



NORTH CAROLINA  
Local Health Department  
Accreditation

# NCLHDA Board

## Operational Guidelines

The NCLHDA Board member Operational Guidelines are to be followed by all NCLHDA Board members. These guidelines have the force of policy. The NCLHDA Accreditation Process Operational Guidelines are to be followed by all persons and agencies involved in the NCLHDA process. These guidelines have the force of policy.

Content approved by the NCLHDA Board on Nov. 17, 2023 and will be effective on Jan. 1, 2024.

A handwritten signature in blue ink that reads "David M. Stanley III".

NCLHDA Board Chair

November 17, 2023

Date

# Record of Revision

Page	Topic	Change	Date	Revised By
p. 2	Board Member Terms	Clarified that if a board member changes affiliation, they may serve on the board in another seat. If they take a new seat, they will begin a new term.	10/19/18	Amy Belflower Thomas
p. 6	Reaccreditation Vote	Changed "Accreditation" to "Reaccreditation" in the subtitle and associated text.	10/19/18	Amy Belflower Thomas
p. 6	Accreditation Vote	Clarified that designation of Accredited with Honors is not subject to any appeals process.	10/19/18	Amy Belflower Thomas
p. 8	Required Training	Clarified that new board members must sign the NCLHDA Board Operational Guidelines and complete the State Ethics Commission Statement of Economic Interest (SEI) and Ethics & Lobbying Education requirements.	10/19/18	Amy Belflower Thomas
p. 9	Statement of Economic Interest (SEI) & Mandatory Training	Clarified that individuals must complete the SEI annually as well as stay compliant with Ethics & Lobbying Education requirements, as board members not in good standing will not participate in board actions until the requirements are complete.	10/19/18	Amy Belflower Thomas
p. 6-7	Harassment and Discrimination	Added a section on program policy regarding harassment and discrimination	08/23/19	Amy Belflower Thomas
Cover	Adoption text	Added language to clarify when the changes went into effect and why.	04/27/20	Amy Belflower Thomas
Cover	Adoption text	Added language to clarify when the changes went into effect and why.	04/27/20	Amy Belflower Thomas
p. 4	Meetings	Protocol for an emergency meeting was added. Instruction related to different meeting formats was added.	04/27/20	Amy Belflower Thomas

p. 6	Board Protocol and Governance	Added a statement that Board will follow open meeting guidelines as outlined in North Carolina General Assembly legislation and rules	5/7/20	Amy Belflower Thomas
p. 11	Appendix 1	Added text to address changes needed to benchmarks or activities in response to legislation.	04/27/20	Amy Belflower Thomas
p. 6	Reaccreditation Vote	Added Unaccredited as a designation given by the Board. And clarified that every Board Member present must vote.	10/29/20	Amy Belflower Thomas
p. 4	Meetings	Edited that meetings occur at least biannually	10/11/21	Amy Belflower Thomas
p. 4	Definition of days	For consistency, changed “working” to “business” days	10/11/21	Amy Belflower Thomas
p. 6	Tense	For consistency, changed tense of accreditation terms	10/11/21	Amy Belflower Thomas
p. 6	Pronouns and Prefixes	Added bullet regarding use of stated pronouns and prefixes/titles	10/11/21	Amy Belflower Thomas
p. 7	Remote meeting	Added that closed session of remote meetings are not recorded	10/11/21	Amy Belflower Thomas
p. 9	Requirements	Added “no voting” unless SEI and training in good standing	10/11/21	Amy Belflower Thomas
p. 12	Board meeting	Changed “December” to fall	10/11/21	Amy Belflower Thomas
p. 3	Standing committees	Appeals Committee changed to Strategic Planning Committee	10/10/22	Amy Belflower Thomas
p.3	Ad Hoc Committees	Added information related to Ad Hoc Appeals Committee	10/10/22	Amy Belflower Thomas
p. 5	Reaccredited with Honors	Accreditation with Honors not subject to appeal deleted as newly developed grounds for appeal define this more clearly in Process Operational Guidelines	10/10/22	Amy Belflower Thomas

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## Name and Office

The name of this organization is the North Carolina Local Health Department (NCLHD) Accreditation Board (hereinafter “NCLHD Accreditation Board” or “Board”). The principal office of the NCLHD Accreditation Board is located at the North Carolina Institute for Public Health (NCIPH), Campus Box 8165, Chapel Hill, N.C.27599-8165.

## Authority

The Board is established through NCGS § 130A-34.1. The statute states that the Board shall “assign an accreditation status to each local health department” and thus serves as the adjudicating body for the North Carolina Local Public Health Accreditation program. The work of the Board is implemented through rules, Chapter 48 under 10A NCAC, adopted by the Commission for Public Health.

## Board Member Characteristics

The expected characteristics of Board members include:

- Maintaining collegial interactions with other Board members, NCLHD Accreditation staff and public health colleagues
- Maintaining objectivity and impartiality
- Respecting the uniqueness of the local health departments being assessed and discussed
- Maintaining flexibility and confidentiality when required
- Acting in the best interest of the Board and the NCIPH
- Avoiding conflicts of interest and disclosing such when identified
- Exercising diligence and active participation
- Adherence to the mission and goals of accreditation

## Board Membership

The Local Health Department Accreditation Board is established within NCIPH. The Board shall be composed of 17 members appointed by the Secretary of the Department of Health and Human Services as follows:

- Four shall be county commissioners recommended by the North Carolina Association of County Commissioners
- Four shall be members of a local board of health as recommended by the Association of North Carolina Boards of Health

- Three shall be local health directors, recommended by the North Carolina Association of Local Health Directors through the Accreditation Liaison Committee
- Three shall be staff members from the Division of Public Health, Department of Health and Human Services, recommended by the State Health Director
- Three shall be at large members, recommended by the Accreditation Administrator, with consultation of the NCLHD Accreditation Board Chair

In appointing Board members, all efforts will be made to choose candidates who reflect the rich diversity of our state, including geographical representation, type of local public health agency and racial/ethnic/cultural attributes.

## Board Member Terms

Board members are appointed for four years. Members may be reappointed two more terms for a maximum of three terms or 12 years total. If a Board member no longer represents the association for whom they were nominated (e.g., a county commissioner loses an election, or a health director retires), they must resign from the Board. At that time, their association will be contacted for a replacement for the vacant seat and someone will be appointed to finish the vacated seat's term. If Board member affiliation changes, that Board member is eligible to fill another seat and start a new set of three terms (e.g., a Board member may have sat on the Board for a full term as a Division of Public Health representative, but after retirement may come back onto the Board as an at-large representative).

## Officers and Committees

### Chair and Vice-Chair

The Chair is selected by the Secretary of North Carolina Department of Health and Human Services, upon recommendation of the Accreditation Administrator. The Board members shall elect a Vice-Chair by majority vote. The Chair and Vice-Chair shall serve until they are no longer Board members or until they resign the position.

### Secretary

The Accreditation Administrator shall serve as Secretary to the Board, but the Accreditation Administrator is not a member of the Board. The Accreditation Administrator may delegate the duties of the Secretary that are set forth in these operating procedures to an appropriate NCLHD Accreditation program employee.



## Standing Committees

All standing committees are subject to the North Carolina open meetings laws and shall comply with the provisions of those laws. The Board Chair shall serve as ex officio to all committees.

All members of the NCLHD Accreditation Board shall be assigned to a standing committee. All members shall be appointed by the Board Chair, who is also responsible for designating the chair of the committee. The Board shall have the following standing committees:

### ***Strategic Planning***

It is the duty of this committee to provide consistent guidance to the program regarding the current NCLHDA Strategic Plan and associated initiatives. The committee shall be composed of five members — one commissioner, one board of health representative and three other Board members.

### ***Standards and Evidence***

It is the duty of this committee to review changes to accreditation standards and required evidence. The committee shall be composed of seven members — one health director, one commissioner, one board of health representative and four other Board members.

### ***Policy and Procedure***

It is the duty of this committee to review and/or recommend changes to operational guidelines of the NCLHD Accreditation Board and operations. The committee shall be composed of five members — one health director, one commissioner, one board of health representative and two other Board members.

## Ad Hoc Committees

The Board may establish and appoint members for temporary committees as needed to carry out the Board's work. The Board Chair appoints committee members.

If an appeal is to be heard, the Board Chair convenes an Ad Hoc Appeals Committee, as described in Appendix 7 of the NCLHDA Process Operational Guidelines. For this ad hoc committee specifically, five Board members will compromise the committee including one Local Health Director, one Commissioner, one Division of Public Health staff member, one Board of Health member, and any other Board member. The composition of this committee will be determined and set at every fall NCLHDA Board meeting for the proceeding calendar year. If a conflict of interest arises for an Ad Hoc Appeals Committee member for an appellant health department, the Board Chair shall nominate and seat any other NCLHDA Board member in their place.

All temporary committees are subject to the North Carolina open meetings laws and shall comply with the provisions of those laws.

# Meetings

## Regular Meetings

The Board shall hold regular meetings on at least a biannual schedule with the Chair approving the date of the meeting. The meetings shall be held at a location and at a time determined by the Board Chair in consultation with the Accreditation Administrator. Any changes to the schedule will be shared with the Board as soon as they are known. Meeting dates/times will be posted on the NCLHD Accreditation website and will be shared as a public notice within two weeks of the meeting date.

## Emergency Meetings

The Board may hold emergency meetings as needed with the Chair approving the date of the meeting. The meetings shall be held at a location and time determined by the Board Chair in consultation with the Accreditation Administrator. Meeting dates/times will be posted on the NCLHDA Accreditation website and will be shared as a public notice once the meeting date is set.

## Meeting Formats

Meetings will be held in person when possible. However, situations may arise whereby the Board needs to meet via conference call and/or video conference. When these instances arise, the Board will follow the standard meeting protocols outlined below.

## Agenda

The Accreditation Administrator shall prepare an agenda for each meeting. Any Board member who wishes to place an item of business on the agenda shall submit a request to the Accreditation Administrator at least five business days before the meeting. For regular meetings, the Board may add items to the agenda or subtract items from the agenda by a majority vote. The agenda for a special or emergency meeting may be altered only if permitted by and in accordance with the North Carolina open meetings laws.

Any other request, such as from a non-Board member, for an item to be placed on the Board's agenda shall be submitted in writing to the Accreditation Administrator at least 10 business days before the meeting.

## Presiding Officer

The Chair of the Board shall preside at Board meetings if he or she is present. If the Chair is absent, the Vice- Chair shall preside. If the Chair and Vice-Chair are both absent, another member designated by a majority vote of members present at the meeting shall preside.

## Quorum

A majority of the actual membership of the Board, excluding vacant seats, shall constitute a quorum. A member who has withdrawn from a meeting shall be counted as present for purposes of determining whether or not a quorum is present.

A quorum is required to vote on any changes in process or procedures or to determine a local agency's accreditation status.

## Voting

Board members shall not be permitted to abstain from voting, unless so indicated through a conflict of interest. A member must abstain from voting in cases involving conflicts of interest as defined by North Carolina law. If a member has withdrawn, the member's vote shall be recorded as an affirmative. All actions of the Board must be adopted by at least a majority vote.

## Minutes

The Accreditation Administrator shall prepare minutes of each Board meeting. Copies of the minutes shall be made available to each Board member before or at the next regular Board meeting. At each regular meeting, the Board shall review the minutes of the previous regular meeting as well as any special or emergency meetings that have occurred since the previous regular meeting, make any necessary revisions and approve the minutes as originally drafted or as revised. The public may obtain copies of Board meeting minutes through the offices of the NCIPH.

# Amendments to Operational Guidelines

It is the policy of the Board that policy and procedures be developed to administer Board operations, Site Visit Team operations and accreditation process operations. Thus, three sets of operational guidelines (with procedures) have been developed and have the force of policy:

1. Board Operational Guidelines
2. Site Visit Team Operational Guidelines
3. Accreditation Process Operational Guidelines

The purpose of these operational guidelines are to govern the operations of NCLHD Accreditation by:

- translating the mission into practical terms
- providing a standard of practice
- establishing program expectations
- providing a framework for consistency
- establishing guidelines and compliance with state statutes and applicable rules and regulations

[Revision procedures are available in Appendix 1.](#)

# Board Protocol and Governance

The book ***SUGGESTED RULES OF PROCEDURE FOR SMALL LOCAL GOVERNMENT BOARDS***, second edition, shall be the guideline for conducting deliberations and meetings. The Board may also refer to the current edition of *Robert's Rules of Order Newly Revised (RONR)* to answer procedural questions not addressed in this document, so long as the procedures prescribed in *RONR* do not conflict with North Carolina law.

The Board will comply with all state law and rules related to open meetings.

## Other Procedural Matters

### Reaccreditation Vote

When determining reaccreditation status of a local health department, every Board member who is present must vote unless a conflict of interest has been disclosed. One of four possible actions may be taken in reviewing the potential accreditation of a local health department: 1) Reaccredited \*, 2) Conditionally Reaccredited, 3) defer decision to the next meeting; such a deferral may be taken only once for each site visit, and 4) Unaccredited.

- \* Any health department missing one or fewer activities within each of the five accreditation standards may be designated as "Reaccredited with Honors."

### Appropriate Behavior

Board members should present themselves in a professional manner during the Board meeting, i.e., including, but not limited to the following behaviors:

- maintaining decorum with the parties involved in the accreditation process
- participating in group discussions involving the adjudication process of the local health departments
- referring to Board members and other guests of the meeting according to the pronouns and/or prefixes/titles individuals either state and/or entitle themselves

### Harassment and Discrimination

The NCLHD Accreditation program is committed to providing a harassment-free environment for all participants in the accreditation process including Site Visit Team members, local health department staff, board members, and program staff. NCLHDA does not and will not tolerate any form of harassment or discrimination. The term "harassment" includes, but is not limited to, slurs, jokes, and other verbal, graphic, or physical conduct relating to an individual's race, color, sex (including same-sex), religion, national origin, citizenship, age, or disability.

“Harassment” also includes sexual advances, requests for sexual favors, unwelcome or offensive touching and other verbal, graphic, or physical conduct, or electronic communications (including email) of a sexual nature involving either members of the same sex or opposite sex. Prohibited harassment includes conduct that has the purpose or effect of unreasonably interfering with a person’s work performance or experience or creating an environment that is hostile, intimidating, or offensive. Harassment also includes verbal threats and overtly threatening body language (Reference: *Planning Association Board*).

When discrimination/harassment is experienced or suspected (including if oneself is aware of harassment directed at or by another NCLHD Accreditation Board member), it should be immediately reported to the Board Chair. In the case of concerns by/against the Board Chair, the NCLHD Accreditation Board Vice Chair should receive reports.

Retaliation or discrimination for making a good-faith report or participating in an investigation of harassment is strictly prohibited by the NCLHD Accreditation program.

## Attendance

Attendance at all Board meetings is required. If a Board member has more than one excused absence per calendar year, he or she may be asked to step down from their position.

## Closed Sessions

Closed sessions may be held upon motion and vote of the Board in open session. Please refer to page 26 of ***SUGGESTED RULES OF PROCEDURE FOR SMALL LOCAL GOVERNMENT BOARDS*** for guidelines. For remote meetings, closed sessions are not recorded.

## Conflict of Interest

Board members must excuse themselves from voting if there is a real, potential or perceived conflict of interest. A Board member may not vote on accreditation status or an appeal for the local health department for the county in which they reside. The excused member may participate in discussions. Board members may not serve on a Site Visit Team while serving as an active Board member.

Applicant agencies and those participating in the accreditation process are scheduled and published. Board members will have an opportunity to identify any conflicts of interest that might disqualify them from participating in the adjudication process of a specific local health department. Possible conflicts of interest include:

- Current or former affiliation with the agency being reviewed
- A recent or current fiscal relationship or other vested interest in the agency or its activities
- A close relative in affiliation with the agency being reviewed

The conflict of interest will be identified and noted in the minutes and the Board member will be excused from participating in the adjudication process and participating in the voting of accreditation status and/or any appeals of the specific local health department.

## Dress Code

The dress code for Board members while representing the Board, NCLHD Accreditation or the NCIPH is business attire.

## Required Training

All Board members are required to complete an orientation process when appointed to the Board. The orientation will be provided by the Accreditation Administrator or a member of the staff. After training and before being allowed to vote at a Board meeting, new members must sign the [NCLHDA Board Operational Guidelines Board Member Statement](#) and complete State Ethics Commission Statement of Economic Interest (SEI) and Ethics and Lobbying Education requirements.

Regular trainings will be offered to the Board regarding program updates, standards changes and other program operations. These trainings are required of all Board members. Also, upon being appointed to a new term, Board members shall re-sign the [NCLHDA Board Operational Guidelines Board Member Statement](#).

## Compliance With North Carolina Law

In conducting its business, the Board shall comply with all applicable North Carolina laws, including but not limited to open meetings laws, public records laws and the statutes and rules of local public health accreditation. To assist the Board in compliance, the Accreditation Administrator shall maintain a current copy of relevant North Carolina General Statutes and make them available to Board members on request.

## Record Retention

The Department of Natural and Cultural Resources and the NCLHD Accreditation Program have agreed that certain NCLHD Accreditation records possess only brief administrative, fiscal, legal, research and reference value. The agencies have also agreed that those records do not and will not have further official use or value for administrative, research or reference purposes after the respective retention periods specified herein.

To that end, the NCLHD Accreditation has established and enforces this procedure setting minimum retention periods for records with the disposition instruction “*reference value ends*.” The NCLHD Accreditation Program destroys, transfers or disposes of records in the manner and the times specified in [Retention of Records](#), unless such records are subject to audit. Records subject to audit or those legally required for ongoing official proceedings must be retained until released from such audits or official proceedings, notwithstanding the instructions of existing retention schedules. The NCLHD Accreditation Program is responsible for the cost of microfilm production for those records scheduled to be microfilmed.

Public records, including electronic records, not listed in this schedule or in the *General Schedule for State Agency Records* are not authorized to be destroyed. Electronic records will be destroyed so that the data and metadata are overwritten, deleted or unlinked in such a way that the records may not be practicably reconstructed. Confidential records will be destroyed in such a manner that the records cannot be practicably read or rebuilt.

## **State Ethics Act**

Effective January 1, 2010, the NCLHD Accreditation Board was covered by the State Government Ethics Act. It was determined by the State Ethics Commission (SEC) that our Board was a covered entity, under the jurisdiction of the SEC and must abide by NCGS 138A.

The State Government Ethics Act requires that those covered follow conflict of interest standards and gift restrictions. Those covered must also file a financial and personal interest disclosure form, Statement of Economic Interest and receive mandatory training.

## **Statement of Economic Interest (SEI)**

Individuals must file the SEI prior to their appointment, election or employment as well as annually thereafter. Any Board member not in good standing with SEI completion will not participate in NCLHD Accreditation Board actions, including voting, until the SEI is completed.

## **Mandatory Training**

Public servants and ethics liaisons must participate in an Ethics and Lobbying Education presentation within six months of their election, re-election, appointment or employment. Public servants and ethics liaisons must also participate in a refresher Ethics and Lobbying Education presentation at least every two years thereafter.

Any Board member not in good standing with required Ethics and Lobbying Education requirements will not participate in NCLHD Accreditation Board actions, including voting, until the training is completed.



## NCLHDA Board Operational Guidelines

# Board Member Statement

As a North Carolina Local Health Department Accreditation Board member, I must hold all agency accreditation information and the content of accreditation discussions and deliberations in confidence. I understand and agree that any violation of confidentiality may seriously jeopardize the accreditation process. I recognize that a conflict of interest could jeopardize the accreditation status of a local health department. Conflicts of interest also undermine the credibility of the Board and the overall accreditation process. I understand and agree to disclose any potential, perceived or actual conflict of interest to the Board.

I understand my obligations under the State Government Ethics Act and agree to abide by the requirements of the State Ethics Commission.

As a North Carolina Local Health Department Accreditation Board member, I have read and understand the NCLHDA Board Operational Guidelines.

_____	_____	_____
Board Visitor Name (Please Print)	Signature	Date

*Acknowledgement of NCLHD Accreditation Administrator:*

_____	_____	_____
Administrator Name (Please Print)	Signature	Date



# Appendix 1

## *Operational Guidelines Revision*

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### **Definitions:**

#### ***Operational Guidelines:***

1. Dictate a course of action adopted by and pursued by the NCLHD Accreditation Board that guide and determine present and future decisions and actions.
2. Indicate the general course or direction in which all activities must operate.
3. Assist staff and partners in the attainment of program goals.
4. Serve as the coordination document for Board, site visit team and accreditation process information and procedures.
5. Include appendices for specific procedures.
6. Have the force of policy.
7. Will be amended prior to beginning new program operations, when changes occur and/or when required by law or legislation.

#### ***Appendices:***

1. Include the objectives, rules and regulations which guide NCLHD Accreditation activities and direct allocation of resources.
2. Give details on the method of performing an operation or a manner of proceeding on a course of action.
3. Direct actions required to perform a specific task within the operational guidelines.
4. Describe the “how, who, when or where” through which guidelines are carried out.
5. Are consistent with policy statements and standard of practice as appropriate.

### **Applicable Law, Rules and References:**

None

### **Responsible Persons:**

Accreditation Administrator, NCLHD Accreditation Board

## Procedures:

1. All operational guidelines will be reviewed by the Board Policy and Procedure committee annually, with any changes presented for approval at the fall Board meeting, for implementation on January 1 of the coming year. A quorum must be present at the meeting at which amendments are discussed and approved and any amendments must be approved by a majority of the members present at the meeting.
2. Changes made in response to law or legislation may require immediate review and adoption. These changes will be reviewed by the Board Policy and Procedure committee when proposed and will then go to the Board for approval at their next meeting or at an emergency meeting, if deemed necessary. A quorum must be present at the meeting at which amendments are discussed and approved and any amendments must be approved by a majority of the members present at the meeting.
3. Changes to operational guidelines can initiate from the Accreditation Administrator or any member of the Board.
4. The Accreditation Administrator (or designated NCLHD Accreditation staff) will be responsible for writing new or revisions to existing operational guidelines (including appendices).
5. If relevant, the Accreditation Administrator will ensure those involved in carrying out or affected by the guidelines are represented in review and/or development.
6. If relevant, the Accreditation Administrator will refer to appropriate rules, regulations and/or standards of practice as needed. Legal review may also be requested by the Accreditation Administrator or NCLHD Accreditation Board

Any new procedures will be included as appendices within the relevant operational guidelines and reflected in the Table of Contents in the front of the document.

7. Any new appendices will follow the following format:

**Definitions:** *clarifies/standardizes terms and defines abbreviations*

**Applicable Law, Rules and References:** *legal authority, if any and other sources used for development of policy such as best practice; ACOG; CDC guidelines*

**Responsible Person(s):** *“who” does it*

**Procedures:** *outlines specific steps of “what” shall be done*

**Reference Guidelines and/or Appendices:** *other operational guidelines or appendices with similar content or affected content*

8. All revisions will be documented as such at the front of each set of operational guidelines.
9. After adoption, any changes to operational guidelines will be posted on the NCLHD Accreditation website and will be reviewed at the annual webinar update.
10. All staff of NCLHD Accreditation Program will receive training on policies during orientation by the Accreditation Administrator and as new policies are developed or existing policies are revised.
11. Annual review, whether changes are made or not, will be documented by electronic signature of the Board Chair.
12. Upon revision, original operational guidelines shall be filed for retention in the NCIPH offices.

## Reference Guidelines and/or Appendices:

NCLHDA Board Operational Guidelines, [Appendix 2: Retention of Records](#)

# Appendix 2

## *Retention of Records*

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### **Definitions:**

Records: Files, both paper and electronic, maintained by the NCLHDA program

### **Applicable Law, Rules and References:**

None

### **Responsible Persons:**

Accreditation Administrator (AA)

### **Procedures:**

The following types of records are to be disposed of as follows:

**1. ITEM 50161 – Accreditation File**

Definition – records concerning accreditation for local health departments. File includes health department self-assessment instruments (HDSAIs), interview question sheets, final reports and other related records.

Disposition Instructions – Scan in office interview question sheets. Destroy in office after 10 days paper copies of scanned records. Destroy in office remaining paper records and electronic records two years after renewal or expiration of accreditation.

**1. ITEM 50162 – Governing Board Minutes File**

Definition – Records concerning board meetings. File includes minutes. File also includes agendas and attachments not incorporated into the minutes.

Disposition Instructions – Retain in office permanently.

**2. ITEM 50163 – Training File**

Definition – Records concerning training for health departments and Site Visitors. File includes agendas, handouts, presentations and other related records.

Disposition Instructions – Destroy in office when superseded or obsolete.

## **Reference Guidelines and/or Appendices:**

*General Schedule for State Agency Records*

*North Carolina Department of Natural and Cultural Resources*