



NORTH CAROLINA

Local Health Department
Accreditation

NCLHDA Site Visit Team

Operational Guidelines

The NCLHDA Site Visit Team Operational Guidelines are to be followed by all NCLHDA Site Visit Team members. 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	Lead Site Visitor Responsibilities	Clarified due date for the Site Visit Team Report and the Quality Improvement Report to 10 business days from completion of the site visit (versus 14 days).	10/19/18	Amy Belflower Thomas
p. 2	Lead Site Visitor Responsibilities	Added expectations for the Lead Site Visitor in fulfilling responsibilities and noted that if responsibilities are not fulfilled, they can be removed from the position.	10/19/18	Amy Belflower Thomas
p. 3-4	Criteria for Site Visitor Selection	Moved the "Criteria for Site Visitor Selection" section. Added information about new site visitor selection process.	10/19/18	Amy Belflower Thomas
p. 4	Site Visitor Required Documentation	Added clarification to the steps in the process to apply for a site visitor role including the requirement to sign a Site Visitor Commitment Statement.	10/19/18	Amy Belflower Thomas
p. 5	Scheduling and Logistics	Added clarification that Site Visitors are expected to keep their scheduled site visits to the extent possible. If they request to reschedule multiple times, they may be removed as a site visitor.	10/19/18	Amy Belflower Thomas
p. 5	Site Visit Team Conference Call	Removed "mandatory" from the site visit team conference call. The call is now voluntary based on need.	10/19/18	Amy Belflower Thomas
p. 6	Severe Weather Protocol	Added information related to Severe Weather Protocol for site visits.	10/19/18	Amy Belflower Thomas
p. 7-8	Interviews	Removed the local government representative interview.	10/19/18	Amy Belflower Thomas
p. 15	New Site Visitor Commitment Statement	Added a "NCLHDA New Site Visitor Commitment Statement" that all in-training Site Visitors must sign.	10/19/18	Amy Belflower Thomas

p. 6	Safety and Security during a Site Visit	Added language regarding the process for addressing safety and security concerns during a site visit.	10/24/19	Amy Belflower Thomas
p. 11-12	Harassment and Discrimination	Added language regarding harassment and discrimination, including reference to <i>Process Operational Guidelines</i> protocol for Site Visits.	10/24/19	Amy Belflower Thomas
p. 4-5	Conflict of Interest	Added narrative about prohibition on independent consulting contracts with LHDs.	12/13/19	Amy Belflower Thomas
p. 3-4	Criteria for Site Visit Selection	Added text to include the fact that an Accreditation Employee in addition to the Accreditation Administrator could interview new site visitors.	10/29/20	Amy Belflower Thomas
p. 5-6	Document Review	Added "Review" to the beginning of the third bullet.	10/29/20	Amy Belflower Thomas
p. 10-11	Suggestions for Evidence Review	Adjusted text to align with the process using the NCLDHA Dashboard.	10/29/20	Amy Belflower Thomas
Throughout	Terminology	Changed "site visit" to "review".	10/11/21	Amy Belflower Thomas
p. 3	Requirements	Added that team must be able to use dashboard.	10/11/21	Amy Belflower Thomas
p. 6	Process update	Deleted content to update to dashboard process.	10/11/21	Amy Belflower Thomas
p. 6	Process update	Updated content to dashboard process.	10/11/21	Amy Belflower Thomas
p. 6	Conference call	Deleted outdated section.	10/11/21	Amy Belflower Thomas
p. 7	Dashboard	Updated processes to dashboard.	10/11/21	Amy Belflower Thomas
p. 9	Terminology	Changed "benchmark" to "activity".	10/11/21	Amy Belflower Thomas
p. 5	Coordination calls	Deleted old information about pre-calls of SVT	10/10/22	Amy Belflower Thomas

p. 6	Visual observations	Deleted old information about Visual Observations list	10/10/22	Amy Belflower Thomas
p. 6	Severe weather	Updated to Appendix 2	10/10/22	Amy Belflower Thomas
p. 9	Written response	Updated to Appendix 3	10/10/22	Amy Belflower Thomas
p. 10	Confidentiality	Updated to "site visitors on-site" to sign agency confidentiality statement	10/10/22	Amy Belflower Thomas
p. 12	Remote participation	Added statement about need for SVs to participate fully, even if virtual	10/10/22	Amy Belflower Thomas

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Role of Site Visitors

The primary role of the Site Visit Team (SVT) is to amplify, clarify and verify the health department's self-assessment in order to evaluate the health department's degree of compliance with the Benchmarks and associated Activities. SVT members serve as representatives of the North Carolina Local Health Department (NCLHD) Accreditation Board.

To accomplish this task, the SVT will:

- Review the Health Department Self-Assessment Instrument (HDSAI) and supporting documentation in accordance with the HDSAI Interpretation Document;
- Visit the local health department facilities and inspect in accordance with the Benchmarks; and
- Interview local health department staff, Board of Health (or governing board assuming the powers and duties assigned to Boards of Health in statute or administrative code) members and other persons necessary to evaluate compliance with the Benchmarks.

The work of the SVT is to be fair, equitable, unbiased and accurate.

The presence of the SVT should build credibility and inspire trust.

The SVT should exhibit integrity, consistency, confidentiality and professionalism.

Composition of the Site Visit Team

Each SVT will be composed of four individuals with expertise or experience in local public health, including experience or expertise in environmental health, public health nursing, public health administration and policy development/governance. Those selected to serve on site visit teams must have the confidence of the NCLHD Accreditation Board and the counties being visited. The SVT includes a:

- Local Health Administrator,
- Public Health Nurse,
- Environmental Health Specialist, and
- Board of Health Representative.

A Site Visit Coordinator will be appointed to the SVT by the Accreditation Administrator to assist the SVT in their efforts. The Site Visit Coordinator is to serve as the liaison between the Site Visit Team and the local health department and the Accreditation Administrator. The Site Visit Coordinator does not participate in the review and evaluation of documentation/evidence or the interviews. It is the responsibility of the Site Visit Coordinator, in conjunction with the Lead Site Visitor, to coordinate the activities of the SVT during the review and address any conflicts arising between SVT members and the health department during the review process.

Lead Site Visitor

One person on each SVT will be designated to serve as Lead Site Visitor by the Accreditation Administrator; this person will usually be serving in the Local Health Administrator role. During the review, the Lead Site Visitor is the spokesperson for the group. The Lead Site Visitor is also responsible for completing the SVT Report and Suggestions for Quality Improvement documents after the review. The Lead Site Visitor is the point-of-contact with the Site Visit Coordinator, who will convey information or requests for additional documentation to the Agency Accreditation Coordinator (AAC). Throughout the review, the Lead Site Visitor will evaluate the progress of the team and make additional (or revised) assignments. Before a team member can be designated as the Lead Site Visitor, he or she must have served on at least one evidence review process.

The Lead Site Visitor will have the following responsibilities:

- Participate as an interviewer along with other members of the SVT;
- Work with the Site Visit Coordinator to make any necessary changes to the interview schedule;
- Collect information and input of SVT, complete the SVT Report and Suggestions for Quality Improvement and submit the reports to the Accreditation Administrator within 10 business days of completion of the site review; and
- Present, on behalf of the SVT, the final report and recommendation at the NCLHD Accreditation Board meeting.

The Lead Site Visitor should assist the Site Visit Coordinator in ensuring the review stays on schedule and follows protocol. The Lead Site Visitor will confer with the Site Visit Coordinator for needed changes to schedules or when another team member is not fulfilling their duties. Additionally, the Lead Site Visitors is expected to fulfill all of the responsibilities of this role. If they fail to fulfill all responsibilities such as being unavailable to present the SVT Report at NCLHD Accreditation Board meetings, they may be removed as a Lead Site Visitor for future reviews.

Applying to Serve as a Site Visitor

Applications to be a Site Visitor are only accepted through the NCLHD Accreditation website. Before applying, and if currently working at a local health department, it is necessary to ensure that the approval of an immediate supervisor or the health director is obtained to serve as a Site Visitor. NCLHD Accreditation does not check this — it is assumed that if an application is received, the applicant will be able to serve if selected. The link for the application can be found at:

<https://nclhdaccreditation.unc.edu/about-nclhda/site-visit-team/>

Upon receiving an application, the Accreditation Administrator will confirm with the applicant receipt of their application and notify them of current status of recruitment/training of new site visitors. New Site Visitors will likely be recruited in a group upon observation of the current Site Visitor pool becoming low.

Criteria for Site Visitor Selection

The SVT for the NCLHD Accreditation process is a peer review model. The teams selected are multi-disciplinary and are expected to have experience and/or extensive knowledge of the delivery of local public health services in North Carolina. Since this experience or knowledge is important for the success of a peer review process, SVT members are selected using their connection to local public health as an important element.

Initial applicants for team members should:

- be active employees in North Carolina local public health,
- have retired within the past three years, or
- have retired within the past five years if still active, in some manner, in the delivery of local public health in North Carolina.
- and be able to effectively work within a web-based review platform.

Primary Site Visit Team members are:

1. **Public Health Administrator:** a local health director or an assistant health director.
2. **Environmental Health:** any Environmental Health Specialist with current RS, including program coordinators, supervisors and directors, and RS Board members.
3. **Board of Health:** board members currently serving on a local Board of Health. If the Board of Health member's term has expired, he/she may remain in the Site Visitor pool as long as he or she was an active Board of Health member at the time of application and has remained active in the accreditation site visit process.
4. **Public Health Nurse:** a Director of Nursing, Nurse Administrator or Supervisor or a Public Health Nurse II or III.

Active NCLHD Accreditation Board members cannot be Site Visitors. If the individual was a Site Visitor and was then appointed before the presentation of the Site Visit Team Report to the NCLHD Accreditation Board, the member must abstain from the discussion and the vote on NCLHD Accreditation status for the county visited.

When recruiting, the Accreditation Administrator will review all pending applications. Applicants that meet the baseline requirements to be a Site Visitor will be:

1. contacted and asked to submit contact information for one reference who can speak to the applicant's knowledge and experience with NCLHD Accreditation and
2. scheduled for a phone interview with the Accreditation Administrator, or other Accreditation Program employee, and a team of current Site Visitors.

After applicants have been reviewed, the NCLHD Accreditation program will make selections and will inform applicants of their status. Selected applicants will be informed of upcoming, mandatory orientation training as well as the commitment expected for their training. At the orientation, new Site Visitor applicants will be trained on the SVT Operational Guidelines and will complete all necessary paperwork, including the [New Site Visitor Commitment Statement](#) and [Site Visit Team Member Statement](#). Upon completion of orientation training, the Site Visitor applicant will then be scheduled to shadow a SVT at an upcoming review. If the Site Visitor applicant has the credentials/experience to fill multiple roles on a SVT they may be required to shadow a review for each role.

After satisfactory completion of orientation training, shadowing of a Site Visit and demonstration that they understand NCLHD Accreditation standards and can apply them in assessment, the Site Visitor applicant will be deemed a Site Visitor and added to the Site Visitor pool.

Site Visitor Database

The NCLHD Accreditation Board maintains a database of all Site Visitors that have made site visits or applied to be Site Visitors. If individuals have been a Site Visitor during the past 12 months and are compliant with training, their application to serve will remain active. If they have not been able to serve during the past 12 months (excluding notice of extended illness or extenuating circumstances) or have not completed ongoing, mandatory training, they will be removed from the pool, and the individual will be notified. A new application must be submitted for the individual to be considered as an SVT member again.

It is the responsibility of all potential Site Visitors to notify the Accreditation Administrator of any changes in contact information and employment.

Site Visitor Selection and Forms

Site Visitor Required Documentation

Prior to selecting the team members for upcoming reviews, potential team members will be sent a form that must be completed showing availability to serve for the counties to be reviewed. In order to be considered for that cycle, the individual must return the form by the stated due date. Team members will be notified of their selection dates/agencies as soon as the full cycle schedule is completed. After SVT assignments to agencies are made, Site Visitors are expected to abide by the established schedule. Additionally, for reimbursement of expenses through the University of North Carolina at Chapel Hill, Site Visitors must complete paperwork annually to be classified as an independent contractor. Site Visitors who do not complete this process in a timely manner will not be able to be assigned site visits.

Conflict of Interest

Whenever there is a conflict of interest, real or perceived, a SVT member should remove his or herself from the discussion or situation or from participation on the team. Site Visitor applicants should exclude any local health departments from their availability form if there is a conflict of interest.

Possible conflicts of interest include:

- current or former affiliation with the agency being reviewed (including actual employment at any time, having interviewed for a position at the agency within the past five years, or having provided a contracted service to the agency within the past five years),

- affiliation with an agency or organization in contiguous geographic proximity to 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 or
- having sought or currently seeking a position at the local health department under review.

In order to eliminate concerns about consistency of assessment and whether individual guidance is representative of the NCLHD Accreditation program, Site Visitors are prohibited from entering into independent, paid accreditation consulting contracts with local health departments.

Conducting the Review

Reviews typically last one to two days. The duration of the visit may be longer if special circumstances (such as those encountered in very large, complex health departments or in multi-county district health departments) dictate the need for more time, or shorter if the review is completed easily and quickly due to exceptional organization of documentation.

Pre-Review Activities

Scheduling and Logistics

After being notified of selection to a team, the Site Visitor will be sent hotel reservation information. If the Site Visitor needs to stay in a hotel the night between the two-day visit, it is the responsibility of the Site Visitor to make their reservation (at the approved state rate). If, due to an exceptionally long travel time, the Site Visitor needs to stay the night before day one as well, they may do so by requesting permission through the Accreditation Administrator.

Once placed on a team, the Site Visitor is expected to complete all components of the scheduled review. If they find that they cannot do so at any time after being officially scheduled, they must notify the Accreditation Administrator immediately, so a replacement SVT member can be found. The NCLHD Accreditation program understands that emergencies may come up during the time period between assignment and the review whereby a Site Visitor may have to remove themselves from the visit, but as reassigning a Site Visitor is logistically very difficult, these situations should be rare. The need for multiple or frequent rescheduling by a Site Visitor may result in their removal as a Site Visitor.

Document Review

Each Site Visitor role is assigned specific Activities applicable to their knowledge/expertise as detailed in the *Color-Coded Summary Checklist* provided by the Site Visit Coordinator. SVT members examine documents/evidence relevant to their assigned Activities and record their findings. Site Visitors should adhere to the following guidelines and principles in reviewing the agency's documentation/evidence:

1. The NCLHD Accreditation Board recognizes that different organizational structures among North Carolina's autonomous health agencies require different operational approaches and, therefore, variations in methods for meeting standards are both permissible and expected;
2. Examination of minutes from meetings should ascertain that they have been properly dated and completed in a manner that is consistent with written policy and in compliance with any/all applicable legislation;
3. Manuals for policies and procedures should be examined for subject matter, review dates and revision dates;
4. By-Laws should be examined for content, review and/or revision dates; and
5. As a means of keeping current and improving the NCLHD Accreditation process, updates to the *HDSAI* and *HDSAI Interpretation Document* are periodically made. Site Visitors should be knowledgeable of the most recent updates and apply that updated information to their documentation/evidence review if the update is effective for that visit's cycle.

Prior to the SVT conference call and in addition to their role-assigned Activity documentation/evidence review, SVT members must have completely reviewed the following:

- completed *HDSAI* and *Summary Checklist*,
- submitted supplemental materials including the agency's Mission Statement, Organizational Chart, Management Team Roster, Governing Board Roster and Narrative,
- review the North Carolina Public Health Laws, as relevant.

After thorough document/evidence review, SVT members should note which Activities are considered "Met" and which ones are "Not Met" and submit clear questions for any Not Met activities.

Safety and Security During Review

Safety and security of the Site Visit Team and the local health department is of highest priority during site visits. At any time, if individual members or the Site Visit Team as a whole have concerns about safety and security issues before, during, or after the site visit, they are to report their concerns to the assigned Site Visit Coordinator as soon as possible. If the Site Visit Coordinator believes the concerns to be valid, he/she will contact the Accreditation Administrator immediately.

North Carolina is a state seasonally subjected to severe weather that causes the cancellation or postponement of scheduled activities, especially those that require travel on roads and highways. Because NCLHD Accreditation involves such activities, the program has developed a protocol for health departments and site visitors to follow in case of a major weather event. See Appendix 8 of the Accreditation Process Operational Guidelines for more information, including activities/responsibilities specific to the SVT.

Review Activities

Entrance Conference

The Entrance Conference is the first activity conducted on the first day of the Site Visit, at the main office of the health agency. Representatives from the senior administration of the agency, including the Agency Accreditation Coordinator (AAC), will meet with members of the SVT to exchange introductions, to discuss the general schedule of the review and to make note of any recent changes in the organization which may be relevant to the review. The Lead Site Visitors serves as the group spokesperson during this first activity of the review. At this time, the agency will ask all Site Visitors to sign a confidentiality agreement. An agenda for the Entrance Conference can be found on the Accreditation website under *Health Department Site Visit Preparation Materials*.

Tour of the Health Department

On Day One, the Local Health Director, or designee, will lead the Site Visitors on a general tour of the health department. This tour allows the Site Visitors to become familiar with the environment as well as to note the general lay-out, space provisions and records storage for the agency. One or more pre-planned trips off-site may be required for visits to the agency's satellite facilities. The agency will provide transportation for offsite travel.

Personnel Record Review

At least two days before the day of on-site review, NCLHDA program staff will choose a sample of personnel records to be reviewed for verification of staff credentials, training and CE, annual performance appraisals and job descriptions. The agency must be prepared to provide the requested records and are notified regarding personnel record requirements in relation to the HDSAI. Personnel records must be available for review by the SVT at the start of the review, upon which Site Visitors will be assigned records according to their role/specialty. While Site Visitors are assigned specific records for initial review, any deficiencies are noted and reviewed for input from the entire SVT. If necessary for proper verification/clarification to meet the requirements of the Activity, the SVT may request additional information or evidence not initially presented through submitting a question to the local health department. The question submitted should be well thought-out, clear in nature and fully applicable to documentation requirements for that Activity.

Further Review of Documents

Though the bulk of documentation/evidence should have been submitted electronically prior to the review, the local health department may submit a limited amount of documentation/evidence during the review itself. The SVT will review the evidence submitted during the review and check it against prior findings/noted deficiencies. If deficiencies still exist or clarification is needed for a specific Activity, the SVT may request additional information or evidence not initially presented through submitting a question to the local health department. The question submitted should be well thought-out, clear in nature, and fully applicable to documentation requirements for that Activity.

Interviews

The SVT will interview a variety of individuals and groups, including staff of the agency, members of the Board of Health (or governing body) and community partners, to ascertain their understanding of the agency and their role in or with respect to the agency. However, the ultimate purpose of interviews is to allow for confirmation of evidence provided in the documents and to give the opportunity to ask questions to help clarify evidence.

Unless otherwise specified, all interviews will take place at the central office of the health department. If off-site interviews are necessary, the agency is responsible for providing transportation for the Site Visitors. Once document review is completed, the Site Visitors may deem a particular interview as unnecessary, therefore, the interview can be deleted from the schedule.

Site Visit interviews should conform to the following guidelines:

1. It is important that interviewees feel at ease. The interview should be held in a private room so that all exchange of information remains confidential.
2. Interviewers should adapt the questions asked to help in clarifying the evidence.
3. The interview is for the SVT to gain information about the agency. Interviewers should not respond to questions during the interview asking about operations in their respective counties. Interviewers should not make comments about their own experience and should not offer suggestions for help or assistance during the interview time.

Periodic/End-of-Day Meetings

At the end of each day of the Site Visit (or at any time during the visit when other activities are not scheduled), the SVT will meet in executive session to discuss the outcomes of the day's work. The Site Visit Coordinator will work with the team to record strengths/general observations from each day and other notes to be shared at the Exit Conference and for use in the SVT Report. Additionally, documentation/evidence from submitted questions to the local health department will be reviewed and discussed if the SVT has continuing concerns about meeting Activity requirements. Questions may be resubmitted to the local health department, if necessary. Final determinations about whether an Activity is "Not Met" will be discussed with the entire SVT.

Exit Conference

The Exit Conference, led by the Site Visit Coordinator and Lead Site Visitor, is scheduled for the end of the review and attended by any staff that the Local Health Director chooses to have present. With exception to the Lead Site Visitor, the other Site Visitors are invited but are not required to attend the Exit Conference.

The purpose of the Exit Conference is to conclude the review. The Lead Site Visitor will briefly describe overall impressions of the agency, including strengths and unique attributes. The SVT does not make or share a final determination about accreditation status at the site visit. The Site Visit Coordinator will also describe next steps for the accreditation process.

Post-Review Activities

Site Visit Team Report

The SVT Report is the document the SVT uses to summarize information gathered from:

- the HDSA,
- the review of the agency's evidence and documents,
- the interviews with staff and community representatives, and
- the tour of all health department facilities.

The SVT Report consists of three documents:

1. The SVT Report including a description of “Not Met” Activities, a recommendation for reaccreditation or conditional reaccreditation, and a narrative of strengths/general observations.
2. The Health Department Self-Assessment Instrument (HDSAI) Summary Checklist.
3. Signature page signed by all SVT members and the Accreditation Administrator.

The Lead Site Visitor is responsible for completing the report and submitting it to the Accreditation Administrator within 10 business days of the completion of the review.

NOTE: When the SVT deems that any Activity has not been met, it should take care to document its findings and recommendations fully. Verification of the accuracy of the agency’s self-assessment by the SVT will provide the basis for the NCLHD Accreditation Board’s determination of reaccreditation status.

Suggestions for Quality Improvement Report

The Suggestions for Quality Improvement Report is a separate report completed by the SVT, which has no bearing on the health department’s accreditation status. The report is merely suggestions that the Health Director may do with as they please.

Suggestions for quality improvement should be linked to a specific Activity. The SVT should make note of any Activities where a suggestion for quality improvement can be made during their review of the local health department’s documentation. Suggestions for quality improvement are necessary for Activities that meet the minimal intent of accreditation but could be further strengthened for future visits. Site Visitors should also make note of where documentation initially provided by the local health department was not sufficient, but sufficient evidence was found elsewhere or verified in interviews.

Site Visit Team Report Response

After reviewing its SVT Report, the local health department may submit two types of review response — written response or error of fact (see Appendix 3 of the Accreditation Process Operational Guidelines for more information). Additionally, if the SVT recommended conditional reaccreditation, the local health department may follow the Procedures for Conditional Reaccreditation Recommendation (see Appendix 3 of the Accreditation Process Operational Guidelines for more information).

Board Meeting

Though all SVT members are invited to attend the NCLHD Accreditation Board meeting, attendance is only required for the Lead Site Visitor, who will present the SVT Report and answer questions from the Board. Procedures for presentation of the report can be found in Appendix 4 of the *Accreditation Process Operational Guidelines*.

Guidelines and General Protocol for Site Visitors

Site Visitors only have the right to review materials that are evidence for one or more of the Benchmarks and Activities they are reviewing; they do not have access to any and all documents the health department may have or

that you might wish to review within an agency. The agency must only provide evidence to show it meets the Activity, not all documentation available.

Attendance

All team members are expected to be present for all assessment and site visit activities. They should be prompt for meetings and interviews and plan to be available for the entire review.

Confidentiality

Site Visitors who participate on-site will be asked by the agency to sign a confidentiality statement and will comply with this request. SVT members will treat all health department documentation — whether provided beforehand or during the review — as confidential. The evidence will only be discussed with SVT members, the Site Visit Coordinators, the Accreditation Administrator and the NCLHD Accreditation Board. Since the SVT will be reviewing personnel records, possibly seeing protected health information and observing clinic operations while clients are present, it is imperative that confidentiality of the information and observations be maintained. This is not only to protect the agency, but also to protect the SVT and maintain credibility for the program.

Dress Code

SVT members should wear business dress during the review. For after-hours activities and SVT-only activities, casual dress can be worn. Since SVT members may be working in small spaces and closed rooms, heavy perfumes or colognes should be avoided, as these can aggravate certain health conditions. Site Visitors will be provided with a name badge/tag and are requested to wear it during the entire site visit. After hours, the name badge/tag may be removed. Personal ID or name badges from a SVT member's employer should not be worn, as the SVT is there as representatives of the NCLHD Accreditation Board, not personal agencies. While on site, the local health department may ask or require SVT members to wear a visitor badge, and the SVT should comply with this request.

Suggestions for Review of Evidence

- Read the entire HDSAI document and the HDSAI Interpretation Document carefully, paying particular attention to assigned Activities. Read all other materials provided in advance of the review and plan to participate in any training sessions or preparatory conference calls provided by the Accreditation Administrator.
- Identify and list any weak or problem areas in the completed HDSAI and evidence/documentation before the start of the review. Submit questions by the established timeline.
- Do not try to judge the applicant agency as “good” or “bad” — rather judge only whether or not an Activity meets the required documentation/guidance.
- Withhold final judgment of a health department's compliance to Activities or Benchmarks until the culmination of the site visit. Responses to questions and information from interviews provides an opportunity to verify whether the facts provided in the HDSAI and original evidence/documentation are consistent with the agency's actual practice.
- Be alert for documents that are referred to by names other than those used in the Benchmarks.

- Consider a health department’s satellite office(s) to be part of the central agency and not separate entities. The SVT should pay particular attention to the nature of communications and record sharing among all of the agency’s offices.
- Gather and report as much information as possible, so the NCLHD Accreditation Board can make a well-informed decision regarding Accreditation status. Be aware that local health departments in North Carolina are autonomous and differ significantly in operational style. Take into account the unit's size, structure, area served, populations served, satellite offices, community liaisons, composition of the Board of Health and committees and effectiveness of internal communications. Local situations and local problems also vary. Site Visitors must adhere to the Benchmarks and their component activities, but note that services and programs are planned, implemented, monitored and evaluated differently among agencies. Site Visitors should guard against bias because the agency under review is different from any other with which they are familiar.

Ethical Behavior

It is expected that SVT members will conduct themselves responsibly. SVT members will respect fellow team members, the NCLHD Accreditation staff and the Health Department being assessed as well as consider the contributions of all members of the SVT to be important and valued. SVT members shall not take advantage of health department hospitality by seeking privileged treatment or pursuing personal interests, including potential employment.

SVT members should not disparage or criticize any elements of the accreditation process in the presence of staff members of the health department or members of the local community. Likewise, they should not disparage or criticize health department staff or programs.

Gifts may be offered to SVT members from the local health department, and such offerings should be refused. While the health department may be giving the gift as a courtesy, this can lead to competition between counties and allegations of a review based on receiving a gift. Free materials, such as area brochures, maps and restaurant information may be provided to SVT members. Also, limited incentive items with the local health department logo or name (such as a pen) — that are also given to the public — may be given or available to SVT members. Light refreshments and beverages may be provided to the SVT for breaks — this is acceptable but is not required or asked of the agency.

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 at any time. 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 representative), it should be immediately reported to the Accreditation Administrator (or to the Site Visit Coordinator if on a Site Visit). In the case of concerns by/against the Accreditation Administrator, the NCLHD Accreditation Board Chair should receive reports. Reports can be due to concerning behavior by another Site Visitor, NCLHDA program staff, Board members, or local health department staff.

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

Evaluation

The accreditation process includes ongoing and extensive evaluation. Members of the SVT are expected to participate by responding to any surveys or interviews conducted by the project evaluator.

Personal Behavior

SVT members are expected to:

- Maintain a good working relationship with all members of the SVT.
- Maintain a professional and friendly, yet separate, relationship with health department personnel.
- Minimize use of electronic devices for personal business during the review.
- Avoid giving health department staff members or community representatives an impression that a decision has been reached, offering specific solutions to problems or concerns, or implying personal criticism of any participants in the NCLHD Accreditation process.
- Alert the Lead Site Visitor if conflicts arise between a Site Visitor and any staff member of the health department or any interviewee.
- Listen with a critical ear, but speak with an impartial tongue.
- Be available and active for the entirety of the review, even in participating remotely.

Reimbursement for Site Visitor Expenses

NCLHDA will reimburse Site Visitors for travel-related expenses and meals at current State of North Carolina per diem rates. Meals provided at the lodging (i.e., breakfast) are not eligible for reimbursement. If a Site Visitor is not a North Carolina State Employee, receipts must be submitted if meals are not to be taxed; if no receipt is submitted, meals will be treated as an honorarium (the per diem will be reported on a 1099 as income). Site Visitors submit requests for reimbursements after the review or training; the requests must be submitted on the form that is provided by the SVC.

In addition, as is budgeted and available, each Site Visitor will receive an honorarium upon completion of his/her assignment. Each Site Visitor will designate the amount of honorarium allowed, and the honorarium will be included in a check with expense reimbursements. It is the responsibility of the SVT members to know their county's policy

regarding acceptance of honoraria and whether they must use annual leave to be away from their duties to conduct a review or accept an honorarium.

Removal from the Team

During a review, it is possible that an SVT member may be replaced with an alternate if the member is consistently late for activities, misses interviews, is unaccounted for, fails to abide by these guidelines, behaves inappropriately, engages in illegal or unethical behavior or fails to complete assignments. The decision to remove a team member is made by the Accreditation Administrator after consultation with the Site Visit Coordinator and the Lead Site Visitor, if appropriate. Since this decision could affect the SVT recommendation or could cause the Board to delay action, it is not taken lightly.

Likewise, recourse will occur for any SVT member, at any time, not abiding by expectations laid out in this protocol. Initial concerns will be shared via direct communication by the Accreditation Administrator with the SVT member and removal from the SVT member pool may be considered if concerns continue.

Separation of Roles

It should always be remembered that SVT members are there as assessors, not colleagues. SVT members should avoid socializing with health department staff and interview subjects. During the review, contact with staff or peers beyond what is needed to assess the agency should be minimized. Site Visitors should be friendly but maintain separation. Occasional work in social contexts (e.g., a working lunch) is appropriate, but should be minimized.

During scheduled assessment activities involving document and evidence review, the SVT should have minimal interaction with staff. Questions that arise should be addressed through the Site Visit Coordinator or through the electronic dashboard. Individual SVT members should not leave the review to ask questions of staff members without permission of the Site Visit Coordinator. Contact with outside agencies (for example, other county or state agencies, Division of Public Health, etc.) by individual team members, other than those who are identified as interviewees, is not the responsibility of the SVT. SVT members who want further information should forward requests to the Site Visit Coordinator. The need for such contacts will be discussed, and contacts with outside agencies will be made by the Accreditation Administrator.

The site visit is not the time to collect policies, protocols or examples for use in a personal agency. While SVT members can certainly gather ideas or begin to see how a process may work in their agency, they should wait until after the site visit report has been submitted before contacting a health department for examples or copies of policies or other materials.

Training

Ongoing training for Site Visitors is conducted by the NCLHD Accreditation program periodically (at least once per year) to review updates to program information as well as conduct skills building. When possible, this training will be provided with a web-based option so as to minimize travel and scheduling conflicts. This training is mandatory for Site Visitors; Site Visitors who do not complete ongoing training will not be selected for upcoming SVTs and may be removed from the pool of Site Visitors if the training is not completed within 12 months.



NCLHDA Site Visit Team Operational Guidelines

Site Visit Team Member Statement

Site Visitor Statement

The North Carolina Local Health Department (NCLHD) Accreditation program conducts its assessments of Local Health Departments (LHDs) in an objective and confidential manner. To ensure objectivity, impartiality and integrity in the accreditation process, a Site Visitor should not be involved in assessments that constitute a conflict of interest, should not accept any gift from a LHD under review and should not disclose any information received through involvement in the accreditation process.

As a Site Visitor, I must hold all agency accreditation information and the content of the Site Visit Team (SVT) discussions and deliberations in confidence. I understand and agree that any violation of confidentiality may seriously jeopardize the accreditation process. I will treat all information obtained through the assessment process as confidential.

I recognize that a conflict of interest could jeopardize the accreditation status of an LHD. Conflicts of interest also undermine the credibility of the SVT, the Board and the overall accreditation process. I understand and agree to disclose any potential, perceived, or actual conflict of interest to the Accreditation Administrator. I agree not to solicit or accept gifts, gratuities or any other considerations from individuals associated with a LHD under assessment.

I agree it is my responsibility as a Site Visitor to thoroughly review the HDSA Interpretation Document prior to each review in accordance to the Activities assigned to be reviewed.

As a North Carolina Local Health Department Accreditation Site Visitor, I have read and understand the NCLHD Accreditation Site Visit Team Operational Guidelines.

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

Acknowledgement of NCLHD Accreditation Administrator:

_____	_____	_____
Administrator Name (Please Print)	Signature	Date



NCLHDA Site Visit Team Operational Guidelines

New Site Visitor Commitment Statement

Site Visitor Statement

The North Carolina Local Health Department Accreditation (NCLHD) Accreditation program develops and maintains high standards for agency assessments. As such, new Site Visitors undergo extensive training- including in-person education as well a site visit shadowing period with established Site Visit Teams. As this training is a significant investment by the program (and at no-cost to the individual), new Site Visitors are expected to be dedicated to completing the training in a timely manner and to serve at least two years as a Site Visitor with the program upon training completion.

As a new Site Visitor, I understand the investment the NCLHD Accreditation program makes in my training to be a Site Visitor. As such, I acknowledge my full intent to complete the training required as well as to serve as a Site Visitor for at least two years after.

Site Visitor Name (Please Print) Signature Date

Acknowledgement of NCLHD Accreditation Administrator:

Administrator Name (Please Print) Signature Date