

Equity in Accreditation

Summary of Discussions, Summer 2022

Background

In June 2022, The North Carolina Local Health Department Accreditation (NCLHDA) Program conducted focus group discussions with five different health departments across the state to explore how health departments are currently engaging in equity work, how they see that work overlapping with the role of accreditation, and how they would like to see the accreditation program support equity work.

We heard from urban and rural health departments in regions 3-6 with a variety of governance structures and local versus regional models. The program promoted the opportunity to participate in discussions through the monthly listserv, AAC Advisory Council contacts, Board representatives, and direct outreach to counties participating in the Improving Community Outcomes for Maternal and Child Health initiative given its focus on collaboration and completion of equity audits. Participation was fully voluntary, and participating health departments were offered a \$150 honorarium for their time.

Climate, Culture, & Current Work

Participating health departments often experienced support within their health department to work on health equity. The health departments are generally leading equity-related discussions throughout county government spaces, and health equity work is starting to get folded into broader initiatives. While some efforts were paused due to the COVID-19 response, COVID-19 also shed new light on equity concerns. Now some are seeing pre-pandemic equity initiatives resume.

Participating health departments are already doing a lot to further health equity! The health departments we spoke to had active internal staff workgroups focused on health equity. Participants shared momentum in equity capacity building, specifically naming bringing in equity consultants and requiring more equity training. Additional shared accomplishments include improvements to language services, accessibility improvements, and efforts to create, update, and/or improve policy for health department operations.

Participants shared a general interest in expanding equity work, while also navigating the challenges at play. There is a lot of momentum in specifically addressing racial equity; however, participants also expressed that some staff feel uncomfortable talking about race at their workplaces. The extent to which coworkers are addressing equity varies across county departments, program teams, and individual staff. In rural spaces, participants acknowledged that equity conversations often look different and emphasized the importance of adapting equity language and resources to local context.

Participants named some specific challenges and desired opportunities, summarized as:

Theme	Challenge	Opportunities
Staff turnover & training	Staff & leadership turnover hinders momentum and leaves positions vacant	Expand equity training opportunities that focus on local context and needs
Staff roles	Staff do not always recognize where equity fits into their specific role	Improve internal communications to bring everyone along in equity conversations
Building momentum	Staff face pushback when talking about equity and using equity terms	Meaningfully communicate with community through building physical presence in community spaces, providing materials in more languages than English and Spanish, and having additional interpretation services
Funding Accountability	Lack of staff time and compensation for equity work Difficulty enforcing policies, with emphasis "policies don't have teeth"	Additional opportunities to be determined

Defining equity. With the named challenges, it seems there are opportunities to expand health departments' equity work to address additional systems of oppression and discrimination that intersect with racism (e.g., discrimination based on ability status, age, gender, nationality, sexuality).

Role of Accreditation

Current role

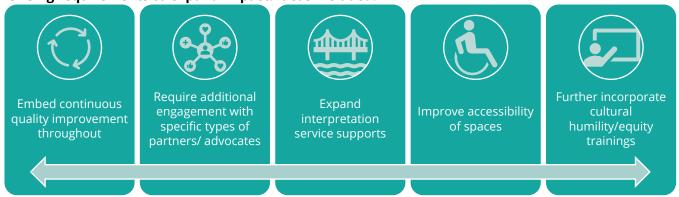
Accreditation provides accountability. When thinking about the current role accreditation plays in supporting health departments' equity activities, participants were quick to reference the accountability that accreditation provides, specifically related to existing requirements around community input, data collection, and accessibility. Having accreditation requirements helps keep community engagement at the forefront of the health department staff's minds, makes it easier for staff to accept that they have to do health equity work, and helps explain how the work is tied to equity. One participant summarized this by sharing that accreditation "keeps us where we should be... and shows us where we need to be." Beyond the more direct connections to equity, folks also found opportunities to incorporate equity into required plans and policies.



Desired role

Health departments shared ideas to expand equity while reducing "check-the-box" requirements. Many health departments named specific opportunities to expand current accreditation activities and requirements in order to provide more tailored accountability. These new ideas were also balanced with health departments' limited capacity and desire to move away from "check-the-box" requirements.

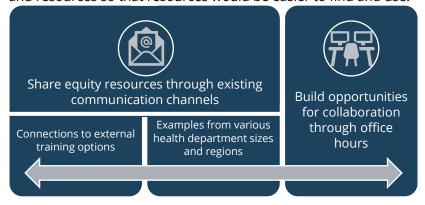
Where the NCLHDA Program already addresses equity components, participants expressed interest in revising requirements to expand impact. Ideas included:



Participants also saw opportunities to incorporate equity into additional activity requirements to:



NCLHDA can facilitate connection to resources. Across discussions, health departments expressed interest in accessing more education, training, and other resources. Participants felt that NCLHDA could play a role in facilitating connections between health departments and consolidating equity-related training opportunities and resources so that resources would be easier to find and use:



We need to align efforts. As the NCLHD Accreditation Program pursues ideas mentioned in the desired roles, we want to work together with the North Carolina Department of Public Health and other partners to align efforts.