

## **Documentation Selection Tools – Project Public Health Ready Overlap**

## Introduction

There are numerous places where documentation requirements from the Public Health Accreditation Board's voluntary national accreditation program and the Project Public Health Ready voluntary recognition program align. This tool is designed to assist Accreditation Coordinators in PPHR-recognized LHDs seeking to use documentation from their PPHR process to identify areas where documentation may be considered for demonstrating compliance with PHAB measures.

PHAB's Standards and Measures **version 1.0** (available online at <u>www.phaboard.org</u>) includes many emergency preparedness-related documentation requirements.

NACCHO's **Project Public Health Ready (PPHR) (2012 version)** is a competency-based training and recognition program that assesses preparedness and assists local health departments, or groups of local health departments working collaboratively as a region, to respond to emergencies. The PPHR criteria are updated annually to incorporate the most recent federal initiatives. Each of the three PPHR project goals has a comprehensive list of standards that must be met in order to achieve PPHR recognition. Information about the program and the current standards can be found at <a href="http://www.naccho.org/PPHR">http://www.naccho.org/PPHR</a>.

| Project Public Health Ready | Public Health Accreditation Domain |
|-----------------------------|------------------------------------|
| Goals                       | Domains                            |
| → Measures                  | → Standards                        |
| →→Sub-measures              | → → Measures                       |
| →→→ Criteria elements       | →→→ Required documentation         |

If your health department is PPHR recognized, you may be able to use several pieces of documentation when submitting to PHAB. This applies if the documentation was deemed by reviewers to **meet** the sub-measures and criteria elements.

If a "criteria element" box in the chart below is grayed out, the required PHAB documentation aligns with the entire PPHR <u>sub-measure</u>. If a "criteria element" box and a "sub-measure" box are both grayed out, the required PHAB documentation aligns with the entire PPHR measure.

\*\*\*Please note that NACCHO has no bearing on decisions made by PHAB and that use of these tools in no way implies that a health department will be accredited. This tool is simply meant to show alignment and overlap between these two standards-based programs.



## **Documentation Selection Tools – Project Public Health Ready Overlap**

Below is a list of all of PHAB's standards and measures for local health departments. The highlighted/underlined measures are addressed in this tool.

| 1.1.1 T/L          | 6.2.1 A            |
|--------------------|--------------------|
| 1.1.2 T/L          | 6.2.2 A            |
| 1.1.3 A            | 6.2.3 A            |
| 1.2.1 A            | 6.3.1 A            |
| 1.2.2 A            | 6.3.2 A            |
| 1.2.3 A            | 6.3.3 A            |
| 1.2.4 L            | 6.3.4 A            |
| 1.3.1 A            | 6.3.5 A            |
| 1.3.2 L            |                    |
| 1.4.1 A            | 7.1.1 A            |
| 1.4.2 T/L          | 7.1.2 A            |
|                    | 7.1.3 A            |
| 2.1.1 A            | 7.2.1 A            |
| 2.1.2 T/L          | 7.2.2 A            |
| 2.1.3 A            | 7.2.3 A            |
| 2.1.4 A            |                    |
| 2.1.5 A            | 8.1.1 T/L          |
| 2.2.1 A            | 8.2.1 A            |
| 2.2.2 A            | 8.2.2 A            |
| 2.2.3 A            | 0444               |
| 2.3.1 A            | 9.1.1 A            |
| 2.3.2 A            | 9.1.2 A            |
| 2.3.3 A            | 9.1.3 A            |
| 2.3.4 A            | 9.1.4 A<br>9.1.5 A |
| 2.4.1 A<br>2.4.2 A | 9.1.5 A<br>9.2.1 A |
| 2.4.2 A<br>2.4.3 A | 9.2.1 A<br>9.2.2 A |
| 2.4.3 A            | 9.2.2 A            |
| 3.1.1 A            | 10.1.1 A           |
| 3.1.2 A            | 10.1.1 A           |
| 3.2.1 A            | 10.2.1 A           |
| 3.2.2 A            | 10.2.3 A           |
| 3.2.3 A            |                    |
| 3.2.4 A            | 11.1.1 A           |
| 3.2.5 A            | 11.1.2 A           |
|                    | 11.1.3 A           |
| 4.1.1 A            | 11.1.4 A           |
| 4.1.2 T/L          | 11.1.5 A           |
| 4.2.1 A            | 11.1.6 A           |
| 4.2.2 A            | 11.1.7 A           |
|                    | 11.2.1 A           |
| 5.1.1 A            | 11.2.2 A           |
| 5.1.2 A            | 11.2.3 A           |
| 5.1.3 A            | 11.2.4 A           |
| 5.2.1 L            |                    |
| 5.2.2 L            | 12.1.1 A           |
| 5.2.3 A            | 12.1.2 A           |
| 5.2.4 A            | 12.2.1 A           |
| 5.3.1 A            | 12.2.2 A           |
| 5.3.2 A            | 12.3.1 A           |
| 5.3.3 A            | 12.3.2 A           |
| <u>5.4.1 A</u>     | 12.3.3 A           |
| <u>5.4.2 A</u>     |                    |
| 0444               |                    |

6.1.1 A 6.1.2 A



| PHAB Standard   | PHAB Meas | ure(s)   | PHAB Required Documentation  | PPHR | Measure   | PPHR Submeasure   | PPHR Criteria Element  | Differences/ Clarifications                                  |
|---|-----------|--|--|------|---|---|--|--|
| 1.2 Collect and maintain reliable, comparable, and valid data that provide information on conditions of public health importance and on the health status of the population |           | Maintain a surveillance system for receiving reports 24/7 in order to identify health problems, public health threats, and environmental public health hazards | 1. Processes and/or protocols to maintain the comprehensive collection, review, and analysis of data on multiple health conditions from multiple sources   | 1    | Possession and maintenance of a written all-hazards response plan | K. Epidemiology   | k1. Surveillance   | PPHR does not require the documentation of 24/7 surveillance |
| 2.2 Contain/mitigate health problems and environmental public health hazards  | 2.2.1 A   | Maintain protocols for containment/mitigation of public health problems and environmental public health hazards  | 1. Current written protocol that address containment/mitigation of public health problems and environmental public health hazards  | 1    | Possession and maintenance of a written all-hazards response plan | P. Environmental<br>Health response                                 |  | PHAB requires two protocols                                  |
| 2.2 Contain/mitigate health problems and environmental public health hazards  | 2.2.2 A   | Demonstrate a process<br>for determining when the<br>All Hazards Emergency<br>Operations Plan (EOP)<br>will be implemented                                     | 1. infectious disease outbreak protocols describing processes for the review of specific situations and for determining the activation of the EOP. 2. Environmental public health protocols describing processes for the review of specific situations and for determining the initiation of the EOP. 3. cluster evaluation protocols describing processes for the review of specific situations and for determining initiation of the EOP |      | Possession and maintenance of a written all-hazards response plan | F. Activation Circumstances and Event Sequence Following Activation | f2. The plan includes a flow diagram or narrative that describes the triggers for deploying specific response activities and procedures to detail outbreak and exposure investigations |  |



| IAB Standard   | PHAB Mea | asure(s)   | PHAB Required Documentation  | PPHR Measure  | PPHR Submeasure  | PPHR Criteria Element   | <b>Differences/ Clarifications</b> |
|--|----------|--|--|---|--|---|------------------------------------|
| 2.2 Contain/mitigate health problems as environmental public health hazards  | 2.2.3 A  | Complete an after action report (AAR) following events   | 3. completed AAR for two events that document successes, issues, and recommended changes in investigation and response procedures or other process improvements  | 4 Learning and improving through exercises or responses             | B. Incidence<br>Response<br>Documentation                  |   |                                    |
| 2.3 Ensure access to laboratory and epidemiological/er ironmental public health expertise ar capacity to investigate and contain/mitigate public health problems and environmental public health hazards |          | Maintain access to laboratory and other support personnel and infrastructure capable of providing surge capacity   | 1. The health department must provide a protocol, procedure or policy that identifies support personnel who will be called on to provide surge capacity. This could refer to support staff within the health department who can assist during times of response and who would be performing duties outside their routine assignments. Or it could be a listing of support personnel from outside the health department who would be available to assist the department | 1 Possession and maintenance of a written all-hazards response plan | U. Public health surge capacity and volunteer management   | u2. The plan provides a description of the regular availability and surge capacity of the following, in relation to the scope and duration for anticipated events: LHD personnel; Treatment facilities; Laboratories; Redundant communications; Pharmacologic supplies; and Security. |                                    |
| 2.3 Ensure access to laboratory and epidemiological/er ironmental public health expertise ar capacity to investigate and contain/mitigate public health problems and environmental public health hazards |          | Demonstrate that Tribal, state, and local health departments work together to build capacity and share resources to address Tribal, state, and local efforts to provide for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards | 2. Joint exercises for rapid detection, investigation, and containment/ mitigation of public health problems and environmental public health hazards   | 4 Learning and improving through exercises or responses             | A. Multi-agency AAR or B. Incidence Response Documentation | a3v. The AAR/IP lists the agencies that participated in the exercise. OR. b2viii. The AAR lists the agencies that participated in the incident response   |                                    |



| PHAB Standard  | PHAB Meas | sure(s)   | PHAB Required Documentation   | PPHR | Measure   | PPHR Submeasure  | PPHR Criteria Element   | <b>Differences/ Clarifications</b>   |
|--|-----------|---|---|------|---|--|---|--|
| 2.4 Maintain a plan with policies and procedures for urgent and non-urgent communications.   | 2.4.1 A   | Maintain written protocols for urgent 24/7 communications   | 1. Protocols, updated at least annually, for communication with response partners   | 1    | Possession and maintenance of a written all-hazards response plan | J. Communication Plan                                      | j1vii. The application contains evidence that the agency has a redundant communication plan that demonstrates the ability to sand-up three-deep communications systems to link public health, healthcare, emergency management, and law enforcement within twelve hours.  |  |
| 3.2 Provide information on public health issues and public health functions through multiple methods to a variety of audiences.          | 3.2.3 A   | Maintain written risk communication plan  | Written risk communication plan. Guidance: The plan must provide protocols for how information is provided for a given situation, delineate roles and responsibilities, and describe how the health department will work with the media. There is no required format for the plan; it may be a part of a larger communications plan or part of an overall department emergency operations plan. | 1    | Possession and maintenance of a written all-hazards response plan | J. Communication<br>Plan                                   | j2. Crises and emergency risk communication plan  | If your written risk communication plan is part of your overall communication plan you can use the communications plan to documentmeasure 3.2.2 A.   |
| 4.1 Engage with the public health system and the community in identifying and addressing health problems through collaborative processes | 4.1.1 A   | Establish and/or actively participate in partnerships and/or coalitions to address specific public health issues or populations | 1. Documentation of current collaborations that address specific public health issues or populations; 2. List of partner organizations or representation; collaboration; 3. Description of process used to mobilize the Tribal/state/local community  | 1    | Possession and maintenance of a written all-hazards response plan | B. Introductory material; D. Authority and acknowledgments | b2. the plan describes how public health preparedness is approached in the jurisdiction, including a description of th eplanning process and planning team composition; b4. the plan identifies all hospitals, clinics, and community health centers within the vicinity; d2. the plan details evidence of joint participation in disaster planning meetings and creation of an emergency operations plan | Your AHEOP process can be used to meet one of the two required examples of collaborative health improvement efforts. However, NACCHO recommends against using your emergency preparedness materials to satisf this measure because PHAB requests to see a wide breadth of health programming and coalition activity. Preparedness documentation is used throughout the standards and measures explicitly, so other programs should be highligted for this measure. |



| PHAB | Standard  | PHAB Meas | ure(s)   | PHAB Required Documentation   | PPHR | Measure  | PPHR Submeasure  | PPHR Criteria Element  | Differences/ Clarifications   |
|------|---|-----------|--|---|------|--|--|--|---|
| 5.4  | Maintain an All<br>Hazards Emergency<br>Operations Plan | 5.4.1 A   | Participate in the process<br>for the development and<br>maintenance of an All<br>Hazards Emergency<br>Operations Plan (EOP) | Collaborative planning through preparedness meetings with other governmental agencies   | 1    | Possession and maintenance of a written all-hazards response plan          | D. Authority and Acknowledgments                           | d2. The plan details evidence of joint participation in disaster planning meetings and creation of an emergency operations plan (e.g., city-state tribal collaboration, city-county collaboration) |   |
| 5.4  | Maintain an All<br>Hazards Emergency<br>Operations Plan | 5.4.1 A   | for the development and maintenance of an All  | 2. Collaborative testing of the All Hazards EOP, through drills and exercises: a. Description of a real emergency or exercise, including documented; b. Debriefing or After-Action Report (AAR) coordination with emergency response partners   |      | Learning and improving through exercises or responses                      | A. Multi-agency AAR or B. Incidence Response Documentation | a3v: The AAR/IP lists the agencies that participated in the exercise and b3viii: the AAR lists the agencies that participated in the incident response   |   |
| 5.4  | Maintain an All<br>Hazards Emergency<br>Operations Plan | 5.4.2 A   | Adopt and maintain a public health emergency operations plan (EOP)   | 1. EOP, as defined by Tribal, state, or national guidelines that includes: a) designation of the health department position that is assigned the emergency operations coordinator responsibilities, b) roles and responsibilities of the health department and its partners, c) communication networks and/or communication plan, d) continuity of operations | 1    | Possession and maintenance of a written all-hazards response plan          |  |  | The All Hazards Emergency Operations Plan (AHEOP) required by PPHR aligns with documentation requirements for letters a and b. The Communications Plan (submeasure J) and Continuity of Operations (Submeasure T) align with c and d, respectively. |
| 5.4  | Maintain an All<br>Hazards Emergency<br>Operations Plan | 5.4.2 A   | Adopt and maintain a public health emergency operations plan (EOP)   | 2. Documentation of testing the public health EOP, through the use of drills and exercises: a) process for exercising and evaluating the public health EOP and b) after-action report (AAR).  | 4    | Learning and improving through exercises or responses                      | A. Multi-agency AAR or B. Incidence Response Documentation |  |   |
|      | Maintain an All<br>Hazards Emergency<br>Operations Plan | 5.4.2 A   | Adopt and maintain a public health emergency operations plan (EOP)   | 3. Documentation THAT the public health EOP has been revised within the last two years as indicated by review of the AAR: a) documentation of the review and decisions made and b) revised public health EOP.   | 1    | Possession and<br>maintenance of a<br>written all-hazards<br>response plan | C. Plan Update Cycle                                       |  | PPHR requires updates within one year and a description of the process. PHAB requires review within 2 years and proof of a review meeting.  |



| PHAB Standard PH  | HAB Measure(s)   | PHAB Required Documentation  | PPHR Measure  | PPHR Submeasure  | PPHR Criteria Element                      | <b>Differences/ Clarifications</b>   |
|---|--|--|---|--|--|--|
| 5.4 Maintain an All Hazards Emergency Operations Plan   | .4.2 A Adopt and maintain a public health emergency operations plan (EOP)  | 3. Documentation that the public health EOP has been revised within the last two years as indicated by review of the AAR: a) documentation of the review and decisions made, and b) revised public health EOP. | 4 Learning and improving through exercises or responses                             | A. Multi-agency AAR or B. Incidence Response Documentation | A6. Improvement Plan; B3. Improvement Plan | PPHR requires that the AAR be reviewed and changes be incorporated into the revised EOP  |
| 8.2 Assess staff competencies and address gaps by enabling organizational and individual training and development opportunities | .2.1 A Maintain, implement, and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies. |  | 3 Completion and maintenance of a workforce development plan and staff competencies | D. Workforce development plan                              |  | PPHR's requirements for a workforce development plan relate specifically to emergency preparedness activities. Therefore, on its own, this workforce development plan is not as comprehensive as what is required for PHAB. There are other linkages throughout PPHR Measure 3, however, that could be included ina HD workforce development plan. Consider also pulling information from submeasures b1, C, E, and F. |