



North Carolina

LOCAL HEALTH DEPARTMENT ACCREDITATION

Annual Survey Report

North Carolina Local Health
Department Accreditation Program

2019

NCLHDA Annual Survey



- **Survey Overview**

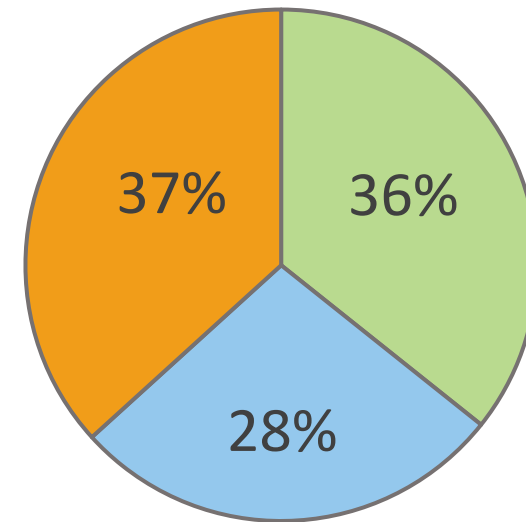
- General Satisfaction with Program & Process
- Site Visit & Adjudication (if within past year)
 - AACs & Health Directors only
- Program Trainings
- NCLHDA Dashboard*
- Program Communications
- LHD Administrative Information
 - Health Directors only

* New in 2019

2019 Survey Respondents

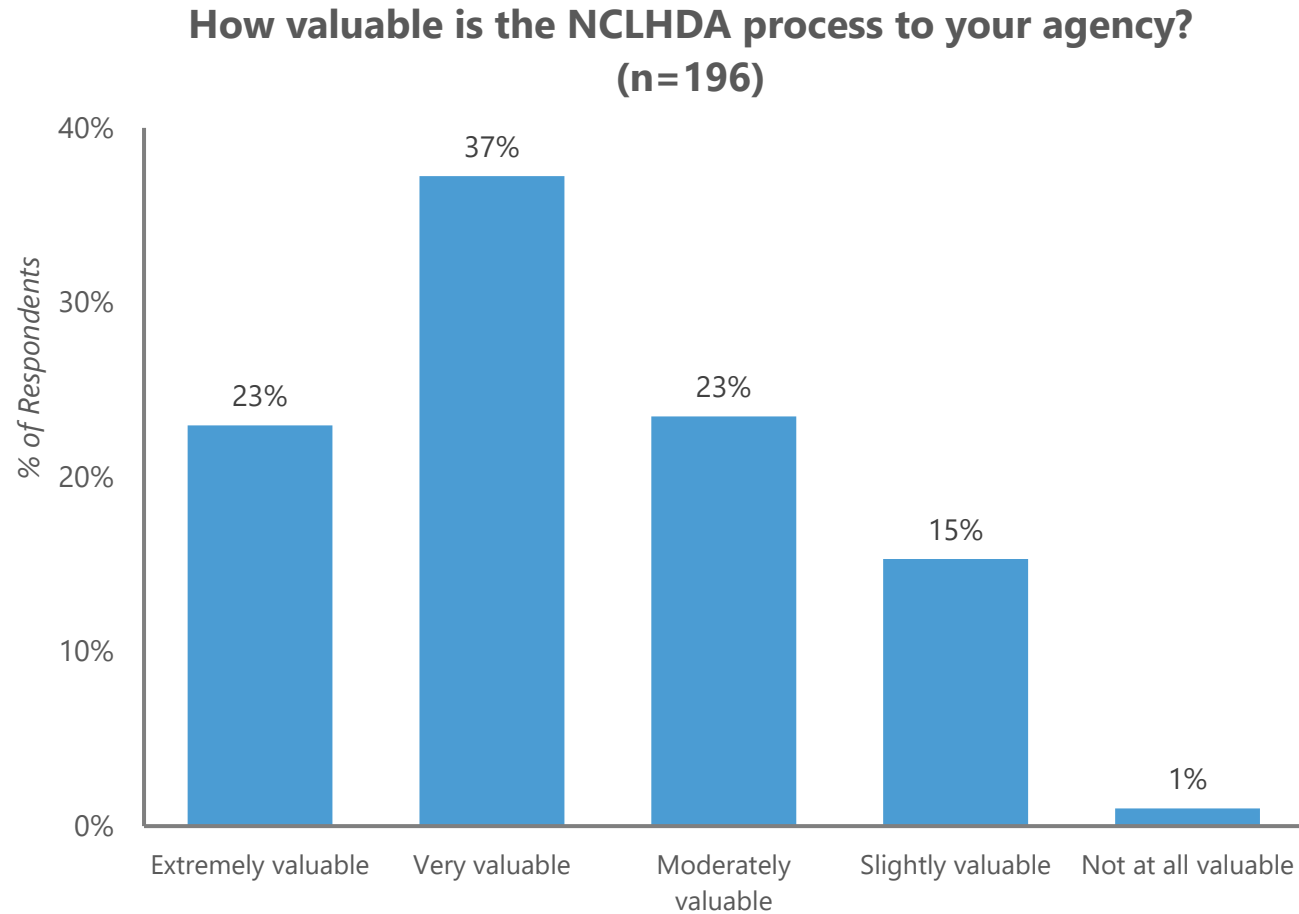
- 196 total responses
- Even distribution of Accreditation roles
- County was not asked of respondents to maintain anonymity

2019 Accreditation Survey Responses
(n=196)



- AAC (primary, co, backup) (70)
- Health Director (54)
- Other Accredited Team Member (72)

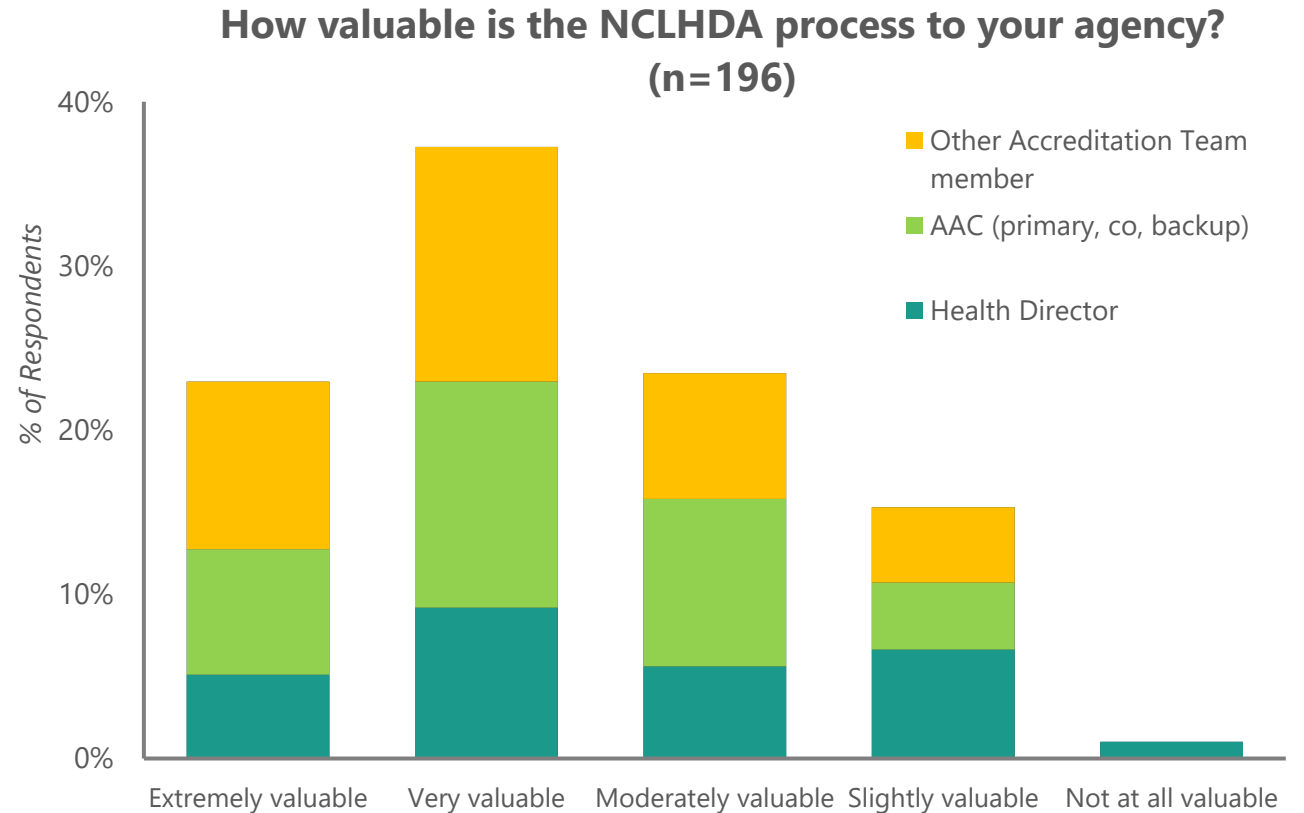
Overall Value of Program



- Over half (60%) viewed the process as Very or Extremely valuable
 - 16% Slightly or Not at all

Overall Value of Program by Respondent Type

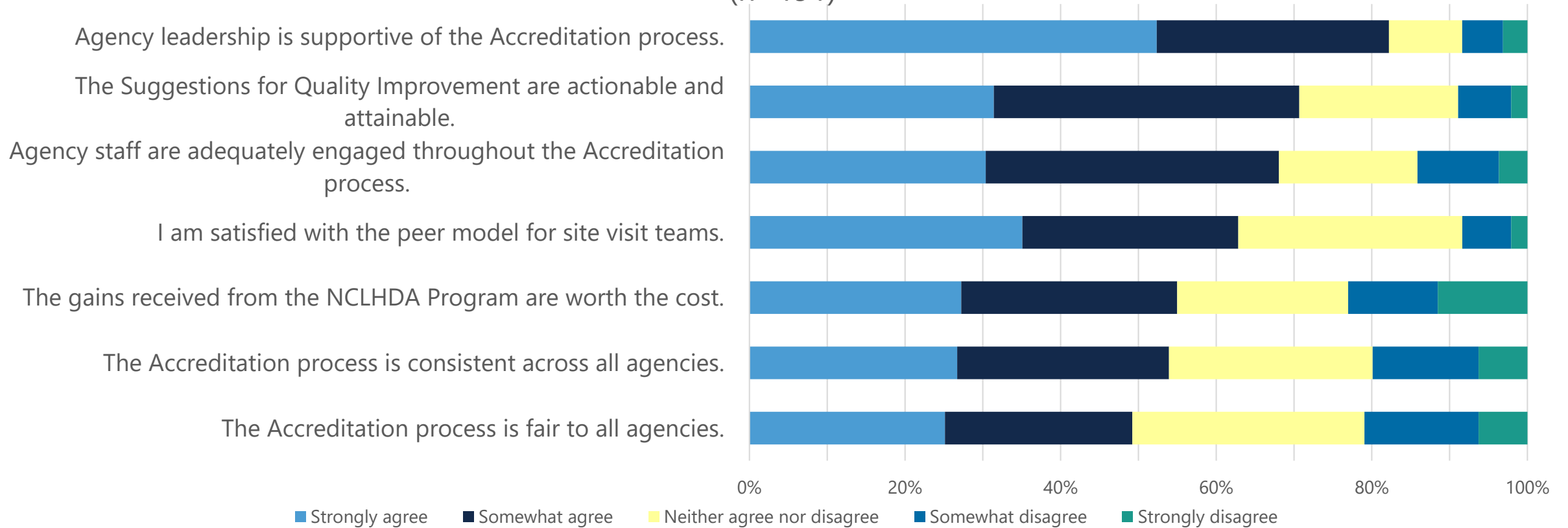
- Broken down by role, there is lower perceived value among health directors:
 - 52% Very or Extremely
 - 28% Slightly or Not at all



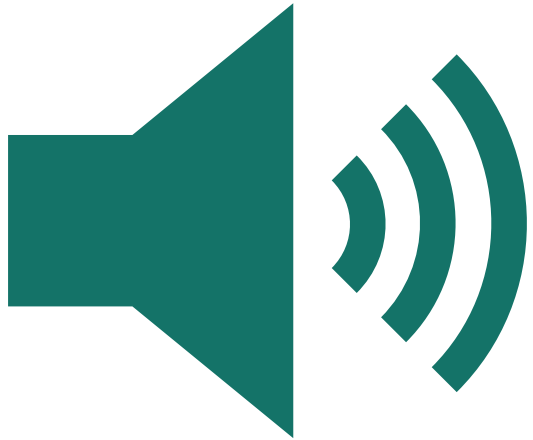
Program Satisfaction - Processes

Agreement with NCLHDA Process Statements

(n=191)



Program Satisfaction - Takeaways

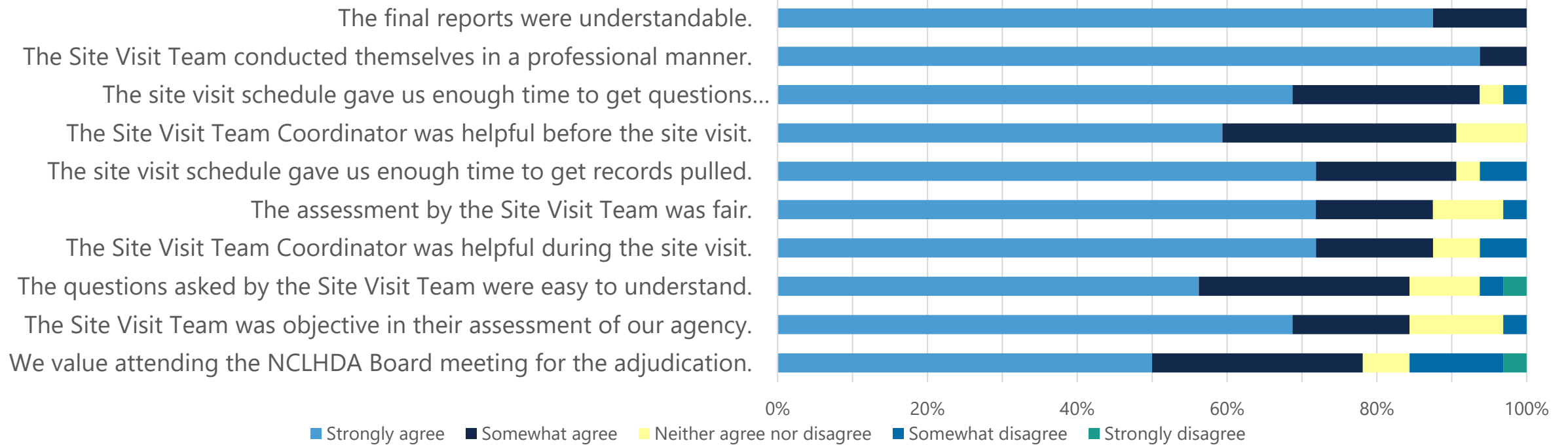


- For the NCALHD process, most agreed there is support for the process by agency leadership and that the SQL are actionable and attainable.
 - Continued perceptions of inadequate fairness and consistency across all agencies
 - Questions about cost/benefit of program
- This agreement was generally consistent across roles, although Health Directors typically disagreed more than AACs and Other Accreditation Team Members.

Site Visit Experience

32% had a site visit in the past year. Of the Health Directors and AACs:

Agreement with Site Visit Statements (n=32)



Following the Site Visit...

- All respondents had started to address the Suggestions for Quality Improvement
- 80% reported celebrating their agency's reaccreditation
 - Staff luncheon (30%)
 - Incentive items to staff (18%)
 - Other (33%)
- 75% shared a press release with the media



Areas Identified for Improvement

Overall process & program

- Concerns about resources spent to prepare for site visit process
- Demonstrating fairness & consistency across all agencies

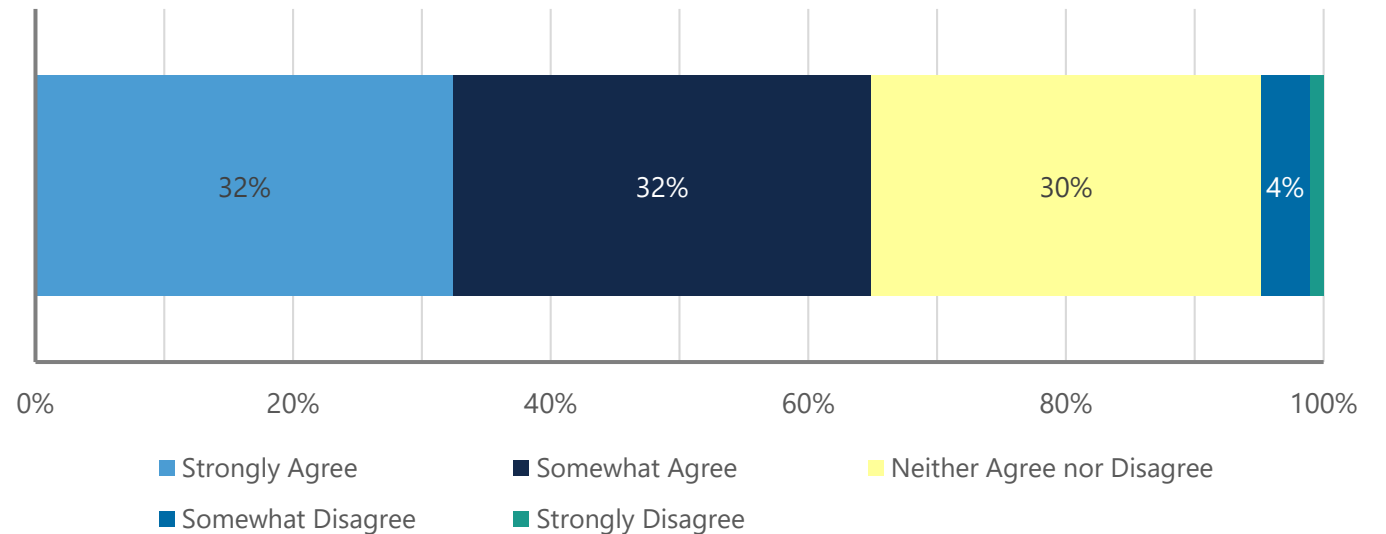
Site visit

- Ensuring consistency & objectivity of site visitors
- Doing away with antiquated method of selecting personnel records for review

Training Programs & Satisfaction

- 68% attended at least 1 NCLHDA training
- 64% agreed trainings met staff needs
 - 5% disagreed
- 61% had used skills/knowledge from trainings to assist accreditation team
- 50% had presented *Roles and Responsibilities of Boards of Health Related to NCLHDA* to their board within previous year

The trainings offered through the Accreditation Program adequately meet our staff's needs (n=185)



Dashboard Usage & Satisfaction

20% had started to use the Accreditation Dashboard for evidence submission

71% feel confident the dashboard will assist in tracking activities throughout the 4-year cycle

71% feel confident the dashboard will increase accountability among team members

NCLHDA Program Website & Communications



Over 80% agreed that program changes are clearly communicated and done in a timely manner

72% agreed the annual report is helpful

75% agreed the monthly highlights are helpful



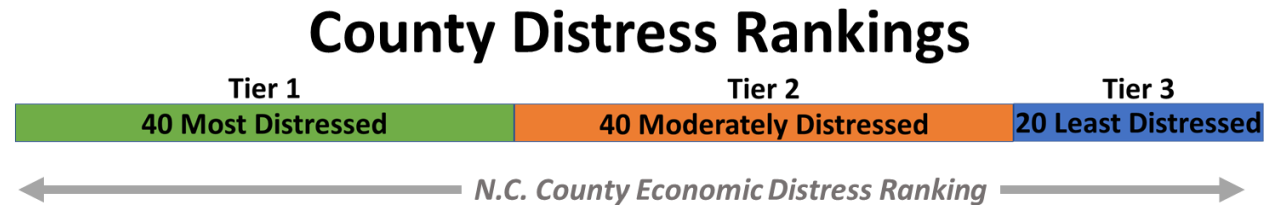
86% are satisfied with the NCLHDA website as a resource during the accreditation process



78% agreed the use of the NCLHDA website improved their experience with the accreditation process

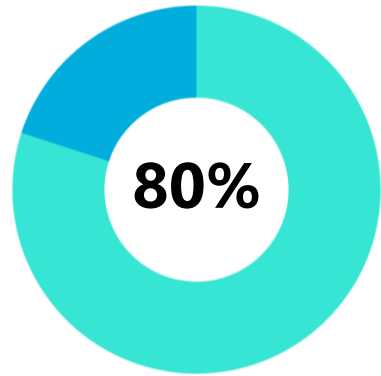
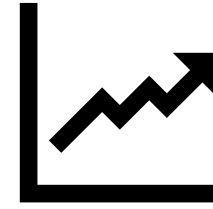
Health Director Questions

- 10% of Health Director respondents (54/85 participated) indicated they contracted with an outside agency for accreditation
- Within their agency, the average FTE dedicated for AACs for accreditation activities was 0.92 FTE (range from 0.0 to 3.0)
 - Highest investment was by Tier 2 agencies (1.13 FTE)
 - Tier 1 & Tier 3 were equivalent (0.69 & 0.70 FTE, respectively)

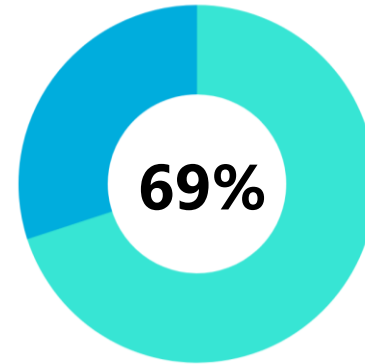


The average hours invested per month for accreditation activities was 24.3 hours
Highest time investment was in Tier 3 agencies (30.2 hours)
Tier 1 & Tier 2 were equivalent (23.1 & 23.5, respectively)

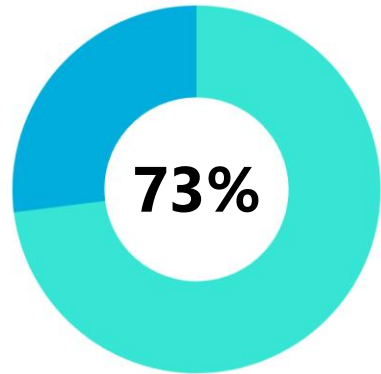
Quality Improvement



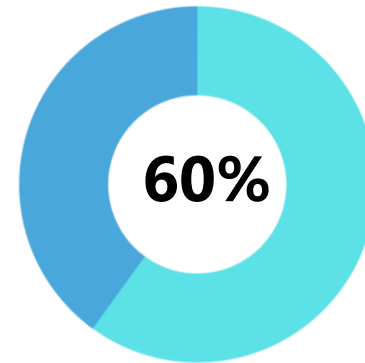
**Improves Specific
Processes and Policies
within Agencies**



**Stimulates QI and
Performance
Improvement
Opportunities within Our
Agency**

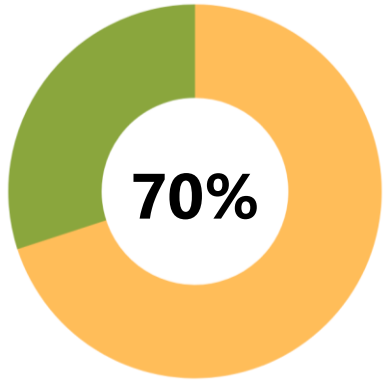
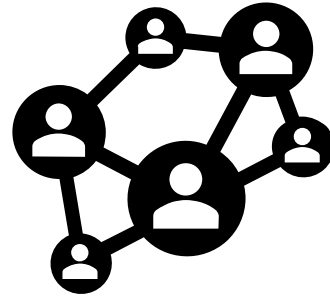


**Helps Our Agency Become
More Effective**

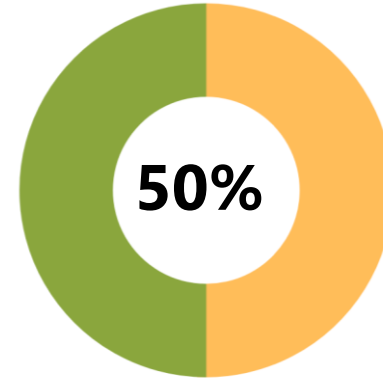


**Helps Our Agency
Become More Efficient**

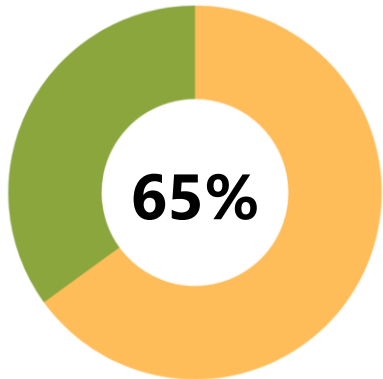
Relationships



**Gives Our Agency
Credibility with Our
Partners**

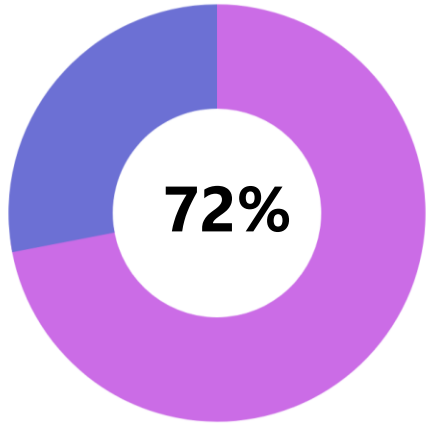
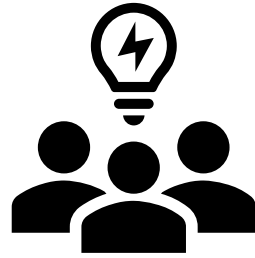


**Improves Relationships
with Our Community**

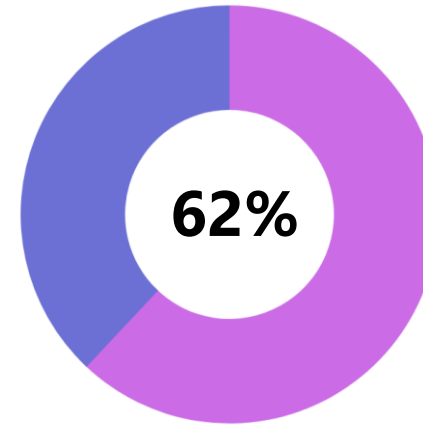


**Gives Our Agency
Credibility with Our
Community**

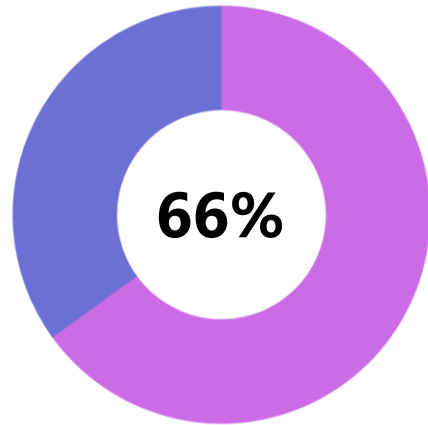
Strategy



**Challenges Our Agency
to Think About How It
Does Business**



**Gives Our Agency
Objective Information to
Request Funding and/or
Other Resources**



**Helps Our Agency Focus
on Key Priorities**

Other Identified Sources of Value

Internal



External



NCLHDA Annual Survey Summary

- Overall, satisfaction with all factors of NCLHDA Program though downward shift over past year is concerning



- **Next Steps:**

- Internal review of open-ended questions, specific comments & feedback
- Planning for continued program improvement

THANK YOU TO THE RESPONDENTS!!!