**Accreditation Learning Community**

**Tip Sheet Summary**

**April 6, 2018**

The Table Facilitators were asked to record good ideas, areas of need, and other comments on a tip sheet while the breakout sessions were underway. The responses from the tip sheets are summarized below.

**Domain 1**

* As an organization, have your AC and domain leads begin by developing the narrative for the cover sheets (rather than beginning with assembling all of the documentation), so that if there are staff changes, the newly hired staff member will have sufficient context to understand the ideas behind documentation choices.
* One idea for disseminating the CHA within a community is to send the link to the CHA to partners so that they, too, can place the link on their websites.
* It is difficult to translate hospital CHNA’s to CHA’s since hospitals do not have similar requirements to local health departments; health departments have to make the case for obtaining what they need from any joint process.
* City health departments must ensure that CHA’s developed jointly between the city and county health departments include data on the city.
* Some data is very difficult to obtain, such as collecting data from homeless, single moms. Partnering with food pantries, faith communities, and homeless shelters to gain access to hard-to-reach populations is one viable approach.
* Be sure to consider and reference epidemiology reports in your CHA.
* 1.2.1 Required Documentation says, “Processes and/or protocols to assure that confidential data are maintained in a secure and confidential manner.” A documentation idea is to add written processes pertaining to surveillance data to the agency’s HIPPA protocol.
* Health inequities may be difficult to identify in homogenous counties. In such instances, target a diverse school district or neighborhood to pull data from and describe the impacts of those health inequities to the targeted community as well as to the county overall.
* All documents uploaded have to be current as of the upload date.

**Domain 3**

* When presenting documents remember that the site visitor does not know how “Ohio works.” Explain things like BCMH so they know who the target audience is.
* Use your narrative space to connect your documents and your story.
* Look for “must” statements in both the guidance and the number of examples column.
* Use highlighting.
* Some of Domain 3’s measures connect to the same document

**Domain 7**

* Understand that this is about **access** to care
* Meet with partners and the community to improve access to healthcare.
* Data sources: County Health Rankings/US News and World Report/CHA, CHNA, CHIP/Hospitals
* Collaborative process groups to possibly use: Family & Children First Councils (FCFC), Hospital Association, Public Health Emergency Preparedness (PHEP) Cooperative, Opioid Task Force, or the CHA steering committee.
* It does not have to be perfect. Document what your jurisdiction does as well as you can.
* Obtain guidance from PHAB or your assigned PHAB Accreditation Specialist to verify what counts for Domain 7 in terms of clinical services. Your Accreditation Specialist is there to answer questions, so don’t be shy about asking!
* Don’t over think it – Document what you do!
* Use cover sheets and narratives to explain how things are going.

(7.2.2 and 7.2.3)

* In Domain 7 distinguish what is strategy, planning, and implementation when submitting documentation.
* Date documentation with at minimum month and year. The actual day is even better.
* Don’t send too much information. If the measure asks for one example, you can give just one example. Sending too much information is overwhelming for the site visitor and the most important thing you want to highlight might get overlooked.
* Don’t submit the same documentation from one program or one process for the same measure. Demonstrate that your health department has breadth.