

Applications due by 11:59 PM EDT on Wednesday, November 13, 2013

**Accreditation Support Initiative 2013 – 2014
Application Reference Document**

Instructions: DO NOT SUBMIT THIS FORM. THIS FORM IS PROVIDED AS A REFERENCE ONLY. APPLICATIONS MUST BE SUBMITTED THROUGH THE ONLINE SYSTEM, AVAILABLE AT: http://naccho.co1.qualtrics.com/SE/?SID=SV_2bi1be3kRjtgFSZ

Once you begin working on the online application, your saved responses may be accessed and revised at any time before submission, as long as you are accessing this link through the same computer (responses are saved based on IP address). Please note that this means you will need to use the same computer to complete the application process. Prior to submission, you will be able to review and download a summary of your responses for your records.

Complete the application using the online submission form no later than 11:59 PM EDT on Wednesday, November 13, 2013. This document is for your reference only, and submissions via e-mail will not be accepted.

AGENCY INFORMATION	
Name and complete contact information for person completing this online application:	
Name and complete contact information for designated Project Coordinator*: <i>*Per RFA: Applicants are required to designate one main point of contact with whom NACCHO will directly communicate on all matters related to this project, including selection notification. This person will be responsible for submitting all deliverables, participating in peer networking conference calls or webinars, and completing evaluation activities.</i>	
Local health department (LHD) name:	
LHD full address:	
Agency EIN/tax ID number:	
Approximate population size served by LHD (number):	individuals

Primary type of population served by LHD (<i>select all that apply</i>):	<input type="checkbox"/> Frontier <input type="checkbox"/> Rural <input type="checkbox"/> Suburban	<input type="checkbox"/> Urban <input type="checkbox"/> Other (specify):
Current number of staff:	full-time equivalents (FTEs)	
In the last 24 months (November 2011 - November 2013) has your LHD received any grant funding from NACCHO (not limited to accreditation readiness support)? (<i>Note: this information is for tracking purposes and has no bearing on review and selection</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, provide a general description and approximate amount of each separate grant funding received.		

CONTRACT INFORMATION	
Selected LHDs will enter into a contract with NACCHO to complete the deliverable(s) selected below. Agreement with NACCHO standard contract terms and conditions is a requirement for application. No modifications will be made. The information below will help to begin the contracting process immediately upon selection.	
The LHD has read NACCHO's standard contract language and provided a copy to the individual with signing authority at the LHD for advanced consideration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
The LHD agrees to the contract language and is able to sign and return a contract to NACCHO within 30 days of receipt.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you selected 'No' the LHD has not provided a copy to the individual with signing authority for advanced consideration or 'No' the LHD does not agree to the contract language or is not able to sign and return a contract to NACCHO within 30 days, please explain	
Name and title of authorized signer of contract	
Contact information (address, e-mail, telephone number and fax number) of authorized signer of contract	

SUPPORT TO APPLY FOR THIS FUNDING OPPORTUNITY	
The LHD has discussed this funding opportunity with the governing body and has received support to apply. For this effort, the governing body is considered to be the person or entity with authority to hire/fire the health official.	<input type="checkbox"/> Yes <input type="checkbox"/> No
The Health Official is aware and supportive of this application.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you selected 'No' the governing body has not given support to apply and/or 'No' the Health Official is not aware and supportive of this application, please provide an explanation.	

CURRENT ACCREDITATION PREPARATION INFORMATION	
Anticipated PHAB application* date (select one) *submission of three prerequisite documents, application form, and PHAB fee as defined by Step 2 of the PHAB accreditation process	<input type="checkbox"/> Plan to apply between 11/13/2013 – 5/31/2014 <input type="checkbox"/> Plan to apply between 6/1/2014 – 12/31/2014 <input type="checkbox"/> Plan to apply in 2015 or later <input type="checkbox"/> Not sure if LHD plans to ever apply for accreditation
If you selected 'plan to apply between 11/13/2013 – 5/31/2014', describe the activities currently underway and general timeline to apply to PHAB by 5/31/14 (e.g., progress towards completing prerequisites, anticipated date of submission of the Statement of Intent to PHAB (or date of submission if already submitted, etc.)	
If you selected 'plan to apply between 11/13/2013 – 5/31/2014', do you plan to use part of the award funding to support payment of PHAB fees? Awards may be used to pay up to 50% of the total PHAB fee. Please note that if you select yes, you will be required to submit documentation of application to PHAB and	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>receipt of PHAB invoice before 5/31/2014 as a deliverable.</p>	
<p>If you selected 'Yes', plan to use part of the award funding to support payment of PHAB fees, please provide the amount requested* for this purpose (up to 50% of the total PHAB fee; total requested amount for the award must not exceed \$40,000)</p> <p>*This amount will be automatically transferred to the budget section below.</p>	
<p>If you selected 'Not sure if LHD plans to ever apply for accreditation,' please explain why.</p>	
<p>Describe, generally, activities the LHD has completed or is currently working on related to preparing for accreditation. The purpose of this question is to provide context regarding your overall stage in accreditation readiness.</p>	

CATEGORIES OF WORK

Select **one** category of work for which the agency is applying. Although the LHD may be conducting work in more than one area simultaneously in their accreditation preparation process, for the purposes of this award applicants are asked to prioritize the category in which they most need the resources and technical assistance available through the ASI. Note: Within the selected category, applicants may propose to use funds to complete activities that will result in **one or more of the listed deliverables in the next question.**

- Category 1, Progress Towards Preparing or Applying for Accreditation
- Category 2, Progress Towards Completing a Community Health Improvement Process
- Category 3, Progress Towards Developing an Agency Strategic Plan
- Category 4, Establishing and Monitoring a System of Performance Management
- Category 5, Building a Culture of Quality Improvement
- Category 6, Workforce Development

CHOSEN CATEGORY (1 – 6)	
Describe why the LHD has a need for support in this category of work.	
<p>Select the deliverable(s) for which the LHD is applying (see table of deliverables by category on page 11). The deliverable(s) chosen will be listed in the contract and payment will be remitted upon deliverable submission to, and acceptance by, NACCHO. Applicants should select the deliverable(s) based on: 1) feasibility and capacity for the LHD to undertake and complete within the timeframe and 2) greatest benefit to the LHD in their accreditation readiness. Applicants will be asked to provide a narrative of how each deliverable will be completed within the project timeframe. The number of deliverables chosen alone will have no bearing on the likelihood of selection. Given that the goal of the ASI is to demonstrate measurable and meaningful progress in accreditation readiness, LHDs are encouraged to carefully choose both the number and scope of deliverables proposed during the application process.</p> <p>Applicants should only choose deliverables that that will be completed during the course of this project, and not those that have already been completed by the LHD.</p> <p>Applicants may propose one ‘other’ deliverable that falls into this category of work. Note that, if selected, the deliverable language is what will be listed in the LHD’s contract with NACCHO. Applicants who choose this option should be as clear as possible in describing the proposed deliverable.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Deliverable 1, <input type="checkbox"/> Deliverable 2, <input type="checkbox"/> Deliverable 3 <input type="checkbox"/> Deliverable 4, <input type="checkbox"/> Deliverable 5, <input type="checkbox"/> Deliverable 6, <input type="checkbox"/> Deliverable 7, Other please specify_____
PROPOSED ACTIVITIES, TIMEFRAMES AND EXPECTED OUTCOMES	
<p>For each deliverable chosen, applicants must describe, in adequate detail, the activities¹ the LHD will undertake to complete it, the corresponding timeframes for completion^{*1}, and expected outcomes². (The table below is provided to illustrate how this information is requested in the form; it is not representative of the level of detail required for each response.)</p> <p><i>*As a reminder, the project timeframe will begin upon selection and execution of contract and end on May 31, 2014. Applicants should plan for deliverables to be completed in advance of this date.</i></p>	

Additional Guidance / Information

- All deliverables submitted to NACCHO as part of this initiative may be considered for posting on NACCHO’s website or toolkit. If a document contains sensitive or confidential information, sites will have the opportunity to provide a de-identified version of the document.
- All selected LHDs will have the following additional deliverables added to their contractual scope of work as requirements for this project:
 - Complete an interim and/or final report using guidelines and templates provided by NACCHO documenting the development of deliverables, improvements gained, work with supported agencies and lessons learned throughout the project
 - Provide information, feedback, evaluations, and suggestions on project activities as requested via questionnaires and/or conversations with NACCHO and CDC staff and/or external evaluators
 - Designate one individual, and include funding for this individual’s travel in the budget below, to attend the two-day Public Health Improvement Training (PHIT) in Atlanta, GA in Spring 2014.

Selected Deliverable	Provide a Narrative Description of the Activities ¹ the LHD Will Undertake to Complete the Selected Deliverable	Provide a General Timeline ¹ for Completion of Deliverable (by week or month)	Provide a Brief Description of the Expected Outcomes ² as a result of Completion of Deliverable	Provide a Brief Description of the Existing Resources that Support Work on the Deliverable
1				
2				
3, etc.				

¹ **Activities & Timeframe:** Activities are the specific tasks and work that the LHD will engage in to complete the chosen deliverable. There will likely be more than one activity listed per deliverable. Each activity should include an expected timeframe for completion.

² **Expected Outcomes:** Expected outcomes are what the LHD anticipates occurring as a result of conducting the activities and completing the deliverable, i.e., how the LHD will benefit from this work.

Describe how this funding and the work the LHD will undertake will result in measurable progress in accreditation readiness.	
Describe how this work will be sustained after the close of the ASI project.	

OVERALL PROPOSED BUDGET AND AMOUNT REQUESTED FOR ALL SELECTED DELIVERABLES

Applicants may request awards totaling **no more than \$40,000**. Below, please provide an estimated line item budget that illustrates the funding needed to produce the deliverables for this contract. Travel for PHIT attendance, a requirement of the project, must be included in the budget. If you are using funds to support up to 50% of PHAB fees, that amount will be automatically populated below.

Please note that the ASI awards will be granted as contracts for goods and services, paid in two equal installments upon receipt of deliverables. It is **not** a cost reimbursement award and selected sites will **not** be required to submit receipts for their expenses throughout the project. The purpose of the line item budget is to demonstrate that the applicant has considered what funding is needed to accomplish the work it has proposed and that the applicant plans to use funds appropriately. Per grant requirements, these award funds **may not** be used to: provide direct support to clients (e.g., delivery of patient care); purchase large equipment; **pay for food or beverages**; support ongoing general operating expenses or existing deficits, endowment or capital costs; or support lobbying of any kind.

- (The online application will request a general breakdown of expected costs, within each line item.)
- Personnel:
 - Travel for one individual to the Public Health Improvement Training in Atlanta, GA (Required):
 - Travel (other):
 - Supplies:
 - Contractual costs (include type or name of potential contractor(s)):
 - Other direct costs (include types):
 - PHAB fees (if applicable—up to 50% of the total fee):
 - Indirect costs:

TOTAL AMOUNT REQUESTED:	
Please list any additional in-kind contributions that will be made by the agency to support the work:	
The applicant has read and understands how award funds can and cannot be used.	<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL CATEGORY-SPECIFIC QUESTIONS	
CATEGORY 1: PROGRESS TOWARDS PREPARING OR APPLYING FOR ACCREDITATION	
Describe what activities the LHD has undertaken related to preparing or applying for accreditation (e.g., completed the PHAB online orientation, formed accreditation team, reviewed PHAB Standards and Measures, etc.)	
NACCHO is exploring a peer-to-peer mentorship component to connect selected LHDs in this category with peers who are in the process of applying or who have received PHAB accreditation. Would you be interested in having access to a mentor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
CATEGORY 2: PROGRESS TOWARDS COMPLETING A COMMUNITY HEALTH IMPROVEMENT PROCESS	
Describe what activities the LHD has undertaken related to completing a community health improvement process	
Have the relevant staff members read and understood the corresponding PHAB Standards and Measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
CATEGORY 3: PROGRESS TOWARDS DEVELOPING AND IMPLEMENTING AN AGENCY STRATEGIC PLAN	
Describe what activities the LHD has undertaken related to developing an agency strategic plan	
Have the relevant staff members read and understood the corresponding PHAB Standards and Measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No

CATEGORY 4: ESTABLISHING AND MONITORING A SYSTEM OF PERFORMANCE MANAGEMENT	
Describe what activities the LHD has undertaken related to establishing and monitoring a system of performance management	
Have the relevant staff members read and understood the corresponding PHAB Standards and Measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the LHD have a current agency strategic plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe how the strategic plan supports the activities proposed for this category.	
If no, describe if the LHD has plans to develop an agency strategic plan and how it will address support of the activities proposed for this category.	
CATEGORY 5: BUILDING A CULTURE OF QUALITY IMPROVEMENT	
Describe the LHD's current efforts towards building a culture of quality improvement	
Describe how LHD leadership supports and is involved in building a culture of quality improvement	
Have the relevant staff members read and understood the corresponding PHAB Standards and Measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
CATEGORY 6: WORKFORCE DEVELOPMENT	
Describe what activities the LHD has undertaken to ensure a trained and competent workforce	
Have the relevant staff members read and understood the corresponding PHAB Standards and Measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL QUESTIONS

How did you hear about this funding opportunity

- NACCHO website
- accreditNATION* e-newsletter
- Forwarded to me by a colleague
- Other, please describe: _____

accreditNATION is NACCHO's accreditation preparation and quality improvement e-newsletter. Through this e-newsletter the following are shared:

- Resources to prepare for accreditation and engage in quality improvement activities;
- Public Health Accreditation Board (PHAB) updates; and
- Opportunities to share and highlight your health department accreditation preparation efforts.

If you are not yet signed up, we encourage you to do so to stay apprised of the updates outlined above.

Visit: <http://www.naccho.org/topics/infrastructure/accreditation/Newsletter.cfm>

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Categories of Work and Deliverables

The eligible categories of work and deliverables under which LHDs may apply are outlined below. Descriptions of these categories and potential types of activities are described in the RFA. As a reminder, the deliverable(s) chosen will be listed in the contract between selected sites and NACCHO, and payment will be remitted based upon successful submission of these and other project requirements.

For contextual purposes, categories include references to the most closely related domains within the PHAB Standards & Measures. However, it is understood that work in one or more of the categories may span across several PHAB domains indirectly, or in conjunction with other categories of work.

Category <i>(choose one)</i>	Deliverables to be completed through the ASI for submission to NACCHO <i>(choose one or more within selected category)</i>
1. Progress Towards Preparing or Applying for Accreditation (related PHAB Domain: Any)	<ol style="list-style-type: none"> 1. A written self-study by the Accreditation Team against the PHAB Standards, Measures, and Required Documentation that details the LHD’s strengths, opportunities for improvement, and plans for addressing gaps 2. Materials from staff and governing entity training(s) on the value of and LHD’s process for achieving accreditation 3. Detailed written description of process to systematically review and revise department policies and procedures as needed, and evidence of implementation of this process 4. Detailed written description of process for identifying and reviewing documentation for PHAB, and evidence of implementation of this process 5. List of possible documentation for each of the PHAB measures, using PHAB’s Documentation Selection Spreadsheet or like tool 6. Other deliverable related to Category 1: _____
2. Progress Towards Completing a Community Health Improvement Process (related PHAB Domains: 1 & 5)	<ol style="list-style-type: none"> 1. Process for and results of assessing community partner engagement, and plan for action based on results 2. Detailed written plan for CHA data collection; analysis; and synthesis, and evidence of implementation of plan 3. Detailed written plan for communicating how the CHA and/or CHIP was distributed to partner organizations and the community at large, and how input was solicited 4. Detailed written plan for ongoing monitoring, refreshing and analyzing CHA data, particularly specific to populations/geographic areas where health inequities or poorer health outcomes were identified 5. Detailed written description of process for and results of CHIP action planning, including: setting community health priorities; developing goals, measurable objectives and improvement strategies; identifying performance measures with time-framed targets and individuals; identifying organizations that have responsibility for specific strategies; and creating a workplan for implementation. 6. Detailed written plan to monitor progress on implementation of community health improvement plan strategies in collaboration with broad participation from stakeholders and partners

	<p>7. Completed CHA with all required components including: 1) use of data from various sources and results of data collection and analysis activities; 2) demographics of population, 3) description of health issues faced by population groups and factors that contribute to higher health risks/poorer health outcomes of populations; and 4) description of existing assets or resources.</p> <p>8. Completed CHIP with all required components including: 1) desired outcomes of health improvement, priorities for action that consider health inequities, measurable objectives, improvement strategies, and performance measures with time-framed targets, 2) policy changes needed to address objectives, 3) individuals and organizations that have accepted responsibility for implementing strategies, and 4) consideration of alignment with state and national priorities.</p> <p>9. Other deliverable related to Category 2: _____</p>
<p>3. Progress Towards Developing and Implementing an Agency Strategic Plan (related PHAB Domain: 5)</p>	<p>1. Detailed written description of strategic planning process used and membership of strategic planning group</p> <p>2. Detailed written description of process for developing a vision, mission and guiding principles/values</p> <p>3. Detailed written description of process for identifying agency strategic priorities, goals and objectives with measurable and time-framed targets</p> <p>4. Detailed written description of process for and results of how LHD has 1) considered key support functions required for efficiency and effectiveness (e.g., enhancement of communication and branding policies) and 2) identified external trends, events, or factors that may impact community health or the health department</p> <p>5. Detailed written description, materials and results of assessment process and analysis of the health departments strengths and weaknesses (e.g., SWOT analysis)</p> <p>6. Completed agency strategic plan with all required components including: 1) mission, vision, and guiding principles/values; 2) strategic priorities; 3) measurable and time-framed goals and objectives; 4) identification of external trends, events or factors that may impact the LHD or community health; 5) consideration of key LHD support functions and capacity required for efficiency and effectiveness (e.g., for enhancement of communication and branding policies); 6) assessment of LHD strengths and weaknesses; and 7) link to CHIP or QI Plan, or description of how they will be linked in the future.</p> <p>7. Other deliverable related to Category 3: _____</p>
<p>4. Establishing and Monitoring a System of Performance Management (related PHAB</p>	<p>1. Completed performance management self-assessment</p> <p>2. Detailed written performance management plan including: leadership and staff roles and responsibilities; objectives and standards for measuring progress toward milestones; methods, tools, and processes for measuring, tracking, and reporting performance; and timelines for completion.</p> <p>3. Performance management staff training including training goals and objectives, and documentation of training content such as PowerPoint presentation, a curriculum, evaluation results, etc.</p> <p>4. Evidence of an adopted system of performance management including the agency's selected performance goals, standards, objectives, targets, and indicators. This should include an established mechanism for data collection, analysis, and reporting of performance progress such as performance dashboards, spreadsheets and narrative text.</p>

<p>Domain: 9)</p>	<p>5. Detailed written description of a formal process used to select and implement an information system to support performance management efforts, such as a requirements gathering process, and evidence of implementation of process. The process should detail how the agency examined its needs related to performance management; explored various information system options; considered various stakeholders; and accounted for financial considerations.</p> <p>6. Other deliverable related to Category 4: _____</p>
<p>5. Building a Culture of Quality Improvement (related PHAB Domain: 9)</p>	<p>1. Detailed written description of assessment results for current QI culture and desired future state of quality in organization</p> <p>2. Detailed written description and documentation of the LHD’s QI governance structure</p> <p>3. Detailed written description of process and criteria for identifying and initiating appropriate QI projects</p> <p>4. Detailed written description of process for identifying performance goals, objectives, and measures with time-framed targets</p> <p>5. Detailed written plan for collecting, analyzing, and tracking progress toward performance goals and making improvements as needed</p> <p>6. Detailed written description of the LHD’s plan for regularly communicating about QI activities in the department, and evidence of at least 3 of those mechanisms implemented</p> <p>7. Completed QI plan with all required components including descriptions of: 1) key quality terms; 2) desired future state of quality; 3) key elements of the QI governance structure; 4) types of internal QI trainings available and conducted; 5) how projects are identified and initiated and aligned with agency strategic plan; 6) QI goals, objectives, measures with time-framed targets, and responsible parties; 7) plan for collecting, analyzing, and tracking progress toward performance goals and making improvements as needed; and 8) plan for regularly communicating about QI activities.</p> <p>8. QI staff training including training goals and objectives, and documentation of training content such as PowerPoint presentations, a curriculum, evaluation results, etc.</p> <p>9. Written or visual example of a completed QI project(s) in a program and/or administrative area</p> <p>10. Other deliverable related to Category 5: _____</p>
<p>6. Workforce Development (related PHAB Domain: 8)</p>	<p>1. Detailed written plan for ensuring adoption of relevant public health core competencies among staff</p> <p>2. Assessment(s) used to assess staff competencies against the adopted core competencies and detailed description of process for implementing assessment</p> <p>3. Staff training plan based upon results of assessment, including training schedules and description of curricula topics, and how identified gaps in staff competencies will be addressed</p> <p>4. Workforce development plan that includes all required components including: 1) adopted public health core competencies for staff; 2) assessment of staff competencies against adopted core competencies; 3) curricula and training schedules; and 4) identification of barriers and strategies for addressing them</p> <p>5. Other deliverable related to Category 6: _____</p>