

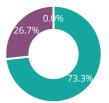
Bi-Annual Update on Reaccreditation

Winter 2023 Site Visits

Overview

In the winter of 2023, site visits were conducted for the reaccreditation of 15 local health departments in North Carolina: AppHealth District, Beaufort, Brunswick, Burke, Cabarrus, Caldwell, Cleveland, Cumberland, Dare, Davie, Durham, Hoke, Hyde, Jones, and Orange. These agencies received their 90-day accreditation notification in August 2022, and site visits were conducted between January and March 2023. All 15 agencies were recommended for reaccreditation, 11 with honors. One health department was initially recommended for conditional accreditation at the conclusion of the on-site visit; however, after following the 10-day conditional protocol, the site visit team reviewed additional evidence and adjusted their recommendation to reaccreditation.

Reaccreditation Status, Winter 2023 (n=15)



Reaccreditated with Honors (11)

- Reaccredited (4)
- Conditional Accreditation (0)

Activities Missed

In the winter 2023 cycle, health departments missed 2 activities on average, ranging between 0 and 11 activities. Prior to 2020, the number of activities missed

ranging between 0 and 11 activities. Prior to 2020, the number of activities missed in the initial site visit generally ranged from 0 to 20 activities, with an average of 4.4 activities missed per agency, based on nine years of reaccreditation data. In winter 2020, agencies on average missed 2.3 activities.

Twenty percent (3 LHDs) did not miss any activities, and 47% missed only one activity. Of the 31 total missed activities, 11 (35%) were in the Assurance standard. Seven activities (23%) were missed in the Facilities and Administrative Services section, which has historically been the standard with the most not-met activities. Seven activities were also missed in the Board of Health/Governance standard, and just three activities were missed in each of Assessment and Policy Development standards. The most commonly missed activities in winter 2023 was Activity 24.3 covering staff orientation and continuing education (cited 5 times) followed by activity 36.2 (cited 3 times). Activities 26.1, 26.2, 30.3, and 30.6 were each cited twice, with all other activities missed just once. Historically, Activity 24.3 is the second most-missed activity.

Suggestions for Quality Improvement

For the winter 2023 site visits, there were an average of 8 activities suggested for quality improvement per health department, with a range from 0 to 28 activity suggestions. Activities across all standards were suggested for quality improvement, with 17% of SQIs in Assessment, 14% in Policy, 35% in Assurance, 22% in Facilities & Administrative Services, and 13% in Governance. Specifically, the most common activities suggested for quality improvement were Activity 24.3 (cited 8 times) and Activities 7.3 and 36.2 (cited 5 times). As with the site visit data and consistent with fall 2022 data, these numbers are lower than previous historical trends. From 2011 – Fall 2019, the average number of activities suggested for quality improvement was 10.8 with a range from 2 to 31 activities, most commonly from the Facilities & Administrative Services (37%) and Assurance (24%) standards. Prior to 2020, Activities 30.6, 24.3, 30.3 and 30.2 were the most commonly cited activities suggested for quality improvement.

Summary

Overall, the site visits conducted in winter 2023 followed similar trends as fall 2022, outperforming historical averages. This is reflected in 73% of agencies receiving reaccreditation with honors. With HDSAI Interpretation Document revisions, paired with adjusted site visit schedules to allow more time to review and respond to questions, we continued seeing improved success in the Facilities and Administrative Services standard.