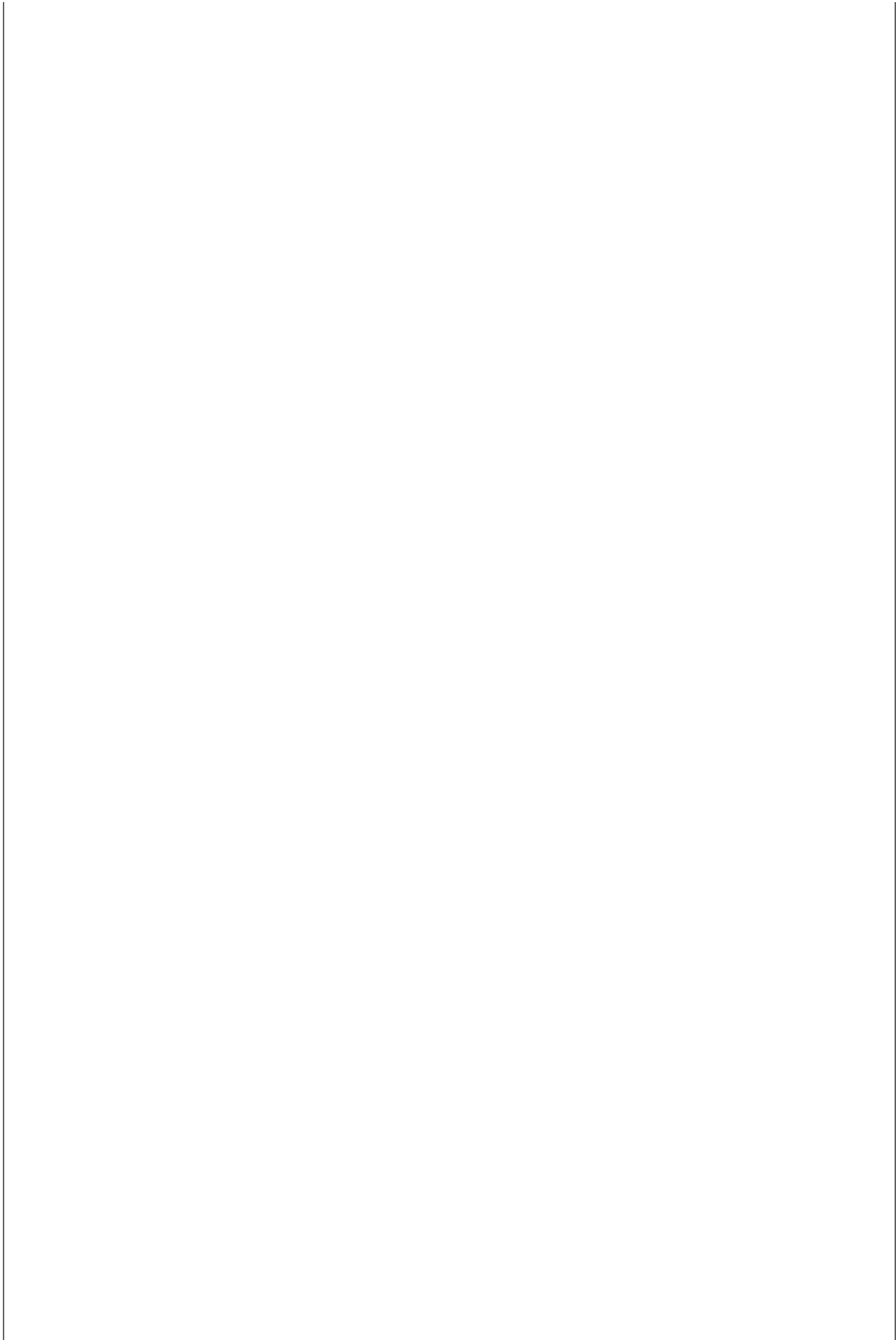
11. For each of the challenges selected above, please describe how your health department overcame the obstacle.

Reaccreditation Survey (Survey 5)

Benefits and Outcomes

12. For each statement below, consider the benefits or outcomes your health department may have experienced: 1) since you began your accreditation journey (including preparing for and gaining accreditation status) and 2) because of your preparation for and participation in the reaccreditation process. Please select all that apply. For example, if your health department experienced a particular benefit during initial accreditation and reaccreditation, select both columns.

	We have experienced this <i>since we began the accreditation journey</i>	We have experienced this <i>because of our preparation for/participation in the reaccreditation process</i>
Stimulated greater collaboration across departments or units within our health department	<input type="checkbox"/>	<input type="checkbox"/>
Improved integration across departments or units in our health department	<input type="checkbox"/>	<input type="checkbox"/>
Stimulated greater accountability and transparency within our health department	<input type="checkbox"/>	<input type="checkbox"/>
Strengthened employee pride in our agency	<input type="checkbox"/>	<input type="checkbox"/>
Improved our health department's overall capacity to provide high quality programs and services	<input type="checkbox"/>	<input type="checkbox"/>
Increased the extent to which our health department uses evidence-based practices for public health programs and/or business practices	<input type="checkbox"/>	<input type="checkbox"/>
Improved utilization of resources within our health department	<input type="checkbox"/>	<input type="checkbox"/>
Led us to compare our health department's programs, processes, and/or outcomes against other similar health departments as a benchmark for performance	<input type="checkbox"/>	<input type="checkbox"/>
Led our health department to apply health equity to internal planning, policies, or processes	<input type="checkbox"/>	<input type="checkbox"/>
Improved our health department's ability to identify and address gaps in employee training and workforce development	<input type="checkbox"/>	<input type="checkbox"/>
Strengthened the culture of QI in our health department	<input type="checkbox"/>	<input type="checkbox"/>
Improved the credibility of our health department within our community and/or state	<input type="checkbox"/>	<input type="checkbox"/>
Improved our health department's visibility or reputation to external stakeholders	<input type="checkbox"/>	<input type="checkbox"/>
Led to new opportunities for partnerships and/or collaborations	<input type="checkbox"/>	<input type="checkbox"/>
Strengthened our health department's relationship with key partners in other sectors (e.g., health care, social services, education)	<input type="checkbox"/>	<input type="checkbox"/>
Helped us to build relationships with new partners across sectors (e.g., health care, social services, education)	<input type="checkbox"/>	<input type="checkbox"/>
Helped our health department use health equity as a lens for identifying and addressing health priorities	<input type="checkbox"/>	<input type="checkbox"/>
Led to improved health outcomes in our community	<input type="checkbox"/>	<input type="checkbox"/>



Benefits and Outcomes

Consider the benefits or outcomes your health department may have experienced because of your preparation for and participation in the reaccreditation process.

13. Our health department experienced benefits from participating in the reaccreditation process that went beyond the benefits of participating in the initial accreditation process.

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Don't know

14. Please provide additional detail regarding the benefits of the reaccreditation process, if desired.

Quality Improvement and Performance Management

Please answer the following questions regarding the current quality improvement (QI) and performance management culture in your agency.

15. Indicate the level of familiarity your health department staff members have with QI.

- Have no knowledge of QI
- Subset of staff have familiarity with QI
- Majority of staff have familiarity with QI
- Subset of staff are knowledgeable and practice QI
- Majority of staff are knowledgeable and practice QI
- Majority of staff routinely practice/use QI
- Don't know

16. Currently QI in my agency is...

- Not practiced anywhere
- Talked about, but not required
- Conducted informally; sporadic program efforts
- Conducted formally in specific areas
- Conducted formally and agency-wide
- Our culture
- Don't know

17. Approximately what percentage of staff in your organization have received training in performance management and/or QI?

- 0-5%
- 6-25%
- 26-50%
- 51-75%
- 76-95%
- 96-100%
- Don't know

Workforce Development and Training

Please answer the following question about your health department's workforce development and training.

18. Select all workforce development and training activities currently implemented by your health department. *Select all that apply.*

- Include education and training objectives in performance reviews
- Allow participation in training during working hours
- Pay travel/registration fees for trainings
- Provide on-site training
- Have staff position(s) whose responsibilities include coordinating internal training for employees
- Provide employee reward and recognition programs
- Other, please describe:

Reaccreditation Survey (Survey 5)

Financial Status

19. For each statement below, consider the financial benefits or outcomes your health department may have experienced since becoming accredited.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	N/A
Accreditation has improved our health department's competitiveness for funding opportunities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accreditation has resulted in new funding for our health department.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accreditation has had a positive impact on our health department budget (e.g., helped us demonstrate our value and needs in budget discussions, or protected the health department against budget cuts).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. If you strongly agree or agree with any of the previous statements about financial status, please provide specific examples.

Reaccreditation Survey (Survey 5)

Additional Feedback

21. Our health department made the correct decision to apply for reaccreditation through PHAB.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
- Don't Know

22. Please provide additional feedback regarding reaccreditation, if desired.

Reaccreditation Survey (Survey 5)

Thank You

Thank you for your participation!