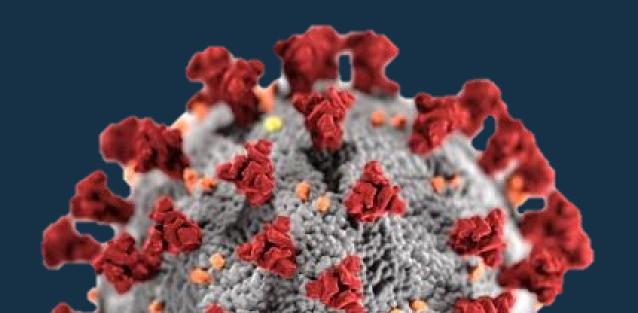


# COVID-19 RESPONSE AND THE NCLHD ACCREDITATION HDSAI:

# A Guide for Potential Evidence

Version 2.0
Updated August 1, 2021



Though local health departments (LHD) in North Carolina were incredibly busy and devoted to COVID-19 pandemic response in 2020 and 2021, this work is tied closely to assuring the ten essential services of public health. Thus, there are likely many opportunities to use work done during the 2020 and 2021 COVID-19 response as evidence for N.C. Local Health Department Accreditation (NCLHD Accreditation). This guide has been created to highlight potential evidence opportunities- not all things listed will be relevant to all health departments and whether an activity is ultimately "Met" will depend on how thorough the agency presents their evidence and how applicable the evidence is. Therefore, submission of evidence related to these suggestions is not binding and should not be considered as automatically met. Likewise, these suggestions are applicable to the full details in the HDSAI Interpretation guidance.

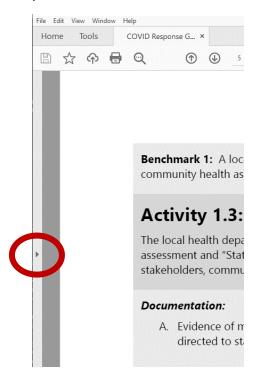
Also, as the pandemic response continues to unfold, new ideas for evidence will come to light so this Guide will be an evolving document. We strongly encourage LHDs to regularly review the guide and send any other suggestions for potential evidence to the NCLHD Accreditation program for inclusion in future revisions.

\*Note that the HDSAI Interpretation Document template used throughout is Version 6.5 with updates effective starting January 1, 2020. However, the material addressed throughout this document can likely be applied as evidence for the full calendar years of 2020 and 2021.

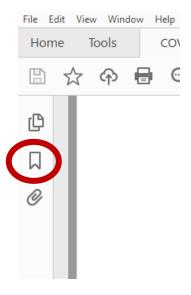
We would like to acknowledge and thank Transylvania Public Health and Mecklenburg County Public Health for contributing examples of what they plan to use for evidence related to their county's COVID-19 response.

# **How to Use This Document**

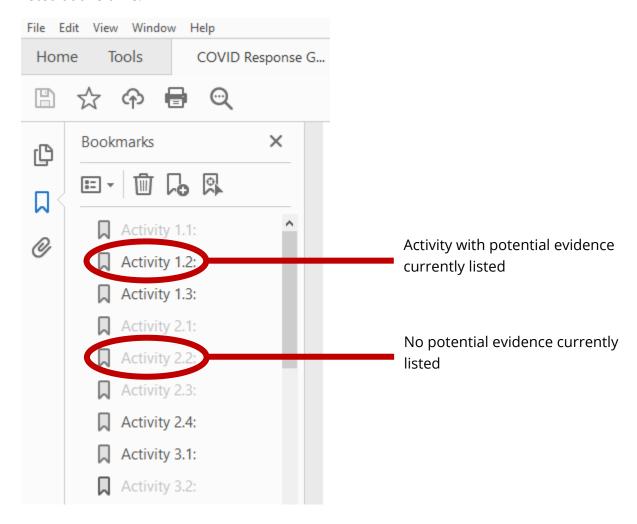
To navigate through this document, use the bookmarks panel. To open the bookmarks panel, click the small arrow on the left side of the screen:



In the menu that opens, click the bookmark symbol:



In the bookmarks panel, each Activity is displayed. Activities in black text are those with potential evidence currently listed. Activities in gray are those with no potential evidence listed at this time.



**Benchmark 1:** A local health department shall conduct and disseminate results of regular community health assessments.

# **Activity 1.1:**

The local health department shall conduct a comprehensive community health assessment every 48 months. The community health assessment must fulfill each of the following requirements:

- Provide evidence of community collaboration in planning and conducting the assessment.
- Reflect the demographic profile of the population.
- Describe socioeconomic, educational and environmental factors that affect health.
- Assemble and analyze secondary data (collected by someone other than the health department) to describe the health status of the community.
- Collect and analyze primary data (collected by the health department) to describe the health status of the community.
- Compile and analyze trend data to describe changes in community health status and in factors affecting health.
- Use scientific methods for collecting and analyzing data.
- Identify population groups at risk for health problems
- Identify existing and needed health resources.
- Compare selected local data with data from other jurisdictions (e.g., local to state, local to local).
- Identify leading community health problems.

#### **Documentation:**

A. Since the previous site visit, copy(ies) of CHA(s) conducted

#### **AND**

B. Letter(s) from NCDPH stating CHA meets content requirements described above

#### AND

C. If applicable, a letter from NCDPH stating that CAP(s) have been accepted

#### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 1:** A local health department shall conduct and disseminate results of regular community health assessments.

# **Activity 1.2:**

The local health department shall update the community health assessment with an interim "State of the County's Health" report (or equivalent) annually. The report shall demonstrate that the local health department is tracking priority issues identified in the community health assessment, identifying emerging issues, and shall identify any new initiatives.

#### **Documentation:**

A. Since the previous site visit, copies of each annual SOTCH report produced

#### **AND**

B. Letters from NCDPH stating each SOTCH meets content requirements described above

#### **AND**

C. If applicable, a letter from NCDPH stating that CAP(s) have been accepted

#### **COVID-19 Potential Evidence:**

 Highlighting 2020 and 2021 response efforts in a section of the 2020/2021 SOTCH submitted in March of 2021/2022 could be used.

**Benchmark 1:** A local health department shall conduct and disseminate results of regular community health assessments.

# **Activity 1.3:**

The local health department shall disseminate results of the most recent community health assessment and "State of the County's Health" report to the local health department's stakeholders, community partners and the general population.

#### **Documentation:**

A. Evidence of most recent CHA dissemination efforts by at least two different methods directed to stakeholders/ community partners

#### **AND**

B. Evidence of most recent CHA dissemination efforts by at least two different methods directed to the general population

#### AND

C. Evidence of most recent SOTCH report dissemination efforts by at least two different methods directed to stakeholders/community partners

#### AND

D. Evidence of most recent SOTCH report dissemination efforts by at least two different methods directed to the general population

#### **COVID-19 Potential Evidence:**

• If an LHD is presenting to stakeholders/community partners (part A) and/or the general population (part B) about COVID, specifically speaking about atrisk/vulnerable populations identified in the LHD CHA and how COVID may affect these populations could be used.

# **Activity 2.1:**

The local health department shall collect local vital records of births and deaths and transmit them to the Division.

#### **Documentation:**

A. Since the previous site visit, evidence of vital record keeping

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 2.2:**

The local health department shall report annual childhood immunization data as required by statute and rule.

#### **Documentation:**

A. Most recent Annual Immunization Assessment Report conducted by NCDPH

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 2.3:**

The local health department shall collect reports of communicable diseases and other reportable health conditions from community health care providers and transmit them to the Division.

#### **Documentation:**

A. Evidence of reporting via North Carolina Electronic Disease Surveillance System (NCEDSS) all reports received by the Local Health Department within the past 12 months

#### **COVID-19 Potential Evidence:**

 None at this time (obviously, COVID cases will be part of the "de-identified event line list.")

# **Activity 2.4:**

The local health department shall analyze and note reportable events occurring within the community and shall report atypical incidence, if any, to the Division and the local board of health.

#### **Documentation:**

A. For each year since the previous site visit, evidence of an internal process reflecting analysis

#### **AND**

B. Since the previous site visit, evidence of having reported atypical incidence to NCDPH

#### **AND**

C. For each year since the previous site visit, evidence of report to the board of health on local disease incidence and trends

#### **COVID-19 Potential Evidence:**

- COVID cases will be a part of the internal analysis process in part A.
- Communication about COVID outbreaks (SNIF, correctional facility, group home, etc.) to NCDPH could be used for part B.

**Benchmark 3:** The local health department shall maintain skills and capacity to collect, manage, integrate and display health-related data.

# **Activity 3.1:**

The local health department shall assure agency staff has expertise and training to collect, manage, integrate and display health-related data.

#### **Documentation:**

A. Since the previous site visit, evidence of relevant expertise and/or training on collecting, managing, integrating and displaying health-related data for at least one (1) individual

#### **COVID-19 Potential Evidence:**

• Did any staff attend data training at any time during COVID response? Might be relevant to training regarding posting case information on county data dashboards? If so, this sort of training could be used.

**Benchmark 3:** The local health department shall maintain skills and capacity to collect, manage, integrate and display health-related data.

# **Activity 3.2:**

The local health department shall conduct an annual evaluation of the agency's data system (hardware and software) and plans for upgrades to improve the accessibility, quality and utilization of health data.

#### **Documentation:**

A. For each year since the previous site visit, evidence of evaluation of the data system

#### **AND**

B. Since the previous site visit, evidence of an updated plan for improving the accessibility, quality and utilization of health data

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 4:** The local health department shall engage in surveillance activities and assess, investigate and analyze health problems, threats and hazards, maintaining and using epidemiological expertise.

# **Activity 4.1:**

The local health department shall assure that a surveillance system is in place for identifying health problems, threats and hazards that occur in the community.

#### **Documentation:**

A. Policies and procedures describing the agency's community surveillance system

#### AND

B. A current list of surveillance system participants

#### **AND**

C. Three examples of evidence of communication with surveillance participants within the past 12 months

#### **COVID-19 Potential Evidence:**

• (Only applicable to agencies with site visits in Fall 2022) Depending on when in 2021 an LHD does this (must be within 12 months of HDSAI due date of June 1, 2022), communication related to COVID with surveillance partners could be used for part C.

**Benchmark 4:** The local health department shall engage in surveillance activities and assess, investigate and analyze health problems, threats and hazards, maintaining and using epidemiological expertise.

# **Activity 4.2:**

The local health department shall monitor exposure to environmental health risks.

#### **Documentation:**

A. For each year since the previous site visit, an individual or summary report monitoring exposure to environmental health risks, including evidence of notification and actions taken as required by General Statute

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 4:** The local health department shall engage in surveillance activities and assess, investigate and analyze health problems, threats and hazards, maintaining and using epidemiological expertise.

# **Activity 4.3:**

The local health department shall have access to, and consult with a Masters or Doctoral level epidemiologist when necessary to fully investigate and diagnose health problems and hazards within the community.

#### **Documentation:**

A. Current contract and/or job description for local personnel **OR** evidence of availability for consultation with state epidemiologists

#### AND

B. Since the previous site visit, evidence of consultation with an epidemiologist

#### **COVID-19 Potential Evidence:**

• Email communication and/or logged phone calls with state epidemiologists regarding COVID cases and/or outbreaks could be used for part B.

**Benchmark 5:** The local health department shall establish and maintain a system to receive and provide health alerts and public health response for health care providers, emergency responders, and communities on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 5.1:**

The local health department shall have a system in place to receive reports of communicable diseases or other public health threats on a 24-hour-a-day, 7-day-a-week basis.

#### **Documentation:**

A. Copy of Notification Protocol from local Public Health Preparedness and Response Plans (or equivalent) **OR** written policies and procedures regarding after-hours calls

#### **AND**

B. Current after-hours call list

#### **AND**

C. For each year since the previous site visit, evidence of distribution and education of partners to the most current notification protocol

#### **COVID-19 Potential Evidence:**

 Distribution/education of partners on how to contact the health department regarding COVID issues during 2020 and 2021 could be used for part C.

**Benchmark 5:** The local health department shall establish and maintain a system to receive and provide health alerts and public health response for health care providers, emergency responders, and communities on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 5.2:**

The local health department shall use two or more methods to disseminate health alerts and other advisories on real or potential disease threats, as they occur, to the local medical community, including pharmacists and veterinarians.

#### **Documentation:**

A. Health Alert communication plan

#### **AND**

B. Medical provider contact list (to include pharmacists and veterinarians)

#### AND

C. Since the previous site visit, evidence of two disseminations of alerts by multiple methods

#### **COVID-19 Potential Evidence:**

 Disseminated COVID health alerts/advisories (two different alerts ultimately needed and both can be related to COVID) to the local medical community could be used for part C (assure by multiple methods as well)

**Benchmark 5:** The local health department shall establish and maintain a system to receive and provide health alerts and public health response for health care providers, emergency responders, and communities on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 5.3:**

The local health department shall provide health alerts or advisories to the news media to inform the public when disease outbreaks or other potential public health threats occur.

#### **Documentation:**

A. Agency crisis communication plan, or communication/media plan

#### AND

B. Since the previous site visit, evidence of two alerts or advisories to the news media

## **COVID-19 Potential Evidence:**

• Disseminated COVID health alerts/advisories (two different alerts ultimately needed and both can be related to COVID) to the news media could be used for part B.

**Benchmark 6:** The local health department shall be able to respond to a public health emergency on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 6.1:**

The local health department shall be involved in a local emergency planning committee.

#### **Documentation:**

A. Evidence confirming agency involvement in local emergency planning committee (or equivalent) within the past 12 months. If a Local Emergency Planning Committee (LEPC) does not exist or is currently inactive, provide evidence which indicates efforts have been made to request an LEPC be formed or become active

#### **COVID-19 Potential Evidence:**

• (Only applicable to agencies with site visits in Fall 2022) Depending on when in 2021 the LHD does this (must be within 12 months of HDSAI due date of June 1, 2022), attendance at an LEPC meeting due to COVID could be used. Or, a request during that timeframe to form/become active due to emergencies like COVID could be used.

**Benchmark 6:** The local health department shall be able to respond to a public health emergency on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 6.2:**

The local health department shall have a defined role in the county emergency operations plan to protect the public's health.

#### **Documentation:**

A. Copy of County/Counties Emergency Operations Plan(s) with the LHD role defined and current. If the county emergency operations plan has not been revised since the previous site visit to reflect the health department's current role, provide evidence which indicates efforts have been made to request such updates within the past 24 months

## **COVID-19 Potential Evidence:**

• None at this time.

**Benchmark 6:** The local health department shall be able to respond to a public health emergency on a 24-hour-a-day, 7-day-a-week basis.

# **Activity 6.3:**

The local health department shall participate in regional emergency preparedness exercises and activities.

#### **Documentation:**

A. Since the previous site visit, record of local agency participation in regional or multi-county trainings, planning meetings, or exercises

## **COVID-19 Potential Evidence:**

• None at this time.

# **Activity 7.1:**

The local health department shall have epidemiological case investigation protocols in place.

#### **Documentation:**

A. Current policies and protocols

#### **AND**

B. Written protocols and/or guidelines to guide epidemiological practice

## **COVID-19 Potential Evidence:**

• None at this time.

# **Activity 7.2:**

The local health department shall conduct communicable disease investigations, follow-up, documentation and reporting activities.

#### **Documentation:**

A. Since the previous site visit, evidence of an appropriately conducted, documented and reported outbreak investigation. If no activity, demonstrate knowledge by providing policy

## **COVID-19 Potential Evidence:**

• COVID-19 outbreaks (SNIF, correctional facility, group home, etc.) may be used if documented/reported according to Guidance.

# **Activity 7.3:**

The local health department shall investigate and respond to environmental health complaints or referrals.

#### **Documentation:**

- A. Since the previous site visit, complaint logs (site visitors will select a random year for review) with the following required:
  - complaint reported (including name/location)
  - date reported
  - action taken in accordance with policy (including names(s) of staff who responded)
  - date of action taken
  - referral information if referred to another agency

#### AND

B. Lab/investigation reports (where applicable)

#### **AND**

C. Policy defining timely and appropriate action

#### **COVID-19 Potential Evidence:**

None at this time

# **Activity 7.4:**

The local health department shall have a public health preparedness and response plan that:

- corresponds to existing local and state emergency and Bioterrorism plans
- establishes roles and responsibilities of plan participants
- identifies training for participants in those roles
- establishes a chain of command among plan participants
- describes a system of emergency notification to local and state public health staff and other key decision makers based upon the nature of the event, and
- is available to staff on site

#### **Documentation:**

A. Copy of the local public health preparedness and response plan(s)

#### **AND**

B. Evidence of availability to all staff

#### **COVID-19 Potential Evidence:**

None at this time

# **Activity 7.5:**

The local health director shall maintain periodic communication with local emergency managers.

#### **Documentation:**

A. Since the previous site visit, evidence of on-going communication between the Health Director, or his/her designee, with Local Emergency Managers

## **COVID-19 Potential Evidence:**

• COVID-related communication with EM could be used.

# **Activity 7.6:**

The local health department shall annually test or implement the local public health preparedness and response plan.

#### **Documentation:**

A. For each year since the previous site visit, record of annual exercises or execution of preparedness plan

## **COVID-19 Potential Evidence:**

• COVID outbreak execution of the agency response plan(s) in 2020 and 2021 could be used (including any records from response, reports to the BOH or Commissioners, after action reports or documentation from other materials).

# **Activity 7.7:**

The local health department shall have one of the following:

- public health preparedness and response coordination team with an environmental health member and a public health preparedness response coordinator, or
- an epidemiology team with an environmental health member and an epidemiology team coordinator.

#### **Documentation:**

A. Current roster of team member names, titles and designated roles that includes a coordinator and an environmental health member

#### AND

B. Since the previous site visit, evidence team is active

#### **COVID-19 Potential Evidence:**

• Evidence of Epi Team response/activity related to COVID could be used for part B.

# **Activity 8.1:**

The local health department shall have written policies and procedures for handling clinical and environmental laboratory samples.

#### **Documentation:**

A. Policies and procedures

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 8.2:**

The local health department laboratory and external laboratories utilized by the local health department shall comply with all applicable federal regulations for clinical and environmental laboratory testing.

#### **Documentation:**

A. List of laboratories used and their areas of certification, if other than the North Carolina State Laboratory of Public Health

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 8.3:**

The local health department shall provide or have access to laboratory services capable of meeting routine diagnostic and surveillance needs.

#### **Documentation:**

- A. Current CLIA or other appropriate certificate for each laboratory used **AND**
- B. Current contract(s) or evidence of agreement with external laboratories, if other than the North Carolina State Laboratory of Public Health

#### **COVID-19 Potential Evidence:**

• None at this time

# **Activity 8.4:**

The local health department shall provide or have access to laboratory services to support investigations of public problems, hazards, and emergencies.

#### **Documentation:**

A. Current protocols and guidelines regarding access to laboratory services

#### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 9:** The local health department shall provide the general public and elected and appointed officials with information on health risks, health status, and health needs in the community as well as information on policies and programs that can improve community health.

# **Activity 9.1:**

The local health department shall publish and disseminate data and information on current local health issues to the general public, community partners, and elected and appointed officials.

#### **Documentation:**

- A. For each year since the previous site visit, evidence of dissemination of information on current local issues to the general public/community partners **AND**
- B. For each year since the previous site visit, evidence of dissemination of information on current local issues to policy leaders

## **COVID-19 Potential Evidence:**

• Dissemination of information to the general public/community partners (part A) and policy leaders (part B) related to COVID for 2020 and 2021 could be used.

**Benchmark 9:** The local health department shall provide the general public and elected and appointed officials with information on health risks, health status, and health needs in the community as well as information on policies and programs that can improve community health.

# **Activity 9.2:**

The local health department shall have a mechanism by which the public can access community data and health status information maintained in the agency in accordance with applicable laws and rules.

#### **Documentation:**

A. Policies and procedures regarding access to data and lists of accessible information

**AND** 

B. List of accessible information

AND

C. Evidence of current modes of communication

#### **COVID-19 Potential Evidence:**

 Links to NCDHHS COVID Data Dashboard or county dashboard on website could be used.

# **Activity 9.3:**

The local health department shall provide information to the public on the availability and location of health data that are accessible in the public domain.

### **Documentation:**

A. Agency website showing availability and location of current health data

## **COVID-19 Potential Evidence:**

 Links to NCDHHS COVID Data Dashboard or county dashboard on website could be used.

# **Activity 9.4:**

The local health department shall have written guidelines that it follows in responding to requests for information.

### **Documentation:**

A. Policies and procedures

#### **AND**

B. Since the previous site visit, evidence showing adherence to guidelines

## **COVID-19 Potential Evidence:**

• Documentation of information requests related to COVID could be used for part B.

# **Activity 9.5:**

The local health department shall inform affected community members of changes in department policies or operations.

### **Documentation:**

A. Since the previous site visit, announcement related to departmental change using two separate methods

#### **AND**

B. Evidence of opportunity for public comment regarding announced change. If no changes, show policy and procedure for such

## **COVID-19 Potential Evidence:**

• If the LHD implemented any departmental changes during COVID (changes in operating hours, what services provided, etc.) and provided an opportunity for public comment, this could be used.

# **Activity 9.6:**

The local health department shall assure that information disseminated by the agency reflects the cultural and linguistic character of the local population as required by Title VI of the Civil Rights Act.

#### **Documentation:**

- A. Policies that acknowledges compliance with Title VI of the Civil Rights Act

  AND
- B. Since the previous site visit, evidence of two examples of information disseminated in accordance with policy

## **COVID-19 Potential Evidence:**

• If the LHD translated COVID materials and/or provided video messages in non-English languages (or did similar work for the deaf or hard of hearing), these could be used for part B.

# **Activity 10.1:**

The local health department shall develop, implement and evaluate population-based health promotion/disease prevention programs and educational materials for the general public.

#### **Documentation:**

- A. Since the previous site visit, evidence of planning, implementation and evaluation of health promotion/disease prevention programs targeted to the general public
- B. Since the previous site visit, evidence of planning, implementation, and evaluation of educational materials targeted to the general public

## **COVID-19 Potential Evidence:**

• Documentation on programs (part A) and educational materials (part B) related to social distancing or cough/hand hygiene programs/information for COVID could be provided if evidence of planning, implementation, and evaluation is available.

# **Activity 10.2:**

The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.

#### **Documentation:**

A. Since the previous site visit, evidence of planning, implementation and evaluation of health promotion/disease prevention programs targeted to an at-risk group identified in the community health assessment

#### AND

B. Since the previous site visit, evidence of planning, implementation and evaluation of educational materials targeted to an at-risk group identified in the community health assessment

### **COVID-19 Potential Evidence:**

 Documentation on programs (part A) and educational materials (part B) related to social distancing or cough/hand hygiene programs/information targeted to at-risk groups for COVID could be provided if evidence of planning, implementation, and evaluation is available.

# **Activity 10.3:**

The local health department shall employ evidence-based health promotions/disease prevention strategies, when such evidence exists.

### **Documentation:**

A. Since the previous site visit, evidence of agency exploration and employment of evidence-based strategy

#### **AND**

B. External evidence that indicates this strategy is effective

## **COVID-19 Potential Evidence:**

 Evidence of agency research of social distancing or cough/hand hygiene strategies could be provided for part A if external evidence can be found and submitted to show the strategy is effective (part B).

# **Activity 10.4:**

The local health department shall promote and support the use of evidence-based health promotion/disease prevention strategies by other community agencies and organizations.

#### **Documentation:**

A. Since the previous site visit, evidence of agency promotion and support of evidence-based strategy by community partners

#### AND

B. External evidence that indicates strategy is effective

## **COVID-19 Potential Evidence:**

• Evidence of agency promotion of social distancing or cough/hand hygiene strategies by community partners could be provided for part A if external evidence can be found and submitted to show the strategy is effective (part B).

**Benchmark 11:** The local health department shall convene key constituents and community partners to identify, analyze, and prioritize community health problems/issues.

# **Activity 11.1:**

The local health department shall participate in a collaborative community steering committee to identify health issues and needs.

#### **Documentation:**

- A. Since the previous site visit, list of participants (by organization or group represented) in a collaborative process to identify health issues and needs
- B. Evidence of the department's active participation in this collaborative process

## **COVID-19 Potential Evidence:**

 Collaborations that prioritize COVID as a key health issue and identify specific COVIDrelated health needs (such as a group focused on reaching minority communities) could be used.

**Benchmark 11:** The local health department shall convene key constituents and community partners to identify, analyze, and prioritize community health problems/issues.

# **Activity 11.2:**

The local health department shall involve community members in assessing, setting priorities and establishing desired outcomes for addressing community health issues and needs.

### **Documentation:**

A. Since the previous site visit, evidence of community member input on assessing, prioritizing, and establishing desired outcomes for community health issues or needs

### **COVID-19 Potential Evidence:**

• Evidence of a community member input process on COVID response that includes the community member contributing to assessing data/information on COVID, assisting in prioritizing issues, and stating wanted outcomes from the response work could be used (such as a from a community forum focused on reaching minority communities).

**Benchmark 12:** The local health department shall develop strategies in collaboration with community partners to solve existing community health problems.

# **Activity 12.1:**

The local health department shall participate in a collaborative process to identify strategies for addressing community health problems.

### **Documentation:**

A. Since the previous site visit, list of participants (by organization or group represented) in a collaborative process to identify strategies for addressing community health problems

### **AND**

B. Evidence of the department's active participation in this collaborative process

## **COVID-19 Potential Evidence:**

 Collaborations that prioritize COVID as a key health issue and identify strategies for addressing COVID-related health needs/issues (such as a group focused on reaching minority communities) could be used.

**Benchmark 12:** The local health department shall develop strategies in collaboration with community partners to solve existing community health problems.

# **Activity 12.2:**

The local health department shall participate in a collaborative process to assess resources needed, including personnel, funding, policy changes, and system change, to address community health problems.

#### **Documentation:**

A. Since the previous site visit, evidence of participation in a collaborative process to assess resources needed to address community health problems

### **COVID-19 Potential Evidence:**

 Collaborations that prioritize COVID as a key health issue and assess resources for addressing COVID-related health needs/issues (such as a group focused on reaching minority communities) could be used.

**Benchmark 12:** The local health department shall develop strategies in collaboration with community partners to solve existing community health problems.

# **Activity 12.3:**

The local health department shall participate in a collaborative process to implement population-based programs to address community health problems.

### **Documentation:**

A. Since the previous site visit, evidence of a collaborative process on the implementation of a population-based program to address community health problems

### **COVID-19 Potential Evidence:**

 Collaborations that prioritize COVID as a key health issue and implement populationbased programs addressing COVID-related health needs/issues (such as a group focused on reaching minority communities) could be used.

**Benchmark 13:** The local health department shall identify and build upon community assets and direct them toward resolving health problems.

# **Activity 13.1:**

The local health department shall broaden existing partnerships by cultivating innovative and new community contacts, such as businesses and industries, healthcare practitioners, faith communities, and grassroots organizations, and increasing their awareness of public health through outreach and training.

### **Documentation:**

A. Since the previous site visit, documentation of targeted outreach and training activities with two new community partners or contacts

## **COVID-19 Potential Evidence:**

• New partner(s) established and trained on public health as part of COVID response outreach could be used.

# **Activity 14.1:**

The local health department shall disseminate information relative to public health needs to elected and appointed officials.

#### **Documentation:**

A. Since the previous site visit, information dissemination for two different public health needs

## **COVID-19 Potential Evidence:**

• COVID response needs could be used for one example of information dissemination to policymakers (and possibly for two if the needs are clearly different).

## **LHD Example:**

Transylvania County presented updates to the Board of Commissioners about COVID-19 mitigation and about vaccination efforts.

# **Activity 14.2:**

The local health department shall provide information and recommendations to support the local board of health and the board(s) of county commissioners in setting public health priorities and planning public health programs.

### **Documentation:**

A. Since the previous site visit, evidence of LHD provision of information/recommendations to the BOH/human services board <u>and</u> county commissioners regarding public health priority setting and program planning

### **COVID-19 Potential Evidence:**

 COVID response information/recommendations (sharing of information, statistics, results, recommending social distancing guidelines, etc.) shared with the BOH and BOCC for the purpose of priority setting and/or program planning support could be used.

# **Activity 14.3:**

The local health department shall evaluate, with the local board of health, the need for additional rules or ordinances to protect the health of the public.

#### **Documentation:**

A. Since the previous site visit, evidence of agency evaluation, with the BOH, of the need for additional rules/ordinances or amendment of current rules/ordinances

### **COVID-19 Potential Evidence:**

 If the LHD/BOH considers and evaluates any rules/ordinance additions or amendments due to COVID, this could be used (note that eventual passage or even a decision to move forward is not necessary if evaluation shows that no further action is needed).

# **Activity 14.4:**

The local health department shall assist the local board of health in drafting local ordinances and rules as needed and presenting them to elected officials in order to implement or enforce needed local public health prevention and protection activities.

### **Documentation:**

A. Since the previous site visit, BOH minutes or BOH memo referencing input of agency in drafting/amending rule or ordinance impacting the public's health

#### ΔND

B. Since the previous site visit, minutes of meeting of board of county commissioners citing new/amended rule or ordinance as a presentation and/or discussion item

### OR

C. If no work toward rules or ordinances has been done, the health department should provide a signed statement indicating that no local rules/ordinances have been drafted/amended by the board of health

## **COVID-19 Potential Evidence:**

• If the LHD/BOH drafts/amends a rule/ordinance related to COVID and presents it to the BOCC, this could be used.

# **LHD Example:**

Mecklenburg County worked with the Board of County Commissioners and municipalities within their jurisdiction to draft local ordinances around masking and Stay at Home Orders.

# **Activity 15.1:**

The local health department shall develop or update annually an agency strategic plan that:

- includes a review and analysis of factors influencing the health department's ability to improve the community's health,
- uses local health status data and information to set goals and objectives,
- uses community input where applicable,
- states desired outcomes for each element,
- sets priorities, and
- uses community collaborations to implement activities.

### **Documentation:**

A. Copy of current strategic plan

#### **AND**

- B. Evidence that CHA results were used in most recent agency strategic planning **AND**
- C. Since the previous site visit, evidence of annual updates and implementation of the strategic plan

## **COVID-19 Potential Evidence:**

• Annual update in part C could include necessary changes to the strategic plan as a result of COVID response.

# **Activity 15.2:**

The local health department shall develop and adopt program policies and procedures that meet the following criteria: refer to the federal and state legislation, rules or regulations, or local rules or ordinances that provide the authority to carry out agency programs and activities, and delineates desired outcomes.

#### **Documentation:**

A. Since the previous site visit, examples of three program policies and procedures that include reference to applicable laws, rules or ordinance and identify purpose/outcomes

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 15.3:**

The local health department shall have a written procedure providing for annual review, and revision if necessary, of all policies.

### **Documentation:**

A. Current policy on policies

### **AND**

B. Evidence of annual review of all policies (Site Visit Team will select one year since the last site visit, except for 2020 and 2021, for review when on-site)

#### **AND**

C. Evidence of revision, if applicable, of all policies revised during the year selected for review

### **AND**

D. If any policies were revised during the year selected for review, evidence that policy on policies has been followed related to current staff notification

### **COVID-19 Potential Evidence:**

• None at this time

# **Activity 15.4:**

The local health department shall assess the internal and external resources that are available or needed to implement proposed new or updated policies and procedures.

#### **Documentation:**

A. Since the last site visit, evidence of assessment of resources that are available or needed to implement proposed new or updated policies and procedures

## **COVID-19 Potential Evidence:**

• If the COVID response necessitated an update to a current policy/procedure or a new policy/procedure and an assessment of resources to implement that was conducted, it could be used.

# **Activity 15.5:**

The local health department shall ensure that new staff is oriented to program policies and procedures and existing staff receives training on any updated or revised program policies and procedures.

### **Documentation:**

A. Program orientation policy for new staff based on role

#### AND

B. A list of all employees hired within the past 12 months

#### **AND**

C. Evidence indicating each new employee has completed policy training for the program(s) in which he/she will work

#### AND

D. Procedure for distributing policy changes to existing/current staff

#### AND

E. Evidence that appropriate staff have been notified of substantive policy updates/revisions related to their role

## **COVID-19 Potential Evidence:**

None at this time

# Activity 15.6:

The local health department shall ensure that program policies and procedures are accessible to all staff.

### **Documentation:**

A. Program Policies

### **AND**

B. Evidence demonstrating accessibility by all health department staff

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 16:** The local health department staff shall have knowledge of public health law and an understanding of the relationship between the law and public health practice.

# **Activity 16.1:**

The local health director and unit directors, such as directors of communicable disease, nursing, clinical services and environmental health, shall receive ongoing training in current public health law and its application.

### **Documentation:**

A. List of appropriate directors who require training (must include health director, directors of communicable disease, nursing and environmental health)

#### AND

B. Since the previous site visit, evidence of at least two trainings each for appropriate directors in relation to applicable laws and their application to public health practice

## **COVID-19 Potential Evidence:**

 Any COVID-related trainings that have a law component (i.e. HIPAA, isolation and quarantine authorities, authorities to release case information, etc.) could be used (and two for staff member if each attended more than one COVID-related training).

**Benchmark 16:** The local health department staff shall have knowledge of public health law and an understanding of the relationship between the law and public health practice.

# **Activity 16.2:**

Local health department new employee orientation shall address public health laws and rules.

### **Documentation:**

A. Since the previous site visit, evidence that new employee orientation addresses public health laws and rules

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 16:** The local health department staff shall have knowledge of public health law and an understanding of the relationship between the law and public health practice.

# **Activity 16.3:**

Environmental health staff shall be trained in the implementation of laws, rules and ordinances that they enforce and shall have access to copies of the laws, rules and ordinances.

### **Documentation:**

A. List of Environmental Health Specialists (EHS) currently employed/contracted and the programs for which they are enforcing

#### AND

B. Evidence that registered EHS employees/contractors are maintaining training requirements of RS Board and programs for which they are enforcing

#### AND

C. Evidence demonstrating accessibility to laws, rules and ordinances that they enforce

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 17:** The local health department shall monitor compliance with public health laws and rules.

# **Activity 17.1:**

The local health department shall conduct inspection and permitting activities for state mandated environmental health regulatory programs.

### **Documentation:**

A. Completion of *Activity 17.1 and 22.2 Division of Public Health State Programs* Section of the *XXXX County HDSAI Programs List* 

#### **AND**

B. Letters from appropriate monitoring offices of N.C. Division of Public Health verifying environmental health program compliance

#### AND

C. Evidence of performance improvement activities, as indicated by corrective action plan(s) or program letter(s)

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 17:** The local health department shall monitor compliance with public health laws and rules.

# **Activity 17.2:**

The local health department shall conduct inspection and permitting activities assigned to the local health department by local rules, ordinances, or policies.

### **Documentation:**

A. Completion of Activity 17.2 Summary of Locally Mandated Regulatory Programs Environmental Health Section of the XXXX County HDSAI Programs List

#### AND

B. Evidence of local program activities including copy of local rules, ordinances, or policies

### OR

C. If no local rules, ordinances or policies have been adopted, a signed statement from the board of health chair

## **COVID-19 Potential Evidence:**

None at this time.

**Benchmark 17:** The local health department shall monitor compliance with public health laws and rules.

# **Activity 17.3:**

The local health department shall monitor compliance with communicable disease control laws and rules.

### **Documentation:**

A. Most recent annual summary of implemented control measures, isolation/quarantine orders, or arrest orders

## **COVID-19 Potential Evidence:**

• A summary of COVID isolation/quarantine orders issued could be used.

# **Activity 18.1:**

The local health department shall have written policies and procedures addressing enforcement of public health laws, rules and ordinances.

## **Documentation:**

A. Policies and procedures

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 18.2:**

The local health department shall take enforcement action for violations of public health laws, rules and ordinances.

### **Documentation:**

A. Since the previous site visit, evidence of three examples of enforcement actions taken for violations of public health laws, rules and ordinances

## **COVID-19 Potential Evidence:**

• A COVID quarantine/isolation order could be used for one example.

# **Activity 18.3:**

The local health department shall have written policies and procedures for handling complaints related to enforcement of laws, rules and ordinances.

## **Documentation:**

A. Policies and procedures

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 18.4:**

The local health department shall address complaints in accordance with its policies and procedures.

### **Documentation:**

A. Since the previous site visit, evidence of review of three complaint reports demonstrating adherence to policies and procedures

## **COVID-19 Potential Evidence:**

 One example presented could be a complaint submitted regarding a COVID quarantine/isolation order.

**Benchmark 19:** The local health department shall identify populations that are not receiving preventive services or are otherwise underserved with respect to health care.

# **Activity 19.1:**

The local health department shall assess use of public health programs and health care services by underserved, at-risk and vulnerable populations identified in the community health assessment process.

#### **Documentation:**

A. Since the previous site visit, data on utilization of agency services by underserved populations

#### **AND**

B. Since the previous site visit, data on utilization of agency services by at-risk populations

#### AND

C. Since the previous site visit, data on utilization of agency services by vulnerable populations

#### AND

D. Evidence of annual review, except for 2020 and 2021, of utilization data

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 19:** The local health department shall identify populations that are not receiving preventive services or are otherwise underserved with respect to health care.

# **Activity 19.2:**

The local health department shall take actions to include linguistically and culturally representative persons in planning and implementing programs intended to reach underserved population groups.

#### **Documentation:**

A. Since the previous site visit, evidence of participation by such persons in at least one planning activity targeted at that population

#### AND

B. Since the previous site visit, evidence of participation by such persons in at least one implementation activity targeted at that population.

## **COVID-19 Potential Evidence:**

• If a linguistically and culturally representative person is included in the planning and implementation of a COVID-related program that is aimed at reaching underserved population groups, this could be used.

**Benchmark 20:** The local health department shall mobilize the community to address health care resource needs.

# **Activity 20.1:**

The local health department shall collaborate with community health care providers to provide personal and preventive health services.

### **Documentation:**

A. Since the previous site visit, evidence of collaboration with community health care providers to provide personal health services

#### **AND**

B. Since the previous site visit, evidence of collaboration with community health care providers to provide preventive health services

### **COVID-19 Potential Evidence:**

• If the LHD collaborated with local health providers to provide COVID testing to the community, this could be used to meet part A.

### **LHD Example:**

Transylvania County collaborated with FQHC Blue Ridge Community Health and Bethel A Church to provide COVID-9 testing outreach to local Hispanic and African American communities. (Note: This example would meet part A of the documentation requirement. Similar evidence related to vaccination efforts would meet part B.)

**Benchmark 20:** The local health department shall mobilize the community to address health care resource needs.

# **Activity 20.2:**

The local health department shall collaborate with community health care providers and agencies to reduce barriers to access to care.

### **Documentation:**

A. Since the previous site visit, evidence of at least two collaborations with community health care providers to reduce barriers to access to care

### **COVID-19 Potential Evidence:**

 If the LHD collaborated with local health providers to provide COVID testing to a community/population with low testing rates/access, this could be used for one example.

## **LHD Example:**

Mecklenburg County partnered with the Harvey B. Gantt Center for African American Arts & Culture and StarMed to offer COVID-19 testing and vaccines in low-income communities and communities of color.

# **Activity 21.1:**

The local health department shall make available to the general public a current, comprehensive list of community health and wellness resources.

### **Documentation:**

A. Copy of current resource list or directory

B. Policy or mechanism for dissemination of list

AND

C. Since the previous site visit, evidence of three examples of dissemination of list

### **COVID-19 Potential Evidence:**

• If the resource list is distributed as part of COVID outreach/prevention, each method of dissemination could be used for part C.

# **Activity 21.2:**

The local health department shall make available complete and up-to-date information about local health department programs, services and resources.

### **Documentation:**

A. Since the previous site visit, evidence of three examples of linguistically and culturally appropriate information about agency programs, services, and resources

### **COVID-19 Potential Evidence:**

 If linguistically/culturally appropriate information on COVID testing provided by the health department, COVID prevention brochures, and/or other COVID-related resources were developed, these could be used.

# **Activity 21.3:**

The local health department shall develop and implement strategies to increase use of public health programs and services.

### **Documentation:**

- A. Plans or policies for increasing utilization of public health programs and services **AND**
- B. Since the previous site visit, evidence of two examples of culturally and linguistically appropriate implementation of those plans or policies

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 21.4:**

The local health department shall assure that the program planning and implementation involve community health advocates that represent populations being served in the local health department.

#### **Documentation:**

A. Since the previous site visit, evidence of program planning that shows involvement of community health advocates

#### AND

B. Since the previous site visit, evidence of program implementation that shows involvement of community health advocates

### **COVID-19 Potential Evidence:**

• If a community health advocate is included in the planning and implementation of a COVID-related program, this could be used.

**Benchmark 22:** The local health department shall serve as a health care provider when local needs and authority exist, and the agency capacity and resources are available.

## **Activity 22.1:**

When the local health department determines that there are compelling unmet health care needs in the community, the local health department shall develop a plan with community leaders and providers to meet the unmet needs, which may include the establishment and provision of such services by the local health department if the department has the authority, capacity and resources to address the unmet needs.

#### **Documentation:**

A. Community Health Improvement Plans from most recent CHA with approval notice from NCDPH

#### AND

B. Since the previous site visit, evidence of implementation and results of Community Health Improvement Plans

### **COVID-19 Potential Evidence:**

None at this time.

**Benchmark 22:** The local health department shall serve as a health care provider when local needs and authority exist, and the agency capacity and resources are available.

# **Activity 22.2:**

The local health department shall comply with laws, rules and contractual requirements for programs and services provided pursuant to the local health department's consolidated agreement and agreement addenda, including requirements for corrective action.

### **Documentation:**

A. Completion of Activity 17.1 and 22.2 Division of Public Health State Programs Section of the XXXX County HDSAI Programs List

#### AND

B. Letters from appropriate monitoring offices of N.C. Division of Public Health verifying program compliance

#### **AND**

C. Evidence of performance improvement activities, as indicated by CAP(s) or program letter(s)

### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 22:** The local health department shall serve as a health care provider when local needs and authority exist, and the agency capacity and resources are available.

# **Activity 22.3:**

The local health department shall comply with laws and rules relating to programs and services offered by local health department but not covered by the consolidated agreement and agreement addenda.

#### **Documentation:**

A. Completion of Activity 22.3 Program and Services Offered by the Local Health
Department But Not Covered by the Consolidated Agreement and Agreement Addenda
Section of the XXXX County HDSAI Programs List

#### AND

B. Policies and procedures for each program

#### AND

C. Since the previous site visit, evidence of performance improvement activities resulting from oversight or monitoring, as indicated

### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 23:** The local health department staff shall meet statutory and regulatory qualifications for their positions.

# **Activity 23.1:**

The local health department shall have, or be recruiting, a health director who meets the legal requirements for the position.

### **Documentation:**

A. Evidence that the current health director has required credentials

### OR

B. Evidence that the board of health is seeking a health director with required credentials

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 23:** The local health department staff shall meet statutory and regulatory qualifications for their positions.

# **Activity 23.2:**

The local health department staff shall meet all registration, certification or licensure requirements for positions held and duties assigned.

### **Documentation:**

A. Evidence of up-to-date registration, certification or licensure for staff as required by each staff position.

В.

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 23:** The local health department staff shall meet statutory and regulatory qualifications for their positions.

# **Activity 23.3:**

The local health department shall employ or contract with one or more physicians licensed to practice in North Carolina to serve as medical director.

### **Documentation:**

- A. Evidence of medical director's current M.D. or D.O. license **AND**
- B. Job description or current contract

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 24:** The local health department shall regularly evaluate staff training and development needs and provide opportunities for continuing education, training and leadership development.

# **Activity 24.1:**

The local health department shall have policies that promote and provide staff access to training.

### **Documentation:**

A. Policies

### **AND**

B. Since the previous site visit, evidence that policies have been implemented

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 24:** The local health department shall regularly evaluate staff training and development needs and provide opportunities for continuing education, training and leadership development.

# **Activity 24.2:**

The local health department shall have a staff development plan that includes identifying and addressing the training and continuing education needs of the staff.

#### **Documentation:**

A. Staff development plan

#### **AND**

B. Since the previous site visit, evidence of plan implementation

### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 24:** The local health department shall regularly evaluate staff training and development needs and provide opportunities for continuing education, training and leadership development.

# **Activity 24.3:**

The local health department staff shall participate in orientation and on-going training and continuing education activities required by law, rule or contractual obligation.

#### **Documentation:**

A. Evidence that health department staff have participated in orientation and ongoing training and continuing education activities required by law, rule or contractual obligation; and that the training is up-to-date.

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 25:** The local health department shall build relationships with entities that conduct education or research to enrich public health practice.

# **Activity 25.1:**

The local health department shall work with academic institutions and other programs such as universities, colleges, community colleges, Area Health Education Centers, CDC and professional associations to provide training opportunities for current staff and future public health practitioners.

### **Documentation:**

A. Since the previous site visit, evidence from each of at least two programs or institutions demonstrating the provision of training opportunities

### **COVID-19 Potential Evidence:**

- Staff members attending UNC-AHEC contact tracing trainings could be used for one example.
- Interns/students working on COVID activities in the LHD could be used for one example.

**Benchmark 25:** The local health department shall build relationships with entities that conduct education or research to enrich public health practice.

# **Activity 25.2:**

The local health department shall work with at least two academic institutions and other programs such as universities, colleges, community colleges and Area Health Education Centers to facilitate research and evaluation of public health programs and issues.

#### **Documentation:**

A. Since the previous site visit, evidence from each of at least two programs or institutions demonstrating research and evaluation of public health programs and issues

### **COVID-19 Potential Evidence:**

 LHD participation in any university/college-driven COVID research projects could be used.

## **LHD Example:**

Transylvania County worked with an MPH student from the University of North Carolina to research best practices for re-opening summer camps amidst COVID-19. (*Note: The documentation requirements for this activity indicate that two examples are required. This one example would satisfy half of the requirement.*)

**Benchmark 26:** The local health department shall promote diversity in the public health workforce.

# **Activity 26.1:**

The local health department shall have and implement a non-discrimination policy as required by state and federal law and train staff in its application.

### **Documentation:**

A. Policy

### **AND**

B. Since the previous site visit, evidence of implementation of policy

### **AND**

C. Since the previous site visit, evidence of training on policy

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 26:** The local health department shall promote diversity in the public health workforce.

# **Activity 26.2:**

The local health department shall develop and implement a plan consistent with the health department's non-discrimination policy to recruit and retain a management team and staff that reflects the population of the service area.

#### **Documentation:**

- A. A plan to recruit and retain a management team and staff that reflects the population of the service area which supports the non-discrimination policy
- B. Since the previous site visit, evidence of plan implementation

### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 26:** The local health department shall promote diversity in the public health workforce.

# **Activity 26.3:**

The local health department shall assure that agency staff receives training in cultural sensitivity and competency.

### **Documentation:**

A. Policy on cultural sensitivity and competency

#### AND

B. Since the previous site visit, evidence of implementation through staff training

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 27:** The local health department shall evaluate all services it provides for effectiveness in achieving desired outcomes.

# **Activity 27.1:**

The local health department shall have in place a process for assessing consumer and community satisfaction with its services.

### **Documentation:**

- A. Policy and procedure related to seeking consumer and community input **AND**
- B. Since the previous site visit, copies of tools used for both consumer and community input

### **AND**

C. Since the previous site visit, examples of data collected from both consumer and community input

## **COVID-19 Potential Evidence:**

• A post-COVID community input survey on LHD response satisfaction could be considered to meet parts of B and C.

**Benchmark 27:** The local health department shall evaluate all services it provides for effectiveness in achieving desired outcomes.

# **Activity 27.2:**

The local health department shall use data from the consumer and community satisfaction assessment to make changes to improve its services.

### **Documentation:**

- A. Since the previous site visit, meeting minutes or records describing how consumer/community satisfaction data was used in planning or decision-making **AND**
- B. Evidence of how changes were made to improve services. If no changes were indicated from data collected, provide policy/protocol for how community satisfaction data would be used to improve services

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 27:** The local health department shall evaluate all services it provides for effectiveness in achieving desired outcomes.

# **Activity 27.3:**

The local health department shall employ a quality assurance and improvement process to assess the effectiveness of services and improve health outcomes.

### **Documentation:**

A. Quality assurance policies and procedures

### AND

B. Quality improvement policies and procedures

#### AND

C. Since the previous site visit, evidence of policy implementation for one quality assurance effort and one quality improvement effort

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 28:** The local health department shall use research to develop and evaluate public health programs.

# **Activity 28.1:**

Before implementing a proposed public health program, the local health department shall review, when available, research evaluating the potential effectiveness of the program.

#### **Documentation:**

A. Since the previous site visit, evidence of internet or library search **OR** 

B. Since the previous site visit, record of consultation with academic institution, professional organization, or state consultant, regarding information about evidence-based best practices

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 29:** The local health department shall ensure that its participation in research meets ethical standards.

## **Activity 29.1:**

The local health department shall develop and implement policies ensuring that state and federal requirements are followed regarding the rights of participants in local public health research programs and requiring that any requests to access health department clients have Institutional Review Board approval obtained by the host research organization.

#### **Documentation:**

- A. Research policy addressing research conducted by a host research organization **AND**
- B. Evidence of implementation of host organization research if research activities were conducted since the previous site visit. If there has been no research conducted by a host research organization, the department should submit a statement to that effect signed by the health director

### **COVID-19 Potential Evidence:**

• If an outside entity has conducted COVID research at the LHD, evidence of this could be used.

**Benchmark 29:** The local health department shall ensure that its participation in research meets ethical standards.

## **Activity 29.2:**

The local health department shall develop and implement policies for participation in research activities that impact its clients or community members.

### **Documentation:**

A. Research policy addressing research directed by the agency

#### AND

B. Evidence of implementation of agency-directed research if participated in research activities since the previous site visit. If the health department has not participated in any research projects as the host agency, it should provide a statement to that effect signed by the health director

### **COVID-19 Potential Evidence:**

• If the LHD has conducted COVID research at the LHD, evidence of this could be used.

# **Activity 30.1:**

The local health department shall have facilities that are clean, safe and secure for the specific activities being carried out in the facility or any area of the facility, such as laboratory analyses or patient examinations.

#### **Documentation:**

A. Visit to facilities and observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet).

### **COVID-19 Potential Evidence:**

None at this time

## **Activity 30.2:**

The local health department shall have facilities that are accessible to persons with physical disabilities and services that are accessible to persons with limited proficiency in the English language.

#### **Documentation:**

A. Policies/protocols that address accessibility for persons with physical disabilities and Limited English Proficiency

#### **AND**

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

B. Interior and exterior signage that facilitates access to persons with physical disabilities and Limited English Proficiency

#### AND

C. Facilities that are accessible to persons with physical disabilities. If not fully accessible, evidence of performance improvement (such as seeking funding or short-term solution) since the previous site visit

### **COVID-19 Potential Evidence:**

• None at this time

# **Activity 30.3:**

The local health department shall have examination rooms and direct client service areas that are configured in a way that protects client privacy.

### **Documentation:**

A. Policy/procedures addressing client privacy

**AND** 

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

B. Agency floor plan/layout and processes conducive to privacy

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 30.4:**

The local health department shall ensure privacy and security of records containing privileged patient medical information or information protected by the federal Health Insurance Portability and Accountability Act.

#### **Documentation:**

A. Medical records policies, including if they are electronic

#### AND

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

B. Proper handling, storage and transport of medical records

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 30.5:**

The local health department shall comply with OSHA regulations.

### **Documentation:**

A. Policies and procedures regarding OSHA compliance

### **AND**

B. Since the previous site visit, evidence of two examples indicating utilization of policies

## **COVID-19 Potential Evidence:**

• Use of PPE during COVID response could be used as an example for part B

## **Activity 30.6:**

The local health department shall ensure cleaning, disinfection and maintenance of clinical and laboratory equipment and service areas and shall document all cleanings, disinfections and maintenance.

#### **Documentation:**

A. Policies and procedures (including a comprehensive equipment list), supported by evidence-based practice, related to cleaning, disinfection, and maintenance of clinical equipment, laboratory equipment, field equipment, and client service areas

### **AND**

B. Training records showing where applicable staff were trained on policies and procedures related to cleaning, disinfection and maintenance of clinical equipment, laboratory equipment, field equipment, and client service areas **AND** 

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

C. Since the previous site visit, evidence of implementation of policies and procedures for assuring cleaning, disinfection and maintenance of clinical equipment, laboratory equipment, field equipment, and client service areas

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 30.7:**

The local health department shall have and comply with policies and procedures for infection control required by law in providing clinical services.

### **Documentation:**

A. Policies and procedures

### **AND**

B. Since the previous site visit, two examples of evidence of compliance with infection control laws

### **COVID-19 Potential Evidence:**

• Use of PPE during COVID response could be used as an example for part B

# **Activity 30.8:**

The local health department's hours of operation shall be based on documented community need.

### **Documentation:**

**A.** Since the previous site visit, evidence of consumer and community input related to hours of operation

#### AND

B. Evidence of agency's evaluation of that input

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 30.9:**

The local health department shall prohibit the use of tobacco in its facility.

### **Documentation:**

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

A. Signage prohibiting the use of tobacco in its facilities

### **COVID-19 Potential Evidence:**

• None at this time

# Activity 30.10:

The local health department shall make efforts to prohibit the use of tobacco in all areas and grounds within fifty (50) feet of the health department facility.

### **Documentation:**

A. Evidence that the agency may prohibit the use of tobacco use within 50 feet by vote of the board of health or the board of county commissioners for ALL department facilities

OR

B. Since the previous site visit, evidence that a request to prohibit the use of tobacco within 50 feet was made to the board of health, county commissioners or property owner for ALL facilities with a response from the board of health, county commissioners or property owner

### **COVID-19 Potential Evidence:**

None at this time.

# **Activity 31.1:**

The local health department shall develop and implement policies and procedures regarding the administration of the local health department and shall assure policies and procedures are accessible to staff.

#### **Documentation:**

A. Administrative policies and procedures

#### AND

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

B. Accessibility of policies and procedures

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 31.2:**

The local health department shall have a current organizational chart showing lines of authority.

### **Documentation:**

A. Current organizational chart with identifiable lines of authority.

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 31.3:**

The local health department shall have written personnel policies that address disciplinary, grievance and harassment issues.

### **Documentation:**

A. Personnel policies that address disciplinary, grievance and harassment issues

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 31.4:**

The local health department shall have current written position descriptions and qualifications for each staff position.

### **Documentation:**

A. Policy requiring annual review of position descriptions

#### AND

B. Current position descriptions that have been signed, dated and reviewed annually by both employee and supervisor to be verified through observations by Site Visitors. Site visitors will review a written position description for each individual selected for review from one of the previous years since the last site visit, except for 2020 and 2021.

Site visitors will review at least one individual in each of the following roles: public health nursing, environmental health and member of the management team. If the randomly selected personnel records do not reflect these roles, additional personnel records may be requested.

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 31.5:**

The local health department shall implement a performance appraisal system for all staff.

### **Documentation:**

A. Performance appraisal policies and procedures

#### AND

B. Signed and dated annual (except for 2020 and 2021) performance appraisal, to be verified through observations by Site Visitors. To be accepted as valid documentation, the performance appraisal should have been conducted within a randomly selected year since the last accreditation site visit, and is to be signed and dated by the employee and the supervisor conducting the appraisal.

Site visitors will review at least one individual in each of the following roles: public health nursing, environmental health and member of the management team. If the randomly selected personnel records do not reflect these roles, additional personnel records may be requested.

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 31.6:**

The local health department shall have an inventory of equipment that includes a plan for replacement.

### **Documentation:**

A. Inventory list

**AND** 

B. Replacement plan for equipment

**AND** 

C. Since the previous site visit, evidence that the plan has been followed

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 32.1:**

The local health department shall have computer equipment and software needed to interface with state data management systems.

### **Documentation:**

A. Since the previous site visit, evidence of data exchange between LHD and two different state systems

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 32.2:**

The local health department shall ensure that staff are able to use the management information system to participate in electronic communications and public health program implementation.

#### **Documentation:**

A. Policy on training staff on management information systems

#### **AND**

B. Since the previous site visit, two examples of evidence of implementation of that policy

#### OR

C. A statement signed by the health director that no new staff have been hired and no new information systems have been implemented since the last site visit

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 32.3:**

The local health department shall have a written policy regarding authorized and prohibited use of computer equipment, email and Internet.

### **Documentation:**

A. Policy

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 32.4:**

The local health department shall have policies and procedures to assure management information system security, and use passwords and screensavers to safeguard the privacy of electronic information.

#### **Documentation:**

A. Policies and procedures

#### AND

To be verified through observations by Site Visitors (refer to "Activities that Require Visual Observation" sheet):

B. Evidence that policies and procedures have been implemented

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 33:** The local health department.

# **Activity 33.1:**

The local health department shall demonstrate that it receives financial support from a local taxing authority.

#### **Documentation:**

A. Evidence reflecting local appropriations for local health department for every year since last site visit

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 33.2:**

The local health department shall operate under a budget approved by the appropriate authority under state statute.

#### **Documentation:**

A. Current budget

#### **AND**

B. Evidence that it has received official approval from the appropriate authority

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 33.3:**

The local health department shall follow generally accepted accounting principles.

### **Documentation:**

A. Findings of most recent audit

#### AND

B. If audit the had findings related to the health department, evidence of corrective actions taken based on those findings

#### OR

C. If there were no audit findings, the statement from the audit report indicating such

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 33.4:**

The local health department shall have policies that assure segregation of financial management duties and accountability for funds.

#### **Documentation:**

A. Policies

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 33.5:**

The local health department shall determine the cost of services in setting fees.

#### **Documentation:**

A. For each year since the previous site visit, except for 2020 and 2021, minutes of agency meetings where costs of services are determined and fees proposed

#### AND

B. For each year since the previous site visit, except for 2020 and 2021, board of health or advisory committee on health minutes reflecting discussion of service costs

#### **AND**

C. For each year since the previous site visit, except for 2020 and 2021, data or methodology used to determine costs

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 33.6:**

The local health department shall develop and present periodic budget, expenditure and other financial tracking reports to the board of health for its review.

### **Documentation:**

A. Since the previous site visit, three different financial reports

#### **AND**

B. Since the previous site visit, BOH minutes reflecting presentation of those reports.

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 33.7:**

The local health department shall have a financial risk management system in place to address uncollected fees and bad debt.

#### **Documentation:**

A. Policies and procedures defining financial risk management for uncollected fees and bad debt

### **AND**

B. Since the previous site visit, evidence of implementation

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 34.1:**

The local board of health shall have operating procedures which shall comply with state law.

### **Documentation:**

A. Current board of health operating procedures

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 34.2:**

The local board of health shall have access to legal counsel.

### **Documentation:**

A. Current copy of contract, letter of agreement, correspondence, or other evidence verifying access to legal counsel

## **COVID-19 Potential Evidence:**

• COVID-related correspondence with legal counsel (regarding isolation/quarantine, closing of entities, sharing of data, etc.) could be used.

# **Activity 34.3:**

The local board of health shall follow the procedures for adopting rules in G.S. 130A-39.

#### **Documentation:**

A. Policy/procedures for rule-making

#### **AND**

B. If a rule has been adopted since the previous site visit, evidence that policy/procedure was followed

#### OR

C. If a rule has not been adopted since the previous site visit, evidence of signed board of health statement to that effect.

### **COVID-19 Potential Evidence:**

• If the BOH adopts a COVID-related rule, this could be used.

# **Activity 34.4:**

The local board of health shall evaluate the need for the adoption or amendment of local rules or ordinances.

#### **Documentation:**

A. Since the previous site visit, evidence of implementation of rules/ordinance adoption or amendment

#### OR

B. Since the previous site visit, BOH minutes indicating that the BOH has done an evaluation and feels no new or amended rules or ordinances are needed

## **COVID-19 Potential Evidence:**

• If the BOH considers and evaluates any rules/ordinance additions or amendments due to COVID, this could be used.

**Benchmark 35:** The local board of health shall assure a fair and equitable adjudication process.

# **Activity 35.1:**

The local board of health shall assure it follows the procedures for adjudications in G.S. 130A-24.

### **Documentation:**

A. Policies and/or procedures for adjudications, specific to G.S. 130A-24

#### AND

B. If an adjudication has occurred since the previous site visit, evidence that policy/procedure was followed

#### OR

C. If an adjudication has not occurred since the previous site visit, evidence of signed board of health statement to that effect.

### **COVID-19 Potential Evidence:**

• If an adjudication is brought before the Board related to COVID response (for example, appeal of an isolation or quarantine order), this could be used for part B.

**Benchmark 36:** The local board of health members shall be trained regarding their service on the board.

# **Activity 36.1:**

The local health department shall provide board of health members with a written board handbook developed or updated within the past 12 months.

### **Documentation:**

A. Dated BOH handbook developed or updated in the past 12 months

## **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 36:** The local board of health members shall be trained regarding their service on the board.

# **Activity 36.2:**

The local health department shall assure new board of health members receive training and reference materials on the authorities and responsibilities of the local board of health within the first year after appointment to the board.

#### **Documentation:**

A. Policies and/or procedures for BOH training

AND

B. Training materials used

**AND** 

C. Dated evidence of new BOH members' participation in orientation training activities during their first year of service

## **COVID-19 Potential Evidence:**

None at this time

**Benchmark 36:** The local board of health members shall be trained regarding their service on the board.

# **Activity 36.3:**

The local health department shall assure on-going training for board of health members related to the authorities and responsibilities of local boards of health.

#### **Documentation:**

A. Policies and/or procedures for BOH training

AND

B. Training materials used

**AND** 

C. Dated evidence of all BOH members' participation in on-going training activities related to authorities and responsibilities of BOH since the previous site visit

### **COVID-19 Potential Evidence:**

• COVID-response training as it relates to BOH authorities and responsibilities (such as isolation and quarantine authorities) could be used for parts B and C.

**Benchmark 37:** The local board of health or the consolidated human services director shall assure the development, implementation and evaluation of local health services and programs to protect and promote the public's health.

# **Activity 37.1:**

The local board of health or the consolidated human services director shall assure that a qualified local health director has been appointed in accordance with G.S. 130A-40 or 40.1

### **Documentation:**

A. Evidence that the current health director has required credentials

OR

B. If the position is currently vacant, evidence that the former health director was qualified and a new qualified director is being sought

### **COVID-19 Potential Evidence:**

• None at this time

# **Activity 37.2:**

The local board of health shall approve policies for the administration of local public health programs.

#### **Documentation:**

A. Since the previous site visit, BOH minutes approving policies in compliance with the organization's policy on policies

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 37.3:**

The local board of health or the consolidated human services director shall describe and define the knowledge, skills, and abilities that must be met by the local health director, consistent with the requirements in G.S. 130A-40.

#### **Documentation:**

A. If the local board of health or the consolidated human services director has hired a Health Director since the previous site visit or if a search is presently underway, evidence that BOH or consolidated human services director sought or is seeking a health director with the knowledge, skills, and abilities that must be met by a local health director

#### OR

B. If the health director has been in place since the previous site visit, evidence of signed board of health/consolidated human services director statement indicating that the local health department director has been in his/her position for xx number of years, therefore the local board of health or consolidated human services director has not needed to define the knowledge, skills and abilities needed for the position

## **COVID-19 Potential Evidence:**

None at this time.

# **Activity 37.4:**

The local board of health or the consolidated human services director shall review and approve the job description of the local health director.

#### **Documentation:**

A. Current health director job description that has been signed, dated and reviewed within the last 12 months

#### **AND**

B. Evidence that the BOH reviewed and approved the health director job description at least once since the previous site visit

### **COVID-19 Potential Evidence:**

• None at this time

# **Activity 37.5:**

The local board of health or the consolidated human services director shall conduct an annual performance review of the health director.

#### **Documentation:**

A. Current health director performance review that has been signed, dated and reviewed within the last 12 months

#### AND

B. Evidence that the BOH had input in the most recent health director performance review

## **COVID-19 Potential Evidence:**

None at this time

# **Activity 37.6:**

The local board of health or the consolidated human services director shall approve policies for the recruitment, retention and workforce development for agency staff.

#### **Documentation:**

A. BOH minutes or consolidated human services director correspondence indicating approval of policies, plans, or allocations through the budget process to provide for recruitment, retention and workforce development for agency staff

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 38:** The local board of health shall participate in the establishment of public health goals and objectives.

# **Activity 38.1:**

The local board of health shall annually review reports provided by the local health department on the community's health.

#### **Documentation:**

A. For each year since the previous site visit, board of health minutes reflecting review of two annual reports related to the community's health. Submission of only one report per year is required for 2020 and 2021.

### **COVID-19 Potential Evidence:**

• A 2020 or 2021 COVID response annual report could be presented for the 2020 or 2021 example.

**Benchmark 38:** The local board of health shall participate in the establishment of public health goals and objectives.

# **Activity 38.2:**

The local board of health or the advisory committee on health shall review community health assessment data and citizen input used to plan and monitor progress toward health-related goals.

#### **Documentation:**

A. Since the previous site visit, except for 2020 and 2021, evidence of BOH or advisory committee on health review of SOTCH reports for each year a CHA was not conducted

#### **AND**

B. Since the previous site visit, except for 2020 and 2021, evidence of BOH or advisory committee on health review of specific aspects of CHA data (for each year a CHA was conducted)

### **COVID-19 Potential Evidence:**

None at this time

**Benchmark 38:** The local board of health shall participate in the establishment of public health goals and objectives.

# **Activity 38.3:**

The local board of health or the advisory committee on health shall assure that individuals, agencies, and organizations have the opportunity to participate in the development of goals, objectives and strategies for community health improvement.

#### **Documentation:**

A. BOH/advisory committee on health policy regarding broad community collaboration in the development of goals, objectives and strategies for community health improvement

#### **AND**

B. Since the previous site visit, BOH/advisory committee on health minutes reflecting that public participation occurred

### **COVID-19 Potential Evidence:**

None at this time

# **Activity 39.1:**

The local board of health or the advisory committee on health shall communicate with the board of county commissioners, units of government and private foundations in support of local health department efforts to secure national, state and local financial resources.

#### **Documentation:**

A. Since the previous site visit, BOH or advisory committee on health correspondence to board of county commissioners about efforts to secure financial resources

### **AND**

B. Since the previous site visit, BOH or advisory committee on health correspondence with other units of government or private foundations in regards to efforts to secure financial resources

### **COVID-19 Potential Evidence:**

• Correspondence by the BOH (of health director as designee) with the BOCC and other units of government/private foundations to secure COVID-related financial resources could be used.

# **Activity 39.2:**

The local board of health shall review fiscal reports to assure essential services of public health are being provided in accordance with local, state and federal requirements.

### **Documentation:**

A. Since the previous site visit, evidence of two examples of BOH minutes demonstrating review of fiscal reports that assure essential services of public health are being provided.

### **COVID-19 Potential Evidence:**

• Review of COVID-related grants/state funds could be used.

# **Activity 39.3:**

The local board of health shall annually review and approve the local health department budget and approve fees in accordance with G.S. 130A-39(g).

#### **Documentation:**

A. Since the previous site visit, BOH minutes reflecting review and approval of department fees

## **COVID-19 Potential Evidence:**

• None at this time

# **Activity 39.4:**

The local board of health or the advisory committee on health shall communicate with the board of county commissioners, units of government and private foundations in support of the development, implementation and evaluation of public health programs and a community health improvement process.

#### **Documentation:**

A. Since the previous site visit, BOH or advisory committee on health communication with board of county commissioners in support of public health programs and improvement

### **AND**

B. Since the previous site visit, BOH or advisory committee on health communication with other units of government or private foundations in support of public health programs and improvement

### **COVID-19 Potential Evidence:**

Communication by the BOH (of health director as designee) with the BOCC and other
units of government/private foundations in support of COVID-related (or general
emergency preparedness and response) programs and response could be used.

# **Activity 39.5:**

The local board of health shall assure that the proposed budget for the local health department meets maintenance of effort requirement in the consolidated agreement between the Division of Public Health and local health department.

#### **Documentation:**

A. Signed copy of current Consolidated Agreement

#### **AND**

B. Since the previous site visit, a Web Identity Role Management (WIRM) report that the local health department sends to the Division of Public Health.

### **COVID-19 Potential Evidence:**

• None at this time

**Benchmark 40:** The local board of health or the advisory committee on health shall advocate in the community on behalf of public health.

# **Activity 40.1:**

The local board of health or the advisory committee on health shall inform elected officials and community boards about community health issues.

#### **Documentation:**

A. Since the previous site visit, evidence that demonstrates that the BOH or advisory committee on health informed elected officials about community health issues

#### AND

B. Since the previous site visit, evidence that demonstrates that the BOH or advisory committee on health informed community boards about community health issues

## **COVID-19 Potential Evidence:**

• Communication by the BOH (of health director as designee) with policy-makers and community boards about COVID could be used.

**Benchmark 40:** The local board of health or the advisory committee on health shall advocate in the community on behalf of public health.

# **Activity 40.2:**

The local board of health or the advisory committee on health shall communicate support for the enactment and retention of laws and rules and the development of public health interventions that protect health and ensure safety.

#### **Documentation:**

A. Since the previous site visit, evidence that demonstrates that the BOH or advisory committee on health communicated support for laws, rules, or public health interventions to elected officials

#### AND

B. Since the previous site visit, evidence that demonstrates that the BOH or advisory committee on health communicated support for laws, rules, or public health interventions to community boards

### **COVID-19 Potential Evidence:**

 Communication by the BOH (or health director as designee) with policy-makers and community boards about support for COVID laws, rules, or interventions (such as stay-at-home, voluntary quarantining, wearing masks, social distancing, etc.) could be used.

**Benchmark 41:** The local board of health or the advisory committee on health shall promote the development of public health partnerships.

# **Activity 41.1:**

The local board of health or the advisory committee on health shall take actions to foster community input regarding public health issues.

#### **Documentation:**

A. Since the previous site visit, evidence of two examples of the BOH or advisory committee on health taking actions to foster community input regarding public health issues

### **COVID-19 Potential Evidence:**

• If the LHD held a forum/town hall related to COVID response and the BOH requested community participation and attended the event, this could be used for one example (or both if multiple, separate events were held).

**Benchmark 41:** The local board of health or the advisory committee on health shall promote the development of public health partnerships.

# **Activity 41.2:**

The local board of health or the advisory committee on health shall take actions to foster local health department partnership-building efforts and staff interactions with the community.

#### **Documentation:**

A. Since the previous site visit, evidence of agency partnership effort

#### **AND**

B. Since the previous site visit, evidence of BOH or advisory committee on health support of the partnership effort

### **COVID-19 Potential Evidence:**

• If the BOH facilitated support of a strong partnership effort to aid in COVID response (such as with a local non-profit to address providing housing to the homeless in quarantine/isolation) and the LHD engaged, this could be used.

**Benchmark 41:** The local board of health or the advisory committee on health shall promote the development of public health partnerships.

# **Activity 41.3:**

The local board of health or the advisory committee on health shall take actions to foster the coordination of resources to enhance partnerships and collaboration to achieve public health objectives.

#### **Documentation:**

A. Since the previous site visit, evidence of two examples showing BOH or advisory committee on health action to foster the coordination of resources

### **COVID-19 Potential Evidence:**

• If the BOH (or health director as designee) took action to promote the coordination of resources with partners to address COVID 19 response, this could be used (for one example and perhaps for two if separate efforts can be documented).