Promoting Sustainability and Continuous Quality Improvement (CQI) through Public Health Accreditation Board (PHAB) Reaccreditation

Virginia Department of Health
Office of Governmental and Regulatory Affairs

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VIRGINIA DEPARTMENT OF HEALTH INTERNSHIP ACADEMY

Let's connect!

OVERVIEW

- **Goal:** Develop a sustainable dashboard to track VDH's progress in maintaining PHAB Reaccreditation
- **Purpose:** Embedded routine monitoring into agency operations to verify documents, assign ownership, and visually flag invalid documents
- **Role:** Led the Discovery, Framework Development, and Prototype Build over an 8-week timeline to transition VDH from reactive preparation to proactive readiness

GAPS/ISSUE IDENTIFIED

Reactive vs. Proactive Readiness: The accreditation process was reactive/episodic rather than an integrated, continuous quality improvement initiative

Decentralized Documentation: Evidence and records were found across multiple locations, lacking a unified, centralized storage method

Workflow Bottlenecks: There was no SOP outlining roles for monitoring document validity, prompting document creation/updates, and reviewing document compliance with PHAB standards

MAJOR ACTIVITIES AND OUTPUTS

1 Discovery, Scoping, & System Build

- Mapped PHAB 2026 metrics into a master Excel data source
- Worked with OIM to scope technical capabilities and build a tracking dashboard in Tableau
- Coded formula logic to track PHAB timeframes and flag expiring documents
- Tested system viability by populating the tracker with readiness assessment data

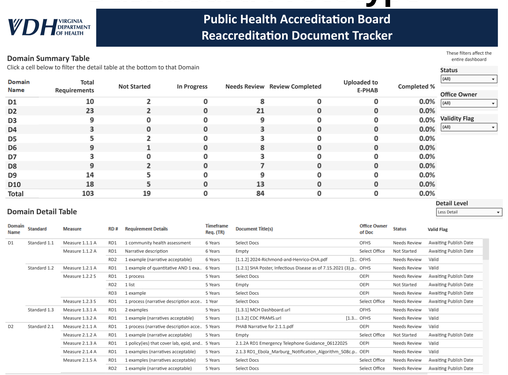
2 Workflow Development

- Developed quality control SOP to verify evidence dates, authenticity, and PHAB compliance
- Outlined document collection, review, and selection process
- Designated Domain Champions with core administrative responsibilities
- Established routine system maintenance protocols

3 Resource Centralization & Communication

- Designed an accessible Intranet hub for VDH to engage with the reaccreditation process
- Centralized materials, linking directly to the tracking dashboard and SOPs
- Highlighted accreditation progress and PHAB resources to generate agency-wide buy-in
- Detailed how the Accreditation team supports a sustainable culture of CQI

PHAB Tracker Dashboard Prototype



VDH VIRGINIA DEPARTMENT OF HEALTH

Public Health Accreditation Board Reaccreditation Document Tracker

Domain Summary Table

Click a cell below to filter the detail table at the bottom to that Domain

These filters affect the entire dashboard

Status: (All)

Office Owner: (All)

Validity Flag: (All)

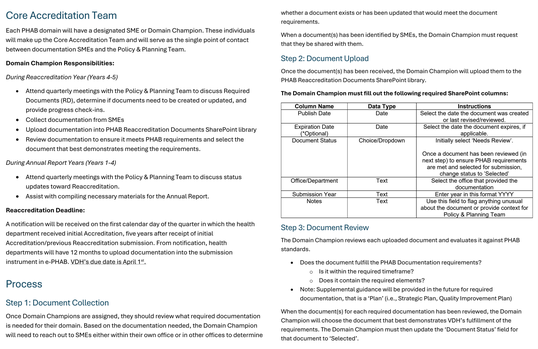
Domain Name	Total Requirements	Not Started	In Progress	Needs Review	Review Completed	Uploaded to E-PHAB	Completed %
D1	10	2	0	8	0	0	0.0%
D2	23	2	0	21	0	0	0.0%
D3	9	0	0	9	0	0	0.0%
D4	3	0	0	3	0	0	0.0%
D5	5	2	0	3	0	0	0.0%
D6	9	1	0	8	0	0	0.0%
D7	3	0	0	3	0	0	0.0%
D8	9	2	0	7	0	0	0.0%
D9	14	5	0	9	0	0	0.0%
D10	18	5	0	13	0	0	0.0%
Total	103	19	0	84	0	0	0.0%

Domain Detail Table

Detail Level: Less Detail

Domain Name	Standard	Measure	RD #	Requirement Details	Timeframe Req. (YR)	Document Title(s)	Office Owner of Doc	Status	Valid Flag
D1	Standard 1.1	Measure 1.1.1 A	RD1	1 community health assessment	4 Years	Select Docs	OPHS	Needs Review	Awaiting Publish Date
		Measure 1.1.2 A	RD1	Narrative description	4 Years	Empty	Select Office	Not Started	Awaiting Publish Date
			RD2	1 example (narrative acceptable)	4 Years	[1.1.2] 2024-Richmond-and-Henrico-CHA.pdf	[1...	OPHS	Needs Review	Valid
	Standard 1.2	Measure 1.2.1 A	RD1	1 example of quantitative AND 1 exa...	4 Years	[1.2.1] SHA Poster, Infectious Disease as of 7.15.2021 (1).p...	OPHS	Needs Review	Valid
		Measure 1.2.2 S	RD1	1 process	5 Years	Select Docs	OEPI	Needs Review	Awaiting Publish Date
			RD2	1 list	5 Years	Empty	OEPI	Not Started	Awaiting Publish Date
			RD3	1 example	5 Years	Select Docs	OEPI	Needs Review	Awaiting Publish Date
		Measure 1.2.3 S	RD1	1 process (narrative description acce...	1 Year	Select Docs	Select Office	Needs Review	Awaiting Publish Date
	Standard 1.3	Measure 1.3.1 A	RD1	2 examples	5 Years	[1.3.1] MCH Dashboard.url	OPHS	Needs Review	Valid
		Measure 1.3.2 A	RD1	1 example (narratives acceptable)	5 Years	[1.3.2] CDC PRAMS.url	[1.3...	OPHS	Needs Review	Valid
		Measure 2.1.1 A	RD1	1 process (narrative description acce...	5 Years	PHAB Narrative for 2.1.1.pdf	OEPI	Needs Review	Valid
		Measure 2.1.2 A	RD1	1 example (narrative acceptable)	5 Years	Empty	Select Office	Not Started	Awaiting Publish Date
		Measure 2.1.3 A	RD1	1 policy/plan that cover lab, epid, and...	5 Years	2.1.2A RD1 Emergency Telephone Guidance_06122025	OEPI	Needs Review	Valid
		Measure 2.1.4 A	RD1	1 examples (narratives acceptable)	5 Years	2.1.3 RD1_Ebola_Marburg_Notification_Algorithm_508c.p...	OEPI	Needs Review	Valid
		Measure 2.1.5 A	RD1	1 examples (narratives acceptable)	5 Years	Select Docs	Select Office	Needs Review	Awaiting Publish Date
			RD2	1 example (narrative acceptable)	5 Years	Select Docs	Select Office	Needs Review	Awaiting Publish Date

PHAB SOP for Document Collection and Review



Core Accreditation Team

Each PHAB domain will have a designated SME or Domain Champion. These individuals will make up the Core Accreditation Team and will serve as the single point of contact between documentation SMEs and the Policy & Planning Team.

Domain Champion Responsibilities:

During Reaccreditation Year (Years 4-5)

- Attend quarterly meetings with the Policy & Planning Team to discuss Required Documents (RD), determine if documents need to be created or updated, and provide progress check-ins.
- Collect documentation from SMEs
- Upload documentation into PHAB Reaccreditation Documents SharePoint library
- Review documentation to ensure it meets PHAB requirements and select the document that best demonstrates meeting the requirements.

During Annual Report Years (Years 1-4)

- Attend quarterly meetings with the Policy & Planning Team to discuss status updates toward Reaccreditation.
- Assist with compiling necessary materials for the Annual Report.

Reaccreditation Deadline:

A notification will be received on the first calendar day of the quarter in which the health department received initial Accreditation, five years after receipt of initial Accreditation/previous Reaccreditation submission. From notification, health departments will have 12 months to upload documentation into the submission instrument in e-PHAB. VDH's due date is April 1st.

Process

Step 1: Document Collection

Once Domain Champions are assigned, they should review what required documentation is needed for their domain. Based on the documentation needed, the Domain Champion will need to reach out to SMEs either within their own office or in other offices to determine whether a document exists or has been updated that would meet the document requirements.

When a document(s) has been identified by SMEs, the Domain Champion must request that they be shared with them.

Step 2: Document Upload

Once the document(s) has been received, the Domain Champion will upload them to the PHAB Reaccreditation Documents SharePoint library.

The Domain Champion must fill out the following required SharePoint columns:

Column Name	Data Type	Instructions
Publish Date	Date	Select the date the document was created or last revised/reviewed
Expiration Date (Optional)	Date	Select the date the document expires, if applicable
Document Status	Choice/Dropdown	Initially select 'Needs Review' Once a document has been reviewed (in next step) to ensure PHAB requirements are met and selected for submission, change status to 'Selected'
Office/Department	Text	Select the office that provided the documentation
Submission Year	Text	Enter year in this format YYYY
Notes	Text	Use this field to flag anything unusual about the document or provide context for Policy & Planning Team

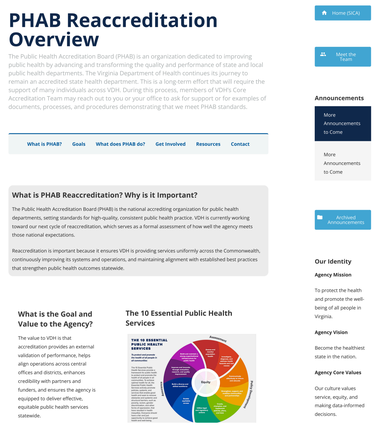
Step 3: Document Review

The Domain Champion reviews each uploaded document and evaluates it against PHAB standards.

- Does the document fulfill the PHAB Documentation requirements?
  - Is it within the required timeframe?
  - Does it contain the required elements?
- Note: Supplemental guidance will be provided in the future for required documentation, that is a 'Plan' (i.e., Strategic Plan, Quality Improvement Plan)

When the document(s) for each required documentation has been reviewed, the Domain Champion will choose the document that best demonstrates VDH's fulfillment of the requirements. The Domain Champion must then update the 'Document Status' field for that document to 'Selected'.

PHAB Reaccreditation Intranet



PHAB Reaccreditation Overview

The Public Health Accreditation Board (PHAB) is an organization dedicated to improving public health by advancing and transforming the quality and performance of state and local public health departments. The Virginia Department of Health continues its journey to remain an accredited state health department. This is a long-term effort that will require the support of many individuals across VDH. During this process, members of VDH's Core Accreditation Team may reach out to you or your office to ask for support or for examples of documents, processes, and procedures demonstrating that we meet PHAB standards.

What is PHAB? | Goals | What does PHAB do? | Get Involved | Resources | Contact

What is PHAB Reaccreditation? Why is it Important?

The Public Health Accreditation Board (PHAB) is the national accrediting organization for public health departments, setting standards for high-quality, consistent public health practice. VDH is currently working toward our next cycle of reaccreditation, which serves as a formal assessment of how well the agency meets those national expectations.

Reaccreditation is important because it ensures VDH is providing services uniformly across the Commonwealth, continuously improving its systems and operations, and maintaining alignment with established best practices that strengthen public health outcomes statewide.

What is the Goal and Value to the Agency?

The value to VDH is that accreditation provides an external validation of performance, helps align operations across central offices and districts, enhances credibility with partners and funders, and ensures the agency is equipped to deliver effective, equitable public health services statewide.

The 10 Essential Public Health Services

Home (SICA) | Meet the Team

Announcements

More Announcements to Come

More Announcements to Come

Archived Announcements

Our Identity

Agency Mission

To protect the health and promote the well-being of all people in Virginia.

Agency Vision

Become the healthiest state in the nation.

Agency Core Values

Our culture values service, equity, and making data-informed decisions.

Causal Loop Diagram (CLD): Accreditation Dynamics

Analyzing the feedback loops between administrative workload, evidence quality, and organizational readiness

KEY TAKEAWAYS

- **Data-Driven Readiness**: Visual dashboards convert qualitative standards into actionable metrics, shifting to proactive planning
- **Policy & Accountability:** Policy standards operationalized into workflows to establish ownership and cross-agency accountability
- **Centralizing Resources:** Transparent tracking and accessible resources generate agency-wide buy-in for CQI

OUTCOMES

- **Shifts from proactive compliance** by centralizing evidence and automating validity tracking
- **Eliminates workflow bottlenecks** by using the SOP to establish a data collection processes
- **Integrates into Performance Management** to serve as a diagnostic tool for CQI

ACKNOWLEDGEMENTS

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