




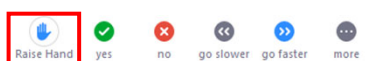
1

## To make comments:

Please keep your phones on mute until you have a question or comment. If you would like to make a comment, please put the question, chat box, raise your hand, or unmute your phone.

To **raise your hand** click **participants**  at the bottom of your screen to access the participant panel and the option to raise your hand.

Use the button at **the bottom of the participant panel** to “**Raise your Hand**”



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# Fall Webinar Overview



## **The Accreditation Origin Story**

November 5

10-11:30 a.m.

Registration is open

North Carolina was the first state to legislatively mandate local health department accreditation. After fifteen years of implementation the program is in the midst of a long-term participatory revision process. This webinar will provide an overview of the Senate Bill 804 which created the accreditation program and the accreditation standards as established by the rules commission. Anyone who is interested in provided feedback during the open comment period of the HDSA Interpretation document revision will benefit from attending this webinar.

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## Presenters

- Lori Rhew, MA, Training and Accreditation Coordinator, North Carolina Institute for Public Health
- Ariana Lawrence, Human Services Planner/Evaluator, Alamance County Public Health

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## Overview

- Navigating the dashboard
- Performing the basic functions for each user type
- Site visit review process using the dashboard
- General process and timeline for using the dashboard

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## Game Plan



OVERVIEW OF THE  
DASHBOARD (SLIDES)



ACCESS THE DASHBOARD TO  
REVIEW STEPS REAL-TIME

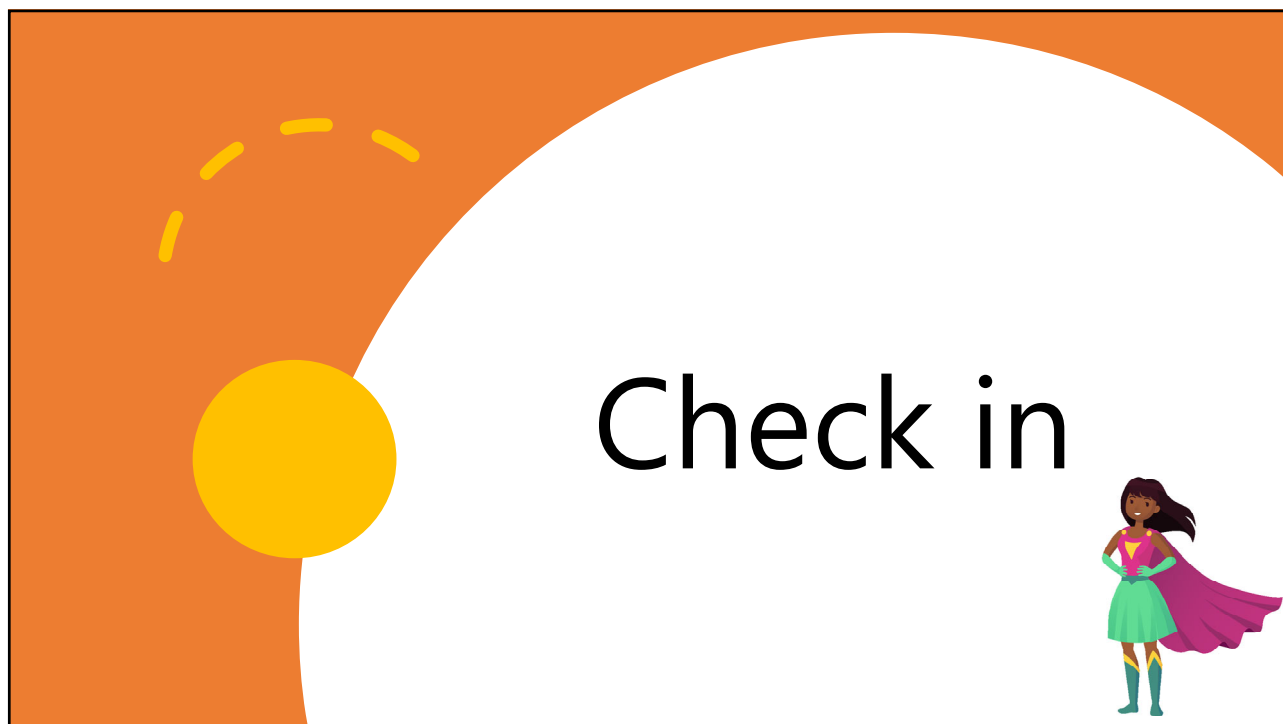


LESSONS LEARNED FROM  
ALAMANCE



ASK QUESTIONS AT ANY  
TIME!!!!

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# Dashboard

**A Public Health Performance Management System**

- Cloud-based
- Real-time

An icon showing three stylized human figures (two adults and one child) walking up a black line graph that trends upwards. An orange circle is located in the bottom right corner of the slide.A decorative dashed yellow arc is positioned above the title "Dashboard".

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## Health Departments can.....



Add activity notes –  
HDSAI narrative



Upload & link  
documents



Monitor status of  
activities



Run reports



Send automated  
emails

## Site Visitors can...



Download and  
review evidence



Ask questions



Post status of review



Run reports

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## Dashboard Users



Each health department  
gets 10 users



Users can be assigned  
different levels of access

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# Additional Users

10 Users already included

Up to 50 users - \$60/user per year

51-124 users - \$12/user per year

125 and up - \$6/user per year



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## User Types - Permissions

### Quick Update Only

- Update activities they have been assigned

### User

- Update any activity

### Manager

- Update any activity
- View hidden services/hide services

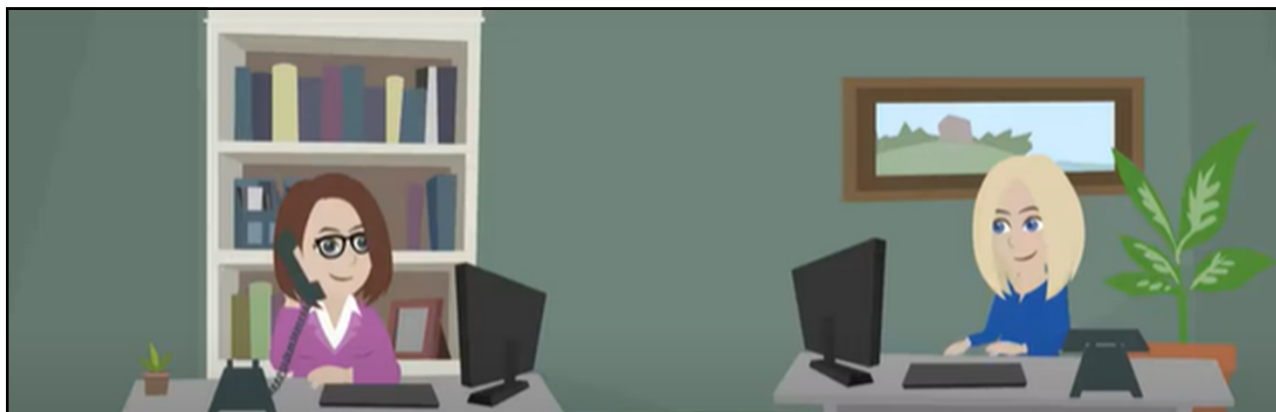
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## User Types - Permissions

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Organizational Administrative	Partner
<ul style="list-style-type: none"><li>• Update any activity</li><li>• Change user permissions</li><li>• Assign tasks</li><li>• Set up notifications</li><li>• View hidden services/Hide services</li></ul>	<ul style="list-style-type: none"><li>• Can update activities</li></ul>

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## Super Users

- Amy Belflower Thomas, NCLHD Accreditation Administrator
- Lori Rhew, Training and Accreditation Coordinator

**Email us:** [NCLHDaccreditation@unc.edu](mailto:NCLHDaccreditation@unc.edu)

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## NCLHDA Dashboard Overview

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### Keep in Mind....

#### We provide:

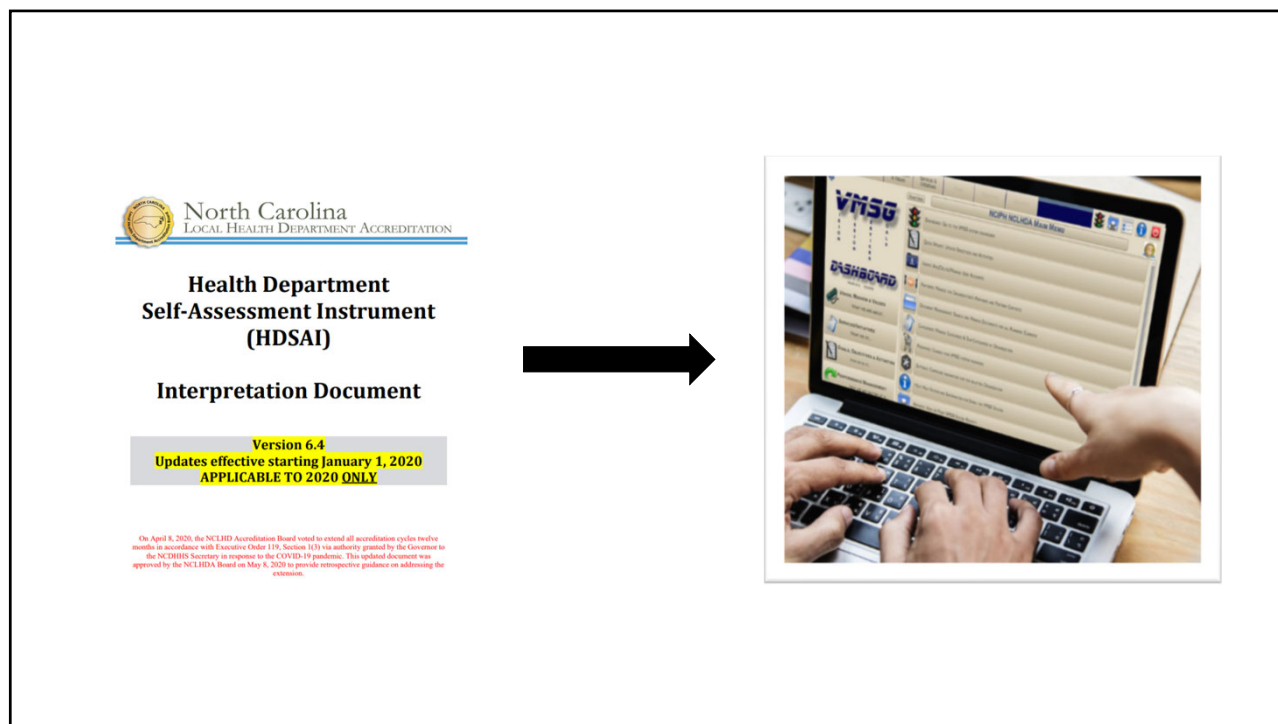
- A basic orientation
- The requirements for the accreditation process

#### You decide:

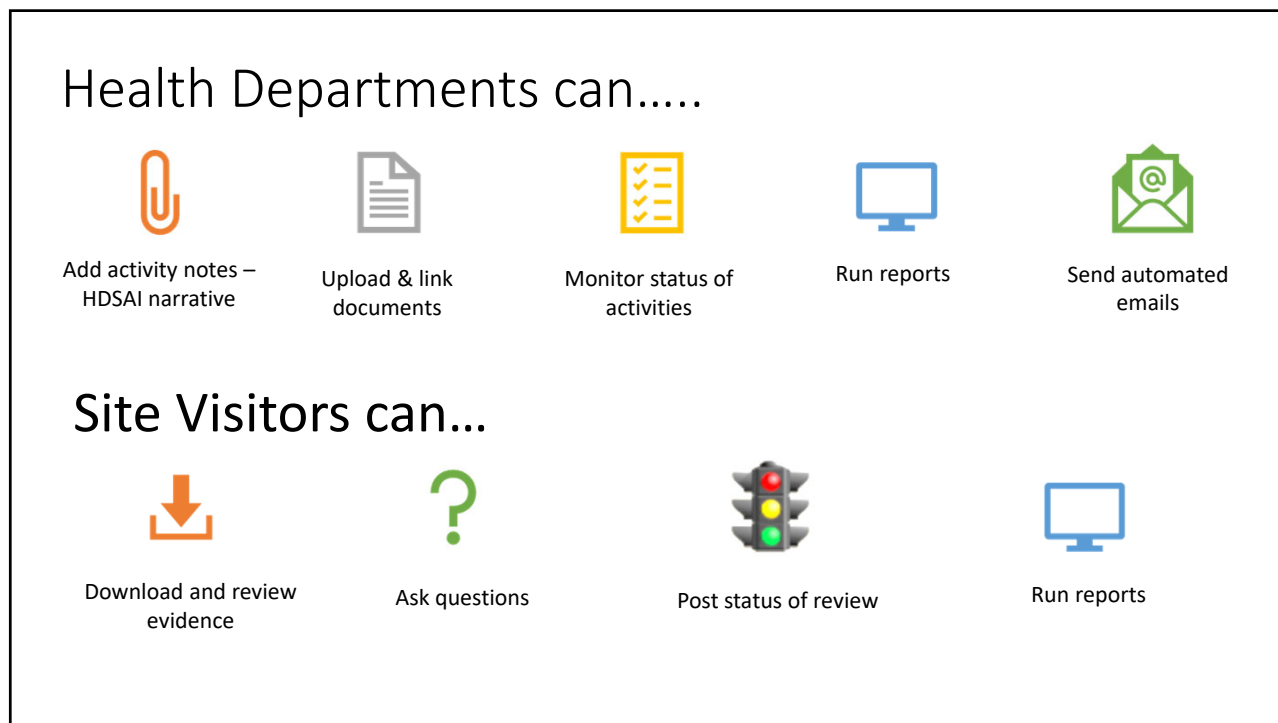
- What works best for your agency

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## Use Browsers in this Order of Preference:



Google Chrome – latest version



Firefox – latest version

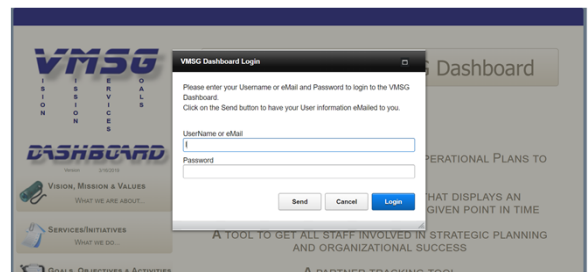


Please DO NOT use Microsoft  
Internet Explorer or Edge Browsers  
– many known issues

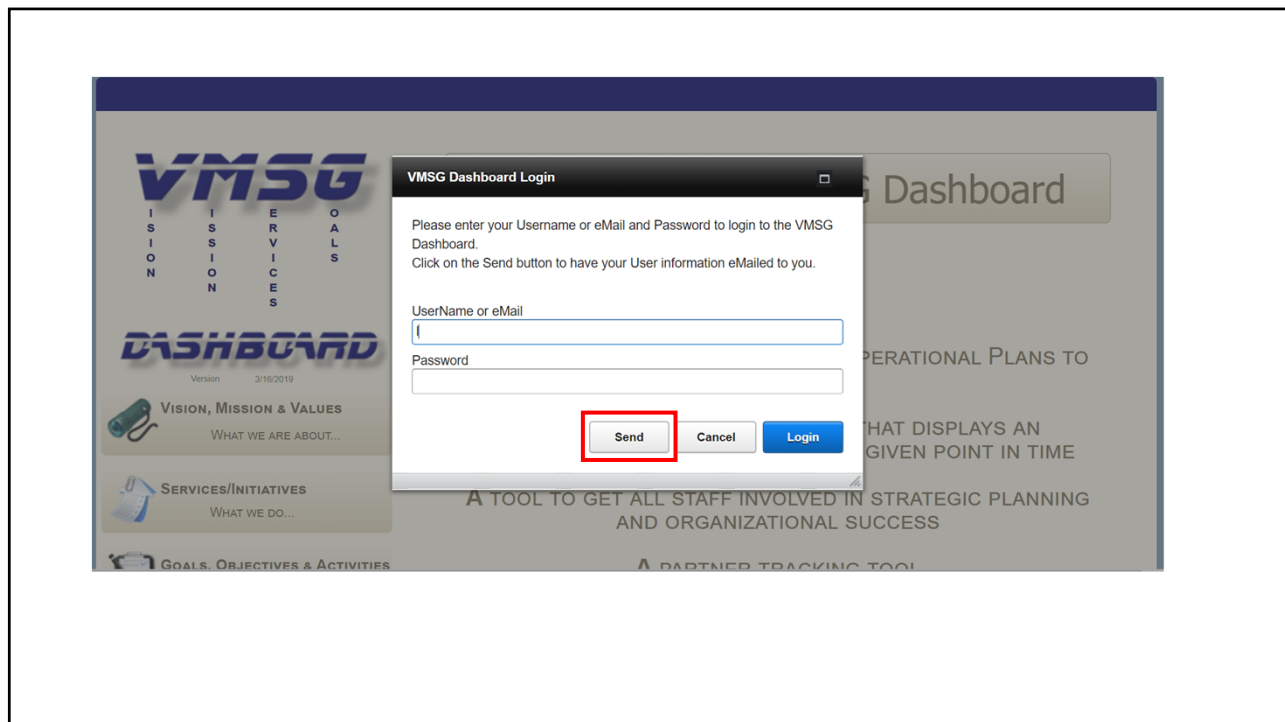
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## Website

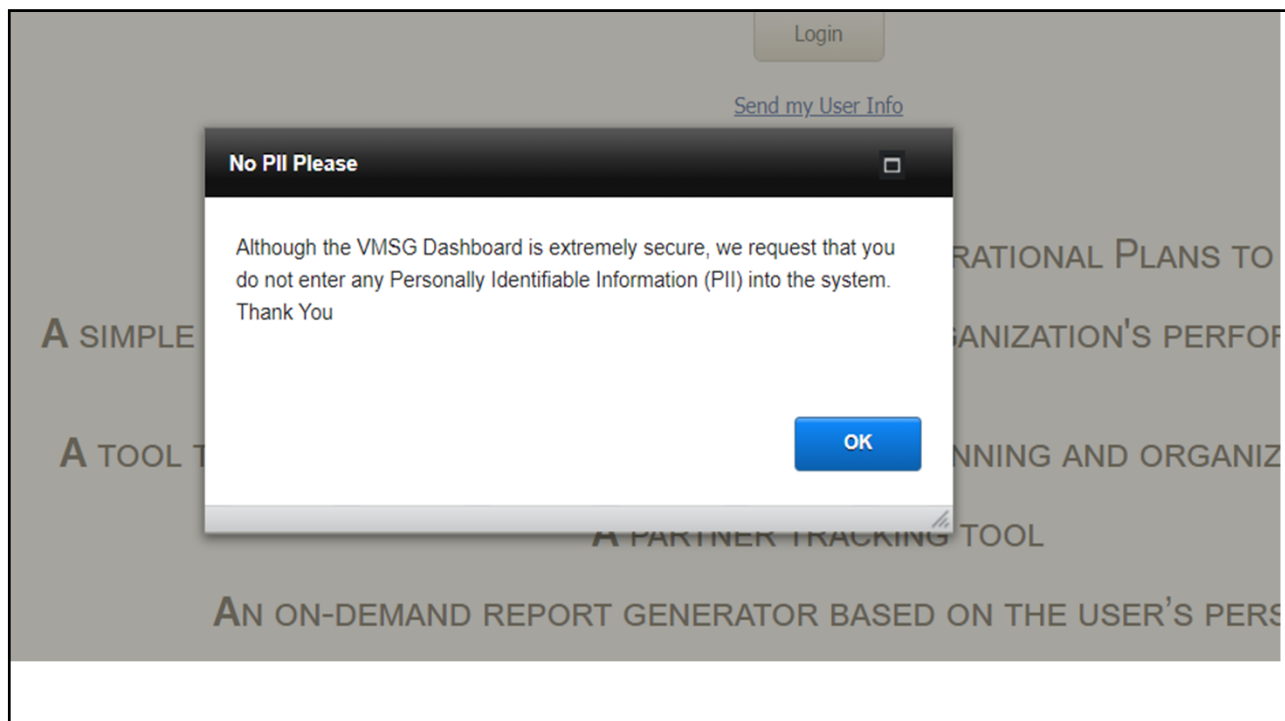
Login.VMSGDashboard.com



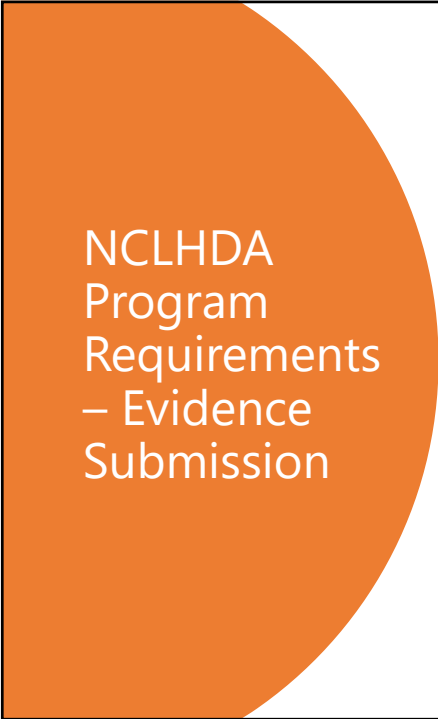
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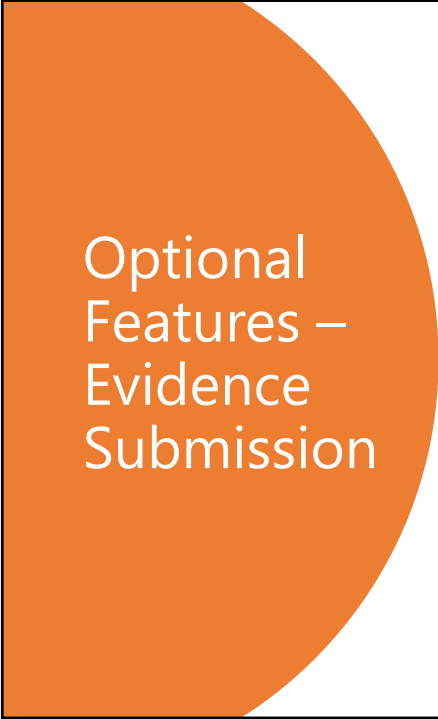
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## NCLHDA Program Requirements – Evidence Submission

- Narrative is added for each activity
  - Documents are uploaded, named and described appropriately
- 

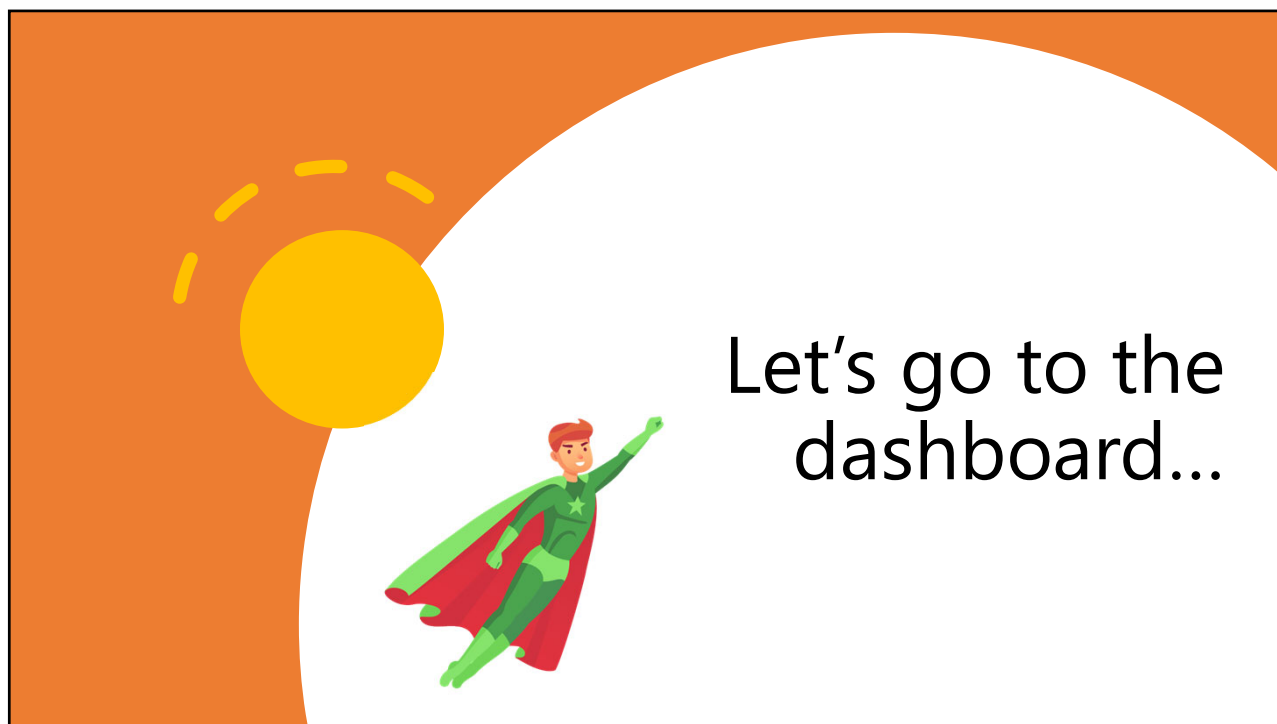
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## Optional Features – Evidence Submission

- Add start and end dates to each activity (option for a mass start and end date)
  - Assign leads and team members to each activity
  - Use lights and status indicators
  - Set up email notifications
- 

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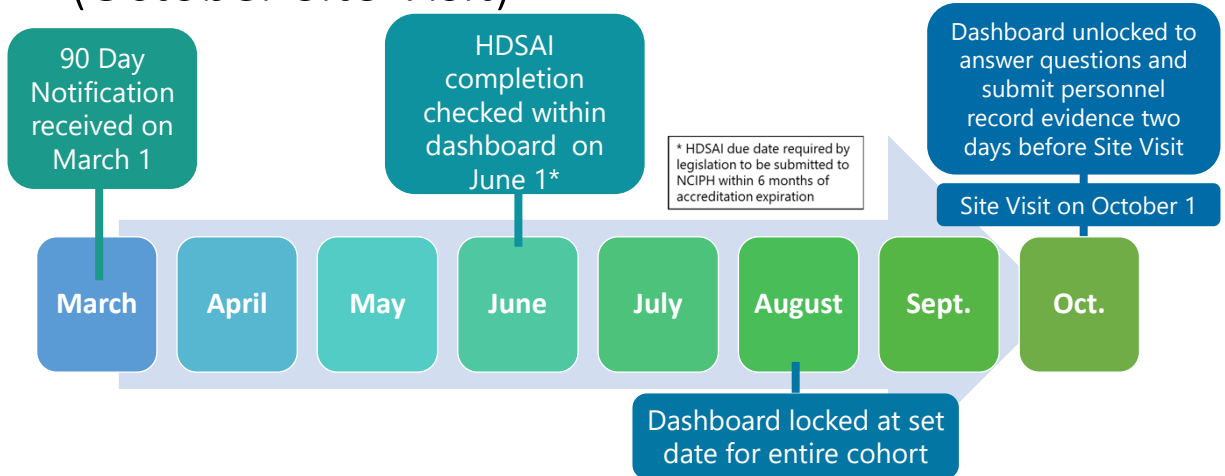
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## Dashboard Process

- HDSAI Due Date – Good faith effort to have evidence in the dashboard.
- Dashboard locked to the health department.
- Site Visitors gain access and conduct review.
- Dashboard open to the health department two days before the site visit.
- Site Visit conducted.
- Following the site visit the health department users will have *view only* access to the dashboard.
- Once all site visits in the cycle are complete – a new Group is provided.  
\*specific dates outlined in the 90-day notification letter\*

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## Evidence Submission Process Sample (October Site Visit)



- Questions submitted and personnel records selected two days before Day 1 of Site Visit

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## Site Visit Process: Lights

The Site Visitors will use the following system:



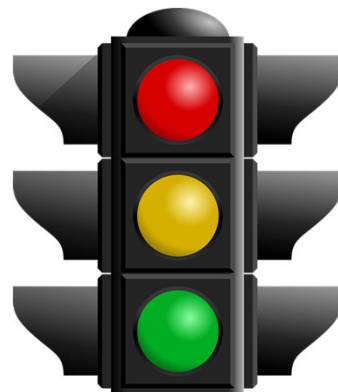
Activity met



Question for the Activity or onsite review needed



Activity not met



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## Site Visit Review Process: Lights

Prior to review:



When the dashboard is locked to the health department, all lights are turned to red.

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## Site Visit Review Process: Lights

When the Site Visitors conduct their initial review, they will change lights to yellow or green using this system:



Activity met



More information needed – Site Visitor question or on-site review needed

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## Site Visit Review Process: Lights

After the Site Visit when the health department receives their Site Visit Team Report:



Activity met



Activity not met

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## In Summary



**When the dashboard is locked, all lights will be red.**



**After the site visitors conduct their initial review, all lights should be green or yellow.**



**If a light is green, the word "met" should be typed in the reviewer box.**



**If a light is yellow, there should be a question, or a comment listed in the reviewer box.**



**At the conclusion of the site visit, all lights should be green or yellow.**



**When you receive your Site Visit Report, all lights should be red or green.**

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Let's go back to the dashboard...

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## Reminder...

- During the site visit when you are adding new evidence add the "NEW EVIDENCE" in front of the name of the document.
- If you no longer have any new evidence to add in response to a question during the site visit, please note this in the health department response box.
- Once the exit conference is completed, health department users will have *view only* access to the Group.

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## Reminder....

### We provide:

- A basic orientation
- The requirements for the accreditation process

### You decide:

- What works best for your agency

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## Background Information

- I have been an AAC in Alamance since 2014
- My duties vary at the health department right now but I am a special projects coordinator and clerk to the Board of Health in Alamance (which is actually very helpful to be the AAC and BOH Clerk)
- For our 2015 accreditation site visit, I spent workdays and weekends hyperlinking a 200+ page word document for accreditation evidence.. YUCK
- For our 2019 accreditation site visit, I spent my mornings sipping coffee watching the dashboard traffic light go from red... to yellow... to gold... ☺
- In summary... ACCREDITATION DASHBOARD>HYPERLINKING

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## Why do I love the dashboard?

- Assigning activities to staff
- Notification system to staff
- Traffic signal

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# Assigning Activities to Staff

- Keeps staff accountable
- Takes the burden off of AAC's to feel like they have to do it all
- Gets staff more involved in the process
- One thing I learned: MUST train the users of the dashboard how to document properly

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# Documenting

- The dashboard will put evidence document items in alphabetical order. Figure out an organization system that will match your notes and evidence so the SVT can read through items quickly.
- Example: Activity 38.2 For each year since the previous site visit, board of health minutes reflecting review of two annual reports related to the community's health.
  - Alamance labeled **notes** and **documents**:
  - Year 1- No. 1
  - Year 1- No. 2
  - Year 2- No. 1
  - Year 2- No. 2
  - Year 3- No. 1
  - Year 3- No. 2
  - Year 4- No. 1
  - Year 4- No. 2

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Year 1-No.1: BOH Minutes dated February 16, 2016 showing Ms. Shoffner providing the board with an immunization assessment done from the state showing immunization compliance with the health department and county wide. At this meeting Ms. Shoffner also compared flu vaccine activity from 15/16 to 16/17.

Year 1 No.2: Environmental Health Committee meeting minutes showing Environmental Health director providing the committee with a calendar year report. This report shows a total of environmental health services provided.

Year 2 No.1: BOH minutes dated December 13, 2016 showing a presentation about infant mortality and preterm birth statistics.

Year 2 No.2: BOH minutes dated February 21, 2017 showing a TB presentation provided by the DON at the request of the BOH since there has been an increase in TB cases

Year 3 No.1: BOH minutes dated April 17, 2018 showing a presentation for the Child Fatality Taskforce. Discussions took place regarding child deaths for 2017 and the system problems that were identified with these deaths.

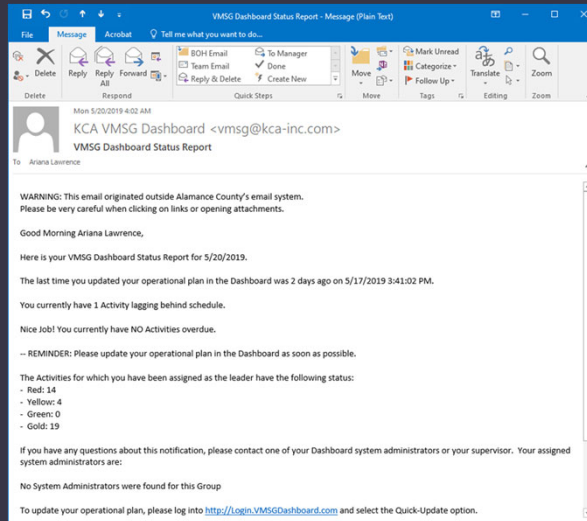
Year 3 No.2: BOH minutes dated October 16, 2018 showing Environmental health director shared a map of Alamance County that indicated where rabies cases have taken place since 1997.

Year 4 No.1: BOH minutes dated April 16 2018 showing Kim Jernigan, Dental Hygienist with DPH providing oral health status for 16/17.

Year 4 No.2: BOH minutes dated April 16, 2019 showing Elon University Service Learning students providing a presentation to the BOH about annual Opioid statistics in NC and Alamance County, and recommendations for the Task Review Team, as a project that is to be completed with the use of grant funding.

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# Notification to Staff- VMSG Dashboard Status Report



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# Accreditation Status Summary



Alamance used this is a staff submission of evidence quick look

**RED** means the activity was not complete

**YELLOW** means the staff member submitted evidence and is ready for the AAC to review

**GREEN** means it is done but may need a word document switched to PDF

**GOLD** meant it was perfectly done and do not touch it again!

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For additional information about  
the NCLHDA Dashboard visit:  
[NCLHDaccreditation.unc.edu/updates  
/nclhda-dashboard/](https://NCLHDaccreditation.unc.edu/updates/nclhda-dashboard/)

For questions please email:  
[NCLHDaccreditation@unc.edu](mailto:NCLHDaccreditation@unc.edu)

The NCLHDA Program is part of the North Carolina Institute for Public  
Health at the UNC Gillings School of Global Public Health.



North Carolina  
LOCAL HEALTH DEPARTMENT ACCREDITATION

