1. **Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Strategic Planning**

**Standard #38: Agency leadership and the governing body identify the strategic direction necessary to achieve public health goals and align stakeholders in achieving these goals.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 38.1 | In collaboration with the agency’s governing body, senior leadership and staff will work with local partners to develop a strategic direction for a healthy community. | Governing body and community coalition meeting minutes, agendas, and participants list that shows discussion on agency vision and mission |  |  |  |
| 38.2 | A Strategic Plan that includes:a. Mission, vision, and values;b. Environmental scan;c. Analysis of results and selected strategic priorities and how they align with CHA, CHIP and QI Plan;d. Goals, objectives and strategies to address priorities with timelines and evaluation plans; | A strategic plan with all points listed in measure included, developed within the last 5 years with planning process described. Examples of strategic planning process: Mobilizing for Action through Planning and Partnerships (MAPP) or NACCHO's Developing a Local Health Department Strategic Plan: A How-To Guide |  |  |  |
| 38.3 | The Strategic Plan is implemented, monitored and annually evaluated. Revisions are made based on evaluation. This includes communicating the plan and its monitoring with leadership, staff and governing body. | Annual progress and evaluation reports, communication strategies, i.e., email, annual presentation at Board meetings, staff meetings, etc.  |  |  |  |

**A. Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Policy Development**

**Standard #39: Agency leadership and governing body are current on public health practice, laws, regulations, ordinances, and any changes or recommended modifications.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 39.1 | Orientation process includes current public health practice. | Orientation checklist, meeting materials (handouts, presentations), participants certificates  |  |  |  |
| 39.2 | The governing body will participate in quarterly board updates that include roles and responsibilities and laws, regulations and ordinances that govern agency activities. | Membership of Missouri Association of Local Boards of Health (MALBOH) or the National Association of Local Boards of Health (NALBOH), University of Missouri Extension Service presentations, MDHSS board training, Sunshine Law training, factsheets or updates on legislative issues, governing body meeting minutes. |  |  |  |
| 39.3 | In collaboration with the agency’s governing body, senior leadership will review, identify, and analyze applicable public health laws and responsibilities. Using analysis, develop ordinances that are necessary to address identified public health issues or in a change in state or federal law or regulation | Ordinances identified, analyzed and developed, governing body meeting minutes, agendas, laws and/or regulations that were presented or adopted |  |  |  |
| 39.4 | Monitor and respond to state and local public health issues that impact local authorities and, upon request, participate in policy initiatives that include multiple authorities. | Meeting agendas/minutes, policies implemented locally, MOUs with other authorities, mutual aid, shared personnel |  |  |  |
| 39.5 | Engage members of the service area in implementing, monitoring, evaluating, and modifying community health policies. | Service area meeting attendance and minutes, surveys |  |  |  |
| 39.6 | Evaluate the effectiveness of policy change with staff. | Evaluation report of the policy changes. Examples of policy changes may include staff wellness programs, changing hours of operations, changing schedules, adding or deleting services, changing how you deliver services, etc. |  |  |  |

**A. Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Policy Development**

**Standard #40: Agency leadership and governing body will provide written operations policies/procedures.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 40.1 | Agency operating policies will include policies such as record retention and back-up procedures, events planning, procurement of office supplies, facilities operations, use of department equipment, etc.1. Review of policies must be done at least every 5 years; and
2. Policies/procedures must be readily available to staff.
 | Policy and procedure manual or individual policies, dates of reviews on policies, location of policy/procedure manuals |  |  |  |

**A. Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Policy Development**

**Standard #41: Agency leadership and governing body will provide Human Resources policies and procedures.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 41.1 | Agency Human Resources policies and procedures include:1. Personnel recruitment, selection, and appointment;
2. Employee confidentiality;
3. Equal opportunity employment;
4. Salary structure and hours of work;
5. Benefits package;
6. Performance evaluation process based on job descriptions and training plans; and
7. Problem solving and complaint handling.
 | Human Resources policies and procedures with review by governing body and dated within the past 5 years |  |  |  |

**A. Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Communications**

**Standard #42: Agency implements and maintains a communication plan that provides public health information to the service area during normal operations and emergency response actions.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 42.1 | A Communications Plan based on the Foundational Public Health Service area that includes: **a.** Purpose and Objectives; **b**. Audience identification (internal, external, media) with contact information - updated annually; **c.** Pathway/channel identification for ach audience (emails, speeches, PowerPoint Presentations, newspaper articles, radio, billboard, social media, website, etc.); **d.** Policies/processes for developing and disseminating information (approved sources, approval process, timeliness, accuracy, transparency, limitations, legal considerations, social media, non-communication staff restrictions); **e**. Staff designated as public information officer and spokespersons, roles and responsibilities and training requirements for each role; **f**. Key message development (including templates); **g.** Message evaluation strategy | Communication Plan that contains all points listed and includes an audience analysis tool. Job descriptions for staff designated as information officer with certificates of completion for communications training, |  |  |  |
| 42.2 | Develop an emergency communication plan for both internal and external audiences including contact 24/7. | Emergency communications plan |  |  |  |
| 42.3 | Ensure communication is based on health literacy principles to ensure it is accessible, understandable and actionable for the target audience. | Assessment for health literacy friendliness (written materials) |  |  |  |
| 42.4 | Develop a process by which to evaluate communication initiatives. The evaluation report must include: **a.** Internal evaluation: Did the communication work go out on time and to the right audience? What was achieved, with what budget and time? What did we learn from the process and what might we do differently next time? **b.** External evaluation: What was the reach achieved by the output? What was the quality and usefulness of the output? What was the uptake and use of the output? | Evaluation metrics report |  |  |  |
| 42.5 | Agency website that contains information on: a. 24/7 contact for reporting health emergencies; b. links to public health related laws; c. Notifiable/reportable conditions link or contact number; d. links to CHA, CHIP and other health data; e. Information and materials from program activities; f. Links to CDC and other public health related agencies; g. Names of health department leadership. | Screen shots of the web pages that contain the information required in each of the points listed in measure |  |  |  |
| 42.6 | Using agency's message evaluation strategy, evaluate the overall effectiveness of communication efforts and Communication Plan and use evaluation findings to adjust communications, communications strategies and communication plan accordingly. | Bringing together the evaluation for communication strategies for each accreditation section (standards/measures 8.1, 12.1, 18.1, 22.1, 32.1, 37.1) provide documentation that evaluates agency overall communication strategies and adjustments made |  |  |  |

**A. Leadership and Governance**

**This section examines the roles of senior management and the governing body in establishing public health policy and setting strategic goals for the agency and the service area. Additional roles examined include** **directing and coordinating internal agency planning, policy development and how the agency communicates and uses information technology.**

**Information Technology**

**Standard #43: The public health agency has a secure information technology (IT) program capable of surveillance, planning and reporting of public health needs.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 43.1 | Utilize and maintain local public health technology and resources to support current and emerging public health practice needs. Policies must include protocols for: a. Encryption and data security;b. Online and social media | Policies for technology that includes encryption and data security, policy for online and social media use, IT policy |  |  |  |
| 43.2 | Develop, maintain, and review procedures to ensure agency adheres to federal, state, and local privacy protection regulations for handling data. | Policy or procedure for data management, HIPPA agreement, designated HIPAA officer, evaluation and review of risk management plan |  |  |  |
| 43.3 | Each employee will be trained annually on maintaining customer confidentiality and how to protect client health information. Training will include policies on:1. Confidentiality, including HIPPA requirements;
2. Staff access to records; and
3. Computer use including email, passwords and electronic transfer of data.

Confidentiality forms or agreements must be signed by all employees. | Training logs with examples of training, confidentiality training program, signed confidentiality forms or agreements, signed social media or electronic use agreement forms |  |  |  |

1. **Performance Management & Quality Improvement**

**These standards examine how the agency is able to maintain a performance management system (PMS) to monitor achievement of organizational objectives and examines the agency’s ability to maintain an organization-wide culture of quality improvement by coordinating the evaluations of all the sections of the standards together to implement and monitor the performance management/quality improvement process for their internal programs and activities.**

**Standard #44: The agency uses a PMS or an established process involving all its employees in improving the effectiveness of the agency and achieving the agency’s mission and strategic goals.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 44.1 | A QI plan is in place that incorporates the strategies that evaluate the effectiveness and quality for each of the Foundational Public Health Service areas. The QI Plan will include: a. Purpose and Policy Statement; b. Definitions;c. Culture of Quality in Agency;d. Governance structure (formal or informal);e. Training (New employee orientation, Advanced training for QI team, Ongoing staff training);f. How quality improvement projects are identified, prioritized, staffed, and initiated;g. Goals, objectives, and timelines;h. Alignment with strategic plan and CHIP. | QI plan with all points in the measure addressed, training log for staff that details QI training |  |  |  |
| 44.2 | A QI team meets regularly to implement the QI plan goals and objectives.  | QI team charter, agendas, minutes, reports |  |  |  |
| 44.3 | The QI Plan is implemented, monitored and annually evaluated. Revisions are made based on evaluation. This includes communicating the Plan and its monitoring with leadership, staff and governing body. | Annual progress and training evaluation reports, communication strategies, i.e., email, annual presentation at Board meetings, staff meetings, etc.  |  |  |  |

1. **Risk Management, Financial Management, Contract, and Procurement Services**

**These standards examine how the agency’s ability to establish a budgeting, auditing, billing, and financial system and chart expenses and review accounts in compliance with state, and local standards and policies. Additional standards examine the agency’s ability to procure, maintain, and manage safe facilities and efficient operations.**

**Standard #45: Perform agency work per accepted business standards and be accountable in accordance with applicable laws, regulations and ordinances.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 45.1 | The agency has yearly financial audits. In the event there were material findings, an action plan to correct the findings will be approved by the governing body and implemented by the agency. | Copy of the past two audits; corrective action plans and evidence of implementation, if applicable |  |  |  |
| 45.2 | Use financial analysis methods (e.g., cost-effectiveness, cost-benefit, cost-utility analysis, and return on investment) for decision making and programmatic prioritization. | Return on investment analysis, cost benefit analysis, or other financial analysis used in decision making processes |  |  |  |
| 45.3 | Budget is reviewed annually by the governing body. The agency provides budget updates as required or needed.  | Governing body meeting minutes, budget updates |  |  |  |

**C. Risk Management, Financial Management, Contract, and Procurement Services**

**These standards examine how the agency’s ability to establish a budgeting, auditing, billing, and financial system and chart expenses and review accounts in compliance with state, and local standards and policies. Additional standards examine the agency’s ability to procure, maintain, and manage safe facilities and efficient operations.**

**Standard #46: Agency will have a risk management policy or incorporate risk management procedures in decision making.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 46.1 | Licenses for laboratory services will be current. | License |  |  |  |
| 46.2 | Agency has insurance that protects the agency and governing body against liability for public officials’ errors and omissions, personal injury, contractual, incidental malpractice for medical professionals, and general liability.  | Current insurance coverage policy |  |  |  |
| 46.3 | Agency ensures client confidentiality through a risk management policy or procedures. | Risk management policy or risk management procedures used, observation of client confidentiality and access as observed during accreditation site review walk-through |  |  |  |
| 46.4 | Agency is clean and orderly in appearance | Regular cleaning schedule maintained, observed during reviewer walk-through |  |  |  |

**D. Human Resources**

**These standards examine how the agency provides and manages personnel needs, issues, benefits and a workforce development plan to assure a competent and appropriately trained workforce.**

**Individualized Staff Professional Development Plan**

**Standard #47: Assess staff competencies; provide individual training, professional development, and a supportive work environment.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 47.1 | All staff members involved in the delivery of agency services must have:a. Job description that addresses the individual’s responsibilities related to the Foundational Public Health Services (FPHS);b. Completed Core Competencies Self-Assessment;c. Role specific job training planning jointly developed by employee and employer;d. Minimum of 8 contact hours per year that address the employee’s training needs identified in the job training plan;e. If the employee has a specific license, certification and/or training required by the agency, documentation is provided to verify currency; andf. An annual appraisal that is reviewed with each employee. | Documentation of all 6 points into an Individualized Staff Professional Development Plan (SPDP) with dated annual review to include to include performance appraisals, training records, etc. |  |  |  |

**D. Human Resources**

**These standards examine how the agency provides and manages personnel needs, issues, benefits and a workforce development plan to assure a competent and appropriately trained workforce.**

**Agency Workforce Development Plan**

**Standard #48: Develop and maintain a competent workforce to ensure the effective and equitable provision of public health services by developing and maintaining an agency-wide Workforce Development Plan (WDP).**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 48.1 | A WDP that includes:1. Identified foundational public health service capacity gaps and strategies for addressing them;
2. A plan to increase staff learning skills to address the causes of health inequities, promote health equity, and implement culturally responsive programs;
3. An agency-wide training plan based on assessment of staff competencies to address identified needs to deliver agency public health services;
4. Training schedule with a description of topics to be addressed that will meet the gaps identified in the individual core competencies staff assessments; and
5. Plan for addressing gaps with future hires.
 | WDP that details the process, gaps, strategies and how they will be addressed and evidence of the provided training schedule |  |  |  |
| 48.2 | The WDP is implemented, monitored and annually evaluated. Revisions are made based on evaluation. This includes communicating the WDP and its monitoring with leadership, staff and governing body. | Annual progress and training evaluation reports, communication strategies, i.e., email, annual presentation at Board meetings, staff meetings, etc. Training logs used to track and monitor training |  |  |  |

**D. Human Resources**

**These standards examine how the agency provides and manages personnel needs, issues, benefits and a workforce development plan to assure a competent and appropriately trained workforce.**

**Agency Workforce Development Plan**

**Standard #49: Develop and maintain partnerships with institutions of higher education to ensure a competent workforce.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 49.1 | Engage partnerships or collaborations that promotes public health as a professional career (e.g., working with high schools, AmeriCorps, schools or colleges of public health, internships, vocational training schools to promote public health, and guest lecturing at an institution of higher learning). | MOUs, collaborative agreements, emails or correspondence detailing collaborations, agendas, trainings, classes, presentations, etc. |  |  |  |

**E. Community Planning These standards examine how the agency engages in community health planning and policy setting.**

**Community Health Assessment (CHA)**

**Standard #50: Agency sustains relationships with key health-related organizations; service area groups and organizations representing populations experiencing health disparities or inequities; faith community; private businesses and local health care organizations; relevant federal, state, and local government agencies; and elected and non-elected officials.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 50.1 | Support and maintain cross-sector partnerships with health-related organizations; organizations representing priority/focal populations; faith community; private businesses; local, state and federal government agencies; and elected and non-elected officials. | Advisory or stakeholder group meeting minutes, MOUs, collaborative projects, rosters with participant affiliation, agendas, records of conference calls. Include evidence you meet with groups on a regular basis. |  |  |  |

**E. Community Planning**

**These standards examine how the agency engages in community health planning and policy setting.**

**Community Health Assessment (CHA)**

**Standard #51: Agency reviews the collected data and information from each of the internal foundational areas (Communicable Diseases, Chronic Disease and Injury Prevention, Environmental Health, Maternal, Child, & Family Health, Access to Healthcare Services, All Hazards Preparedness & Response) and develops a CHA that includes community residents and stakeholders’ input.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 51.1 | Information and data from each of the foundational areas will be compiled, and a community process employed that involves the agency, service area residents and stakeholders. The planning process includes:1. Broad participation of partners;
2. Demographic study of the community;
3. Identification of the community priority health issues;
4. Description of health needs of special populations
5. Identification of assets and resources for the community;
6. Analysis and discussion on causes of priority health issues; and
7. Identification and prioritization of future issues.
 | Advisory or stakeholder meeting minutes with participant list or sign in sheets (there may be more than one) that details each of the points listed in the measure. Summary report of planning process. Data sources should be cited. Data sources include MICA, Community Commons, Community Toolbox, US Census data, Vital Statistics, Kids Count, CDC, the National Center for Health Statistics, Behavioral Risk Factor Surveillance System, Medically Underserved Areas Designations, etc. |  |  |  |
| 51.2 | The agency in collaboration with service area partners and residents will monitor and revise the CHA every 5 years. Annual reviews/updates will be given to partners and the community. | Annual reports, social and other media postings and notices that detail CHA reviews/updates |  |  |  |

**E. Community Planning These standards examine how the agency engages in community health planning and policy setting.**

**Community Health Improvement Planning (CHIP)**

**Standard#52 Agency develops CHIP that includes service area residents and stakeholders input.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 52.1 | A community planning process is used to develop the CHIP that includes: a. Broad participation of partners;b. CHA information from each of the foundational public health service areas (1st 6 sections of accreditation standards;c.  A written description of the process used to identify and prioritize community health strategies with at least one priority issue from each foundational public health service area;d. Roles and responsibilities for community partners to reach the priority goals and objectives; and e. Service area partners resources that could be leveraged to address priority health issues using evidence-based strategies. | Advisory or stakeholder group meeting minutes, with participant list or sign in sheets, (there may be more than one meeting) that details each of the points listed in the measure, summary report of planning process |  |  |  |
| 52.2 | The agency in collaboration with service area partners and residents will monitor and revise the CHIP every 5 years. Annual reviews/updates will be given to partners and the community. | Annual reports, social and other media postings and notices that detail CHIP reviews/updates |  |  |  |

**F. Health Equity and Cultural Responsiveness**

**This standard examines how the agency fosters an environment that is culturally appropriate and responsive to the service area needs.**

**Standard #53: Agency and governing body will build internal capacity to effectively engage service area partners to coordinate activities that address the social and economic determinants of health and advance health equity.**

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| **Measure** | **Suggested Documentation** | **Name of Document to Upload** | **Describe How Documentation Meets the Measure** | **Staff Responsibilities** |
| 53.1 | All agency employees will participate in two (2) contact hours of health equity and cultural awareness workshops or trainings. (Please note this is in addition to the 8 contact hours required under Measure 47.1) | Training logs with health equity training highlighted, training agenda/curriculum |  |  |  |
| 53.2 | Agency collaborates with service area-based organizations to address the health and mental health related needs of the culturally and linguistically diverse groups in the service area. | Advisory or stakeholder meeting minutes with attendance list, grant applications |  |  |  |
| 53.3 | Agency and service area partners assists consumers to get the supports they need (e.g., flexible service schedules, childcare, transportation, etc.) to access health care. | Advisory or stakeholder meeting minutes with attendance list, grant applications |  |  |  |
| 53.4 | Agency annually reviews health promotion, disease prevention, and treatment procedures that are adapted for culturally diverse groups. | Procedures reflect culturally appropriate processes, annual reviews |  |  |  |
| 53.5 | Agency uses resource materials (including communication technologies) that are culturally and linguistically appropriate to inform diverse groups about health-related issues. | Social and other media postings and notices |  |  |  |