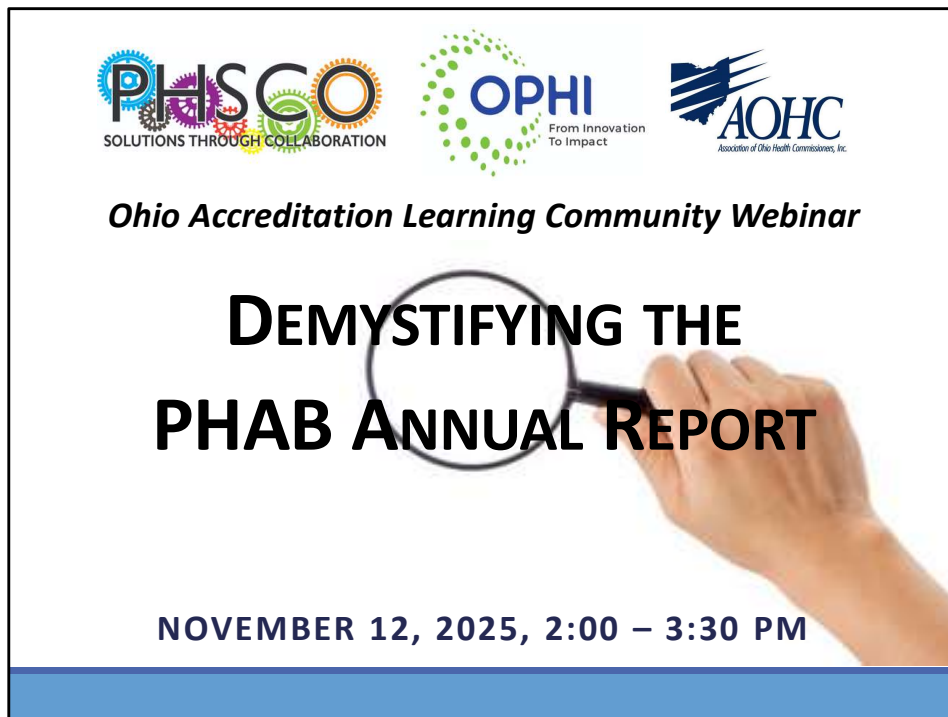




Susan Tilgner:

Good afternoon! I am Susan Tilgner, Executive Director of the Ohio Public Health Institute. I am pleased to welcome you to this Accreditation Learning Community webinar on “Demystifying the PHAB Annual Report”. While this webinar is geared primarily toward those newer to the Annual Reporting process, we welcome all Accreditation Coordinators to participate so that more experienced individuals can share what has worked well for them.

Without further ado, I’m going to hand the webinar over to Anne Goon to get us started.

Anne Goon:

Thank you, Susan. I serve as the Executive Director of the Public Health Services Council of Ohio, which is a regional council of governments made up of local Boards of Health. We seek to expand local health departments’ capacity to provide foundational public health services to their residents through shared service arrangements. PHSCO works on behalf of OPHI to coordinate Ohio Accreditation Learning Community activities that benefit health departments across the state.

Federal Workforce Development funds flow through the Ohio Department of Health

and the Association of Ohio Health Commissioners to OPHI and PHSCO to support this work.

I'm delighted to have the opportunity to present today's webinar with two members of the Accreditation Learning Community Advisory Committee- Becky Carrasco, Bethany Wachter- as well as Susan. We owe a special note of gratitude to Angela Sprankle, Accreditation Coordinator at the Zanesville-Muskingum County Health Departments, for providing the Annual Report screen shots you will see throughout this webinar. We also appreciate that the City of Springdale Health Department shared PHAB's Review of two of their Annual Reports.

Today's webinar focuses on the Annual Report that all accredited health departments are required to submit to the Public Health Accreditation Board. The content of this webinar is based on PHAB's online training module titled "The Annual Report". PHAB has given permission for us to use their script. However, since they are in the process of updating this training module, they requested that we NOT record this webinar. We will provide copies of the slides and a list of valuable PHAB resources on the PHSCO and OPHI websites after the webinar.

Objectives

1. Understand the purpose and components of PHAB's Annual Report.
2. Learn how to effectively complete and submit the report.
3. Explore tips, tools, and reflection options to support reaccreditation.

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Anne Goon:

We have 3 objectives for today's webinar. Our goal is for accreditation coordinators to:

1. Understand the purpose and components of the report that accredited health departments must submit to PHAB annually;
2. Provide guidance on how to effectively complete and submit the Annual Report; and
3. Share tips, tools, and reflection options that support your agency's reaccreditation efforts.

Annual Report Due Dates

Based on LHD's accreditation date

- ✓ Q1 (Jan-Mar): March 31
- ✓ Q2 (Apr-Jun): June 30
- ✓ Q3 (Jul-Sep): Sept 30
- ✓ Q4 (Oct-Dec): Dec 31

Submitted via e-PHAB



3

Anne Goon:

You will need to complete four (4) Annual Reports between accreditation cycles- at the end of the first 4 years of accreditation. The Annual Report must be submitted through e-PHAB.

The Annual Report document opens on the first day of the quarter in which your health department was accredited. You can submit the Annual Report anytime during the quarter, but it must be submitted no later than 11:59 pm on the last day of the quarter.

- For Health Departments accredited in January, February or March: your Annual Report is due by **March 31**.
- For agencies accredited in April, May or June: Your due date is **June 30**.
- Health Departments accredited in July, August or September must submit their Annual Report by **September 30**.
- Finally, **December 31** is the submission deadline for agencies accredited in October, November or December.

Who Should Complete the Report?

- Accreditation Coordinator
- Health Commissioner, Deputy Commissioner, or Administrator
- Support from Program Staff



Use PHAB's Annual Report Overview & Process document issued in March 2025!

4

Anne Goon:

We'll cover each component of the Annual Report in more detail in the coming slides. The Annual Report should be completed under the guidance of the Accreditation Coordinator and your Health Commissioner, Deputy Health Commissioner, or Administrator, as determined by your agency, with assistance from other health department staff.

Toward the end of this webinar, we'll provide a list of PHAB Resources- you'll find the [Annual Report Overview & Process March 2025.pdf](#).

The Big Picture

Annual Report has three components:

1. Health Department Updates
2. Specific Measure Reporting
3. Reflection and Learning

5

Anne Goon:

The Annual Report is an important part of PHAB's ongoing accreditation process. Its purpose is to ensure accredited health departments remain in conformity with the Standards and Measures. The Annual Report provides opportunities for additional engagement with PHAB to support advancing quality, performance, and transformation. In addition, the Annual Report is designed to help your health department prepare for reaccreditation.

The Annual Report has three primary components:

- 1) Health Department Updates,
- 2) Specific Measure Reporting, and
- 3) Reflection and Learning.

All three focus areas must be completed in each Annual Report. PHAB encourages health departments to plan well in advance of their report's due date and how they can best involve a variety of staff in its completion.

Opening Page on e-PHAB

The screenshot shows the e-PHAB dashboard for the Zanesville-Muskingum County Health Department. The page is divided into several sections:

- Organization Profile:** Displays the organization's name, location, website, and primary contact information.
- Active Applications:** Shows the current accreditation status and expiration date.
- Certifications:** Lists active certifications and their expiration dates.
- Scheduled Items:** A table showing upcoming deadlines for standards, measures, and annual reports.

Item	Begin	End
Standards & Measures Initial v1.5 L	Feb 19th	Feb 19th (6 years ago)
Annual Report 2023	Jul 1st	Sep 30th (2 years ago)
Annual Report 2024	Jul 1st	Sep 30th (10 months ago)
Annual Report 2025	Jul 1st	Sep 30th (in 2 months)

Anne Goon:

Let's start by going to e-PHAB. This screenshot shows the opening page for Zanesville-Muskingum County Health Department. On the right side, find the "Scheduled Items" section, which shows when your Annual Reports are due. Note that their 2025 Annual Report opened on July 1st and is due by Sept 30th. Click on "Annual Report 2025" to open the report.

First Page of Annual Report in e-PHAB






[Home](#)
[Profile](#)
[Contacts](#)
[Applications](#)
[Processes](#)
[Instruments](#)
[Documents](#)

RESPONSE SUMMARY

Annual Report 2025 - INITIAL RESPONSE

Zanesville-Muskingum County Health Department (3161)

NOT STARTED

SUMMARY

	0%	Updates
	0%	Measures
	0%	Reflection and Learning
	0%	Attestation

Submit

7

Anne Goon:

When you've done that, this is the page that will open up. It summarizes the completion of the 3 main sections of the report and the Health Commissioner's attestation. Don't "submit" until all 4 items on this checklist are done.

Health Department Updates

- Report significant changes (leadership, budget, structure, services)
 - Report only if they could impact ability to continue meeting the Standards & Measures
- Report adverse findings (e.g., high-risk grantee status)

8

Anne Goon:

Each year, the health department must report to PHAB any circumstances or changes that are significant enough that they could potentially jeopardize the agency's ability to remain in conformity with the Standards & Measures. The fluctuation of full-time employees or the loss of a single grant do not need to be reported. Circumstances that you must report include:

- A change in the health department's leadership.
- A significant change in the department's budget or funding.
- A change in the department's governance.
- A change in the department's structure (which includes mergers or dissolution of mergers).
- A change in the programs or services that the health department provides.

If any of these circumstances apply to your department: Indicate **Yes** in the Annual Report and provide a description of the situation and how it is anticipated to affect the department's ability to remain in conformity with the Standards & Measures.

The health department must also report having received any adverse findings, notifications, or communications related to oversight or control from federal or state funding agencies that indicate the department is at risk for loss or reduction of

funds. This includes notification that your department has been deemed a high-risk grantee.

The awarding agency could communicate this to a department based on a history of unsatisfactory performance, financial instability, lack of compliance with standards, or non-conformity with terms and conditions of previous awards. It could also be communicated through the inclusion of special conditions in a funding award that are related to the high-risk condition.

If these circumstances apply to your department: Indicate **Yes** and provide the following: name of the funding agency, summary of the concern/concerns raised by the funding agency, and a description of the results of the finding.

If your health department answers “**Yes**” to either changing circumstances or adverse findings PHAB will indicate whether an update of the situation will be required in the next Annual Report.

If neither applies to your department: Select **No** in e-PHAB.

Updates - If YES to Any Options

Annual Report 2025

Zanesville-Muskingum County Health Department

Changes in Health Department Profile Information

The health department must indicate if there are circumstances that could potentially jeopardize continued conformity with the Standards and Measures under which accreditation was initially awarded. Circumstances include leadership changes, budget, personnel, governance, or program changes that would have a significant impact on the health department's ability to be in conformity with accreditation requirements.

Leadership	☒ Yes ☐ No Clear
Budget	☐ Yes ☒ No Clear
Number of FTE	☐ Yes ☒ No Clear
Number of employees	☐ Yes ☒ No Clear
Governance	☐ Yes ☒ No Clear
Structure (e.g., mergers, transition from stand-alone agency to superagency or vice versa)	☐ Yes ☒ No Clear
Programs or services that the health department provided at the time accreditation was conferred that it does <u>not</u> provide now	☐ Yes ☒ No Clear
Other circumstances	☐ Yes ☒ No Clear

Leadership

Describe the change.

Describe how the change might affect the health department's continued conformity with the Standards and Measures.

Anne Goon:

If any of these circumstances apply to your department: Indicate **Yes** in the Annual Report and provide a description of the situation and how it is anticipated to affect the department's ability to remain in conformity with the Standards & Measures.

If none of these circumstances apply to your department: Select **No** in e-PHAB.

Adverse Findings or Communications Related to Funding

Adverse Findings or Communications Related to Funding

Some adverse findings or communications related to oversight or control from federal or state funding agencies could indicate that a health department is at risk for loss or reduction in those funds.

Has the Health Department received such an adverse finding or communication related to oversight or control?

☒ Yes

☐ No

[Clear](#)

Answer the questions below. If the health department received multiple adverse findings/communications, please complete a separate table for each.

Funding Agency
+ Add additional item

10

Anne Goon:

The health department must also report having received any adverse findings, notifications, or communications related to oversight or control from federal or state funding agencies that indicate the department is at risk for loss or reduction of funds. This includes notification that your department has been deemed a high-risk grantee.

The awarding agency could communicate this to a department based on a history of unsatisfactory performance, financial instability, lack of compliance with standards, or non-conformity with terms and conditions of previous awards. It could also be communicated through the inclusion of special conditions in a funding award that are related to the high-risk condition.

If these circumstances apply to your department: Indicate **Yes** and provide the following: name of the funding agency, summary of the concern/concerns raised by the funding agency, and a description of the results of the finding.

If your health department answers “Yes” to either changing circumstances or adverse findings PHAB will indicate whether an update of the situation will be required in the next Annual Report.

If this doesn't apply to your department: Select **No** in e-PHAB.

Now Susan Tilgner is going to address the second sections of the Annual Report – the Health Department Updates and Specific Measure Reporting.

Emerging Issues



Identify emerging issues engaged in during the past year, such as:

- * Systems transformation
- * Data modernization
- * Community engagement
- * Data for decision making
- * Workforce
- * Climate change
- * Health equity
- * Partnerships

Optional narrative for one emerging issue

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Susan Tilgner:

The health department is also asked to identify emerging issues it has engaged in over the past year. The list of potential emerging issues includes the following:

- Public health systems transformation (e.g. Public Health Forward, service or resource sharing)
- Public health financing modernization (e.g. Foundational Public Health Services Capacity and Costing Assessment)
- Health equity
- Inclusivity, diversity, equity, and antiracism efforts within the health department
- Community engagement (e.g., power building, public health partnerships with community-based organizations, community-led decision-making)
- Partnerships
- Health strategist
- Public health and health care integration
- Workforce (such as recruitment, retention, or novel staffing models)
- Data for decision making (e.g., dashboards, data visualization, transforming data to action)- An example could be attending one of the regional Clear Impact workshops this summer or the “Creating User-Friendly Data Reports for Different Audiences” session at the ALC Training & Networking Day last month, and then working to incorporate your new skills into your daily work.

- Data modernization (e.g., equitable data sharing, technology systems changes, or including community voice in data)
- Emergency preparedness and response
- Community resilience
- Infectious diseases (including lab testing, surveillance, or contact tracing)
- Climate change
- Mental health
- Opioid/substance abuse

Emerging Public Health Issues & Innovations

Emerging Public Health Issues and Innovations

The health department is required to indicate which emerging issues the department has engaged in over the last year.

Public health systems transformation (e.g., Public Health Forward, service/resource sharing)	☒ Yes ☐ No Clear
Public health financing modernization (e.g., Foundational Public Health Services capacity and costing assessment)	☒ Yes ☐ No Clear
Health equity	☐ Yes ☐ No ☒ Other Clear
Inclusivity, diversity, equity, and antiracism (including organizational efforts to support IDEA within the HD)	☐ Yes ☐ No ☒ Other Clear
Community engagement (e.g., power building, CBO-public health partnerships, community-led decision making, etc.)	☒ Yes ☐ No ☐ Other Clear
Partnerships	☒ Yes ☐ No Clear
Health strategist	☒ Yes ☐ No ☐ Other Clear
Public health/health care integration	☒ Yes ☐ No Clear

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Susan Tilgner:

This screenshot shows the Emerging Issues and Innovations section. You are simply indicating if your health department engaged in each of these areas by clicking “Yes” or “No”.

Note that you can select “Other” for 3 of these issues....**Health Equity; Inclusivity, Diversity, Equity, and Antiracism; and Climate Change.**

Emerging Public Health Issues and Innovations – If Other

Workforce (e.g., recruitment, retention, novel staffing models)	☒ Yes ☐ No Clear
Data for decision making (e.g., dashboards, data visualization, transforming data to action)	☒ Yes ☐ No Clear
Data modernization (e.g., equitable data sharing, including community voice in data, technology systems changes)	☒ Yes ☐ No Clear
Emergency preparedness and response	☒ Yes ☐ No Clear
Community resilience	☒ Yes ☐ No Clear
Infectious diseases (including lab testing, surveillance, contact tracing)	☒ Yes ☐ No Clear
Climate change	☒ Yes ☐ No ☐ Other Clear
Mental health	☒ Yes ☐ No Clear
Opioid/substance use	☒ Yes ☐ No Clear
Other (please describe below)	☒ Yes ☐ No Clear

Please describe the "Other" emerging issue and/or innovation.

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Susan Tilgner:

You also have the option of indicating another emerging issue or innovation you've been engaged in over the past year in your jurisdiction. You would select "Other" and describe it.

Optional: Expand on an Emerging Public Health Issue or Innovation

Response

B I U A: F T E L O M A >

The health department has the option to describe one emerging issue or innovation in the field below.

Emerging Public Health Issues and Innovations Area

Select an option...

Narrative

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Susan Tilgner:

In addition to choosing topics from the list provided, the department has the option to describe one emerging issue or innovation in more detail as shown here.

Continued Advancement

for Reaccredited Health Departments only

- Report annually on 1 reaccreditation measure
- Submit measure ID, original statement, and annual update
- Include key milestones & progress

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Susan Tilgner:

During the reaccreditation process, the health department identified areas where continued advancement would occur for measure-specific work. The location of your agency's Continued Advancement comments will vary depending on which Version of the PHAB Standards & Measures your health department was reaccredited under.

Reaccredited health departments **MUST** report on their progress for one of these measures in their Annual Report. The department should select a different measure each year.

In e-PHAB, you will submit the measure, the original continued advancement comment, and your update. The update can be a few sentences or paragraphs that summarize the work the health department has accomplished. It would be helpful to include descriptions about any significant milestones that have been successfully completed.

Moving forward, health departments that obtain Reaccreditation under Version 2022 will identify three measures for continued advancement that will be addressed through the Annual Report.

Specific Measures

Report if directed by PHAB after Site Visit

- Foundational Capability Measures:
Upload documentation
- Other Measures: Provide narrative
summary

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Susan Tilgner:

After considering the Site Visit Report, PHAB's Accreditation Committee may decide to require the health department to report on Specific Measures in the Annual Report. If applicable, the measures will be identified in the accreditation status notification letter.

If your department has measures to report on: select **Yes** in e-PHAB. If your department has no measures to report on: select **No**.

Non-Foundational Capabilities Measures

If the measures identified for reporting are not Foundational Capability measures, but were either assessed as Slightly Demonstrated or Not Demonstrated, the department will be asked to provide a narrative summary in e-PHAB to describe work on the measure. The narrative should include key action steps the department has made over the previous year to continue work specific to the measure(s).

Specific Measures

Measures

HISTORY

On

Off

Accreditation Committee Requests

Did the Accreditation Committee request that the Health Department address one or more specific measure(s) in its Annual Report? Please reference the health department's decision letter under the "Documents" tab in ePHAB for a complete list of any measures required for reporting.

☒ Yes

☐ Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure

☐ No

Clear

Accreditation Committee Requests - Health Department Responses

For each measure for which the Accreditation Committee requested your health department to address, please complete a row in the table below. For each measure, report progress towards addressing any gaps/deficiencies identified within the site visit report. A narrative of progress is required for non-core/priority measures. Core/priority measures require documentation which should be uploaded to the "Documents" tab under the appropriate annual report folder in ePHAB.

Measure	Report Comment	Health Department Action
Add additional item		

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Susan Tilgner:

Foundational Capabilities Measures

If the measures identified for reporting are Foundational Capability measures, the health department will be required to provide **documentation** of the department's work on those measures in the first Annual Report. Documentation submitted will be assessed by PHAB staff for conformity with measure requirements. PHAB may ask for additional documentation upon review of the Annual Report. If the documentation does not sufficiently demonstrate improved conformity with the measure, the department may be asked to continue reporting on the measure in subsequent years.

Specific Measures – If YES

Response

B i U A L T F Z Y W X Q S P R O

For each measure for which the Accreditation Committee requested your health department to address, please complete a row in the table below. For each measure, report progress towards addressing any gaps/deficiencies identified within the site visit report. A narrative of progress is required for non-core/priority measures. Core/priority measures require documentation which should be uploaded to the "Documents" tab under the appropriate annual report folder in ePHAB.

Measure	Report Comment	Health Department Action

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This screenshot shows what you must complete for each Measure the PHAB Accreditation Committee indicates you must address in the Annual Report.

Specific Measures – YES, BUT...

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Zanesville-Muskingum County Health Department

SAVE

Measures

HISTORY On Off

Accreditation Committee Requests

Did the Accreditation Committee request that the Health Department address one or more specific measure(s) in its Annual Report? Please reference the health department's decision letter under the "Documents" tab in ePHAB for a complete list of any measures required for reporting.

☐ Yes

☒ Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure

☐ No

Clear

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Susan Tilgner:

The department will receive feedback from PHAB about whether they are required to continue reporting on the measure in subsequent years. If your agency is not required to address it in future Annual Reports, you will select the “Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure.”

Specific Measures – If NO

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Zanesville-Muskingum County Health Department

Measures HISTORY On Off

SAVE

Accreditation Committee Requests

Did the Accreditation Committee request that the Health Department address one or more specific measure(s) in its Annual Report? Please reference the health department's decision letter under the "Documents" tab in ePHAB for a complete list of any measures required for reporting.

☐ Yes

☐ Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure

☒ No

Clear

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Susan Tilgner:

Specific Measures

If your health department is not required to report on any specific measures:
Select **No** in e-PHAB, as shown in this screenshot.

Now, Becky Carrasco, Accreditation Coordinator for the City of Springdale Health Department, is going to cover a portion of the third and most substantial section of the Annual Report - Reflection and Learning.

Reflection & Learning Options

Choose 1 each year:

1. Document Review
2. Domain Reflection Report
3. Foundational Capability Reflection Report
4. Innovation Review
5. Participation with PHAB
6. QI Project Review
7. Reaccreditation Readiness
8. FPHS Capacity and Cost Assessment

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Becky Carrasco:

Each Annual Report cycle, your department will need to self-select **one** Reflection and Learning option from the list. Consider which activity will be most helpful in fostering improvement and supporting efforts toward sustaining accreditation. For example, it may be helpful to consider what year is best to submit a document for PHAB review choosing Option 1: Documentation Review or in which year you'd plan to complete Option 7: Reaccreditation Readiness Assessment.

Option 1: Document Review Page 1

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Zanesville-Muskingum County Health Department

assessment data but will provide reaccreditation reminders and may reach out to learn more about your experience.

Please select one Reflection and Learning option from the offerings below.

- ☒ Document Review
- ☐ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☐ Reaccreditation Readiness
- ☐ PHS Capacity and Cost Assessment

Clear

Document Review

Please complete and upload the reaccreditation documentation form to e-PHAB, found in the Learning Center.

[Choose Existing](#)

PREV NEXT SAVE Submit

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Becky Carrasco:

Option 1: Document Review

The health department can submit documentation of how it meets one reaccreditation measure. Either narrative or actual documentation for the measure may be submitted in e-PHAB. PHAB will provide feedback including: guidance on the use of the documentation form, opportunities for improvement/and or areas of excellence identified, a recommendation on using this example for reaccreditation, and any additional considerations that may be helpful. **This option is available each year.**

Option 2: Domain Reflection Report

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Zanesville-Muskingum County Health Department

SAVE

B / U A I E F T L S * O G M A < >

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☒ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☐ Reaccreditation Readiness
- ☐ FPHS Capacity and Cost Assessment

[Clear](#)

Domain Reflection Report

Domain (select one):

Select an option... 

A value is required

Related to this work, the health department has: (check all that apply)

- ☐ Identified opportunities to strengthen an existing policy
- ☐ Dedicated staff time or funding

[PREV.](#) [NEXT](#)

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Option 2: Domain Reflection Report

The department will use PHAB's template for this activity; we've included a link to this template on the Resources slides later in this presentation. The completed template is the only document that is uploaded in e-PHAB.

The option is available each year. The department cannot complete the reflection report on the same domain two years in a row.

Option 2: Domain 2 Reflection Report

The screenshot displays the PHAB Annual Report 2025 form for the Zanesville-Muskingum County Health Department. The form is titled "Domain Reflection Report" and includes a "Domain (select one):" dropdown menu. The selected domain is "Domain 2: Investigate, diagnose, and address health problems and hazards affecting the population." Below this, there is a section titled "Related to this work, the health department has: (check all that apply)" with a list of 12 checkboxes. The bottom of the form features navigation buttons: "< PREV." and "NEXT >". A "SAVE" button is located in the top right corner. The page number "24" is visible in the bottom right corner.

Annual Report 2025
Zanesville-Muskingum County Health Department

SAVE

Domain Reflection Report

Domain (select one):

Domain 2: Investigate, diagnose, and address health problems and hazards affecting the population.

Related to this work, the health department has: (check all that apply)

- ☐ Identified opportunities to strengthen an existing policy
- ☐ Dedicated staff time or funding
- ☐ Developed specific communication tools that will enhance this work
- ☐ Sought out existing evidence-based practices
- ☐ Included related work or goals into the performance management system
- ☐ Conducted an improvement based on Qi or used an innovation framework
- ☐ Established a new process or policy
- ☐ Informed community partners, governing entity and or stakeholders
- ☐ Used data to inform a decision
- ☐ Taken steps to formally document the work
- ☐ Engaged external partners or leaders in this body of work
- ☐ Other

< PREV. NEXT >

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Becky Carrasco:

In our example, Zanesville-Muskingum County Health Department has chosen Domain 2: *Investigate, diagnose, and address health problems and hazards affecting the population* as its Domain Reflection Report Option.

You then start by addressing what your health department has already been doing related to the selected Domain. You can choose more than one of these actions, as we'll see on the next slide.

Option 2: Domain 2 Reflection Report

Annual Report 2025
Zanesville-Muskingum County Health Department

SAVE

Domain Reflection Report

Domain (select one):

Domain 2: Investigate, diagnose, and address health problems and hazards affecting the population.

Related to this work, the health department has: (check all that apply)

- ☒ Identified opportunities to strengthen an existing policy
- ☒ Dedicated staff time or funding
- ☐ Developed specific communication tools that will enhance this work
- ☒ Sought out existing evidence-based practices
- ☒ Included related work or goals into the performance management system
- ☒ Conducted an improvement based on QI or used an innovation framework
- ☒ Established a new process or policy
- ☒ Informed community partners, governing entity and/or stakeholders
- ☒ Used data to inform a decision
- ☒ Taken steps to formally document the work
- ☒ Engaged external partners or leaders in this body of work
- ☐ Other

Describe the work the health department has accomplished related to the Domain selected above. Consider what key activities and milestones the department has completed.

Based on your reflection, what are your next steps related to this Domain and PHAB accreditation (for example, establish or formalize processes, identify additional information sources, brainstorm examples that may be included as documentation, identify the staff or team that will be tasked with collecting and packaging documentation).

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Becky Carrasco:

Zanesville-Muskingum indicated that, for Domain 2, they have been doing all but one of the actions listed by PHAB (***feel free to read the list, since the screen is hard to see***).

This screen shot also shows the next 2 items that they must complete as part of the Domain Reflection Report-

- 1) Describe the work the agency has accomplished related to this Domain, focusing on key activities and milestones they have completed; and
- 2) Identify next steps related to this Domain and PHAB Reaccreditation requirements, as well as who will be tasked with collecting and preparing the documentation for submission.

Option 3: Foundational Capability Reflection Report



Becky Carrasco:

Option 3: Foundational Capability Reflection Report

This option provides the health department with the opportunity to formally reflect on the breadth of work it has been accomplished specific to one Foundational Capability. This activity also encourages the agency to gain a deeper understanding of how the work that is described aligns with reaccreditation requirements. Departments will complete a critical review of one Foundational Capability, aligned with the Foundational Public Health Services framework. The 8 Foundational Capabilities are marked here in red for your reference.

Option 3: Foundational Capability Reflection Report

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☐ Domain Reflection Report
- ☒ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☐ Reaccreditation Readiness
- ☐ FPHS Capacity and Cost Assessment

Clear

Foundational Capability Reflection

Select one:

Related to this work, the health department has (check all that apply)

- ☐ Identified opportunities to strengthen an existing policy.
- ☐ Developed specific communication tools that will enhance this work.
- ☐ Sought out existing evidence-based practices.
- ☐ Included related work or goals into the performance management system.
- ☐ Conducted an improvement based on QI or used an innovation framework.
- ☐ Established a new process or policy.
- ☐ Informed community partners, governing entity and/or stakeholders.
- ☐ Used data to inform a decision.
- ☐ Taken steps to formally document the work.
- ☐ Engaged external partners or leaders in this body of work.
- ☐ Other

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Becky Carrasco:

This screen shot shows the selection of the Foundational Capability Reflection. Just like with Option 2, you need to identify what the health department has already been doing related to the selected Foundational Capability. You can choose more than one of these actions.

Feel free to substitute other information, if this description is inaccurate> The agency will upload the completed Domain Reflection Report Form, which can be found in the PHAB Learning Center). PHAB will review the report and provide feedback on the appropriate use of the coversheet, if applicable, opportunities for improvement and/or areas of excellence, and a recommendation on using the example for reaccreditation.

This option is available each year.

Option 3: Foundational Capability Reflection Report

Annual Report 2025
Zanesville Muskingum County Health Department

Describe the work the health department has accomplished related to the Foundational Capability selected above. Consider what key activities and milestones the department has completed.

Based on your reflection, what are your next steps related to this Foundational Capability and PHAB accreditation (for example, establish or formalize processes, identify additional information sources, brainstorm examples that may be included as documentation, identify the staff or team that will be tasked with collecting and packaging documentation).

Foundational Capability Reflection - Question 4
In preparation for reaccreditation, identify which Measure(s) to which the highlighted work relates. Select all that apply.

Foundational Capability	Domain & Measure Number
Accountability & Performance Management	☐ 9.1.1 A Establish a performance management system.
	☐ 9.1.5 A Implement quality improvement projects.
	☐ 9.2.1 A Identify and use applicable research and practice-based information for program development and implementation.
Assessment & Surveillance	☐ 1.1.1 A Develop a community health assessment.
	☐ 1.2.1 A Collect primary non-surveillance data.
	☐ 1.2.2 Tr Participate in data sharing with other entities.
	☐ 1.2.2 S Engage in data sharing and data exchange with other entities.
	☐ 1.3.1 A Analyze data and draw public health conclusions.
	☐ 2.1.1 A Maintain surveillance systems.
	☐ 2.1.3 A Ensure 24/7 access to resources for rapid detection, investigation, containment, and mitigation of health problems and environmental hazards.

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Becky Carrasco:

This screen shot shows the next 2 items that you must complete as part of the Foundational Capability Reflection Report-

- 1) Describe the work the department has accomplished related to this Foundational Capability, focusing on key activities and milestones that have been completed; and
- 2) Identify next steps related to this Foundational Capability and PHAB Reaccreditation requirements, as well as who will be tasked with collecting and preparing the documentation for submission.

Finally, the health department must identify which Measures are related to the Foundational Capability being addressed in Option 3. This screen shows the Foundational Capabilities of Accountability for Performance Management and Assessment & Surveillance and the related Measures...

Option 3: Foundational Capability Reflection Report

Communications	☐ 3.1.1 A Maintain procedures to provide ongoing, non-emergency communication outside the health department. ☐ 3.2.2 A Implement health communication strategies to encourage actions to promote health.
Community Partnership Development	☐ 4.1.2 A Participate actively in community health coalition(s). ☐ 5.2.2 A Adopt a community health improvement plan. ☐ 7.2.1 A Collaborate with other sectors to improve access to social services.
Emergency Preparedness & Response	☐ 2.2.6 A Maintain and implement a process for urgent 24/7 communications with response partners. ☐ 2.2.7 A Conduct exercises and use After Action Reports (AARs) to improve preparedness and response. ☐ 2.2.1 A Maintain a public health emergency operations plan (EOP). ☐ 2.2.2 A Ensure continuity of operations during response.
Equity	☐ 5.2.3 A Address factors that contribute to specific populations' higher health risks and poorer health outcomes. ☐ 10.2.1 A Manage operational policies including those related to equity.
Organizational Competencies	☐ 8.1.3 A Recruit a qualified and diverse health department workforce. ☐ 8.2.1 A Develop a workforce development plan that assesses workforce capacity and includes strategies for improvement. ☐ 8.2.2 A Provide professional and career development opportunities for all staff. ☐ 10.1.2 A Adopt a department-wide strategic plan. ☐ 10.2.2 A Maintain a human resource function. ☐ 10.2.3 A Support programs and operations through an information management infrastructure. ☐ 10.2.4 A Protect information and data systems through security and confidentiality policies. ☐ 10.2.6 A Oversee grants and contracts. ☐ 10.2.7 A Manage financial systems. ☐ 10.3.3 A Communicate with governance routinely and on an as-needed basis. ☐ 10.3.4 A Access and use legal services in planning, implementing, and enforcing public health initiatives.
Policy Development & Support	☐ 6.1.4 A Conduct enforcement actions. ☐ 5.1.2 A Examine and contribute to improving policies and laws.

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Becky Carrasco:

... and this slides shows the Foundational Capabilities and related Measures for Communications, Community Partnership Development, Emergency Preparedness & Response, Equity, Organizational Competencies, and Policy Development & Support.

Bethany Wachter, Accreditation Coordinator and Director of Community Health Services at the Henry County Health Department, will address five more options available in the Reflection and Learning section of the Annual Report.

Option 4: Innovation Review

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☐ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☒ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☐ Recreditation Readiness
- ☐ FPHS Capacity and Cost Assessment

Dear:

Innovation Review

Please complete and upload the reaccreditation documentation form for 9.2.2.A, found in the Learning Center. Of note, the intent of this requirement is to demonstrate one or more steps the health department has taken to encourage innovation. The example will focus on how the health department has fostered innovation. Providing an example of a program that the health department considers innovative would not meet the intent, unless the example described the process by which the team came up with an innovative approach. The Public Health National Innovation Center website has additional information including the definition of public health innovation and stories that describe innovation (www.phnrc.org).

-or- Choose Existing

< REV.
NEXT >

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Bethany Wachter:

Option 4: Innovation Review

The department may choose to submit a narrative or example that demonstrates efforts to foster innovation. This option aligns with measure 9.2.2 A in Version 2022. Departments will upload documentation in e-PHAB of an innovative skill, practice or process, or a narrative describing the same. PHAB will review the documentation or narrative and provide feedback on the innovation and/or fostering a culture of innovation. **This option is available to health departments in only the second and third annual report cycles.**

Option 5: Participation with PHAB

Please select one Reflection and Learning option from the offerings below.

☐ Document Review
☐ Domain Reflection Report
☐ Foundational Capability Reflection Report
☐ Innovation Review
☒ Participation with PHAB
☐ QI Project Review
☐ Succession Planning

Select an option...

☐ Active Site Visitor
☐ Board of Directors
☐ Committee Member
☐ Speaker for a PHAB Webinar or Presentation
☐ Author for a Publication/Blog Post
☐ Contributor for a Published Story
☐ Other (describe in Additional Information)

PHAB over the past 12 months. Acceptable engagement includes: a staff member that is an active Site Visitor, Board of Director, Committee member, speaker for a PHAB webinar or presentation, author for a published story. The health department will provide the staff member's name and position, select a listed activity, provide the dates of completion, and include

Staff Name	Staff Position	Date Completed	Additional Information

Select an option...
A value is required

PREV NEXT

Bethany Wachter:

Option 5: Participation with PHAB

In this option the health department provides information that indicates the department has had specific engagement with PHAB over the past 12 months.

Acceptable engagement with PHAB includes a staff member that is an active:

- PHAB Site Visitor, Board Director, or Committee member,
- Speaker for a PHAB webinar or presentation,
- Author for a PHAB publication/blog post, or
- Contributor for a published story by PHAB.

To complete this option in e-PHAB the department will provide the staff member's name and position and select the activity that applies. The department will also provide the date the employee engaged in the activity so that it can be verified. **This option is offered each year but can only be selected once during the four Annual Report cycles.**

Since your health department needs to think strategically about what is submitted each year, choosing this option will really not help you as you prepare for reaccreditation. The other available options will benefit your health department MUCH MORE!

Option 6: QI Project Review

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☐ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☒ QI Project Review
- ☐ Reaccreditation Readiness
- ☐ FPHS Capacity and Cost Assessment

[Clear](#)

QI Project Review

Please complete and upload the reaccreditation documentation form for 9.1.3, found in the Learning Center.

or

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REV.
NEXT

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Bethany Wachter:

Option 6: QI Project Review

This option requires the health department to submit documentation of a completed quality improvement project for PHAB review and feedback. To complete this option, the department would upload the documentation form (i.e., cover sheet) for 9.1.3 A and the QI project, such as a completed storyboard, in e-PHAB. PHAB will review them and provide feedback on the use of the coversheet, opportunities for improvement and/or areas of excellence, and a recommendation on using the example for reaccreditation. **This option is available each year.**

Option 7: Reaccreditation Readiness

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☐ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☒ Reaccreditation Readiness
- ☐ FPHS Capacity and Cost Assessment

Clear

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NEXT

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Bethany Wachter:

Option 7: Reaccreditation Readiness Assessment

The agency completes a comprehensive reaccreditation self-assessment in this option. The assessment is intended to support reaccreditation readiness by walking through each reaccreditation measure. It should be completed by a team of staff.

The online Qualtrics tool for the self-assessment is provided by PHAB. **A Word Version Tool that departments can use in planning for the assessment can be found in the PHAB Learning Center.** Following review of the self-assessment tool PHAB staff will host a brief phone call with the department's Accreditation Coordinator to review existing gaps and answer questions about the assessment process.

(Questions about how to interpret certain measures still need to be submitted in e-PHAB to ensure consistent responses are being provided to all health departments.) **This option is offered in the third or fourth Annual Report cycles and is strongly encouraged prior to the department applying for reaccreditation.**

Option 8: FPHS Capacity and Cost Assessment

Please select one Reflection and Learning option from the offerings below.

- ☐ Document Review
- ☐ Domain Reflection Report
- ☐ Foundational Capability Reflection Report
- ☐ Innovation Review
- ☐ Participation with PHAB
- ☐ QI Project Review
- ☐ Rec accreditation Readiness
- ☒ FPHS Capacity and Cost Assessment

Clear

FPHS Capacity and Cost Assessment

Health departments will submit completed Assessment spreadsheets to e-PHAB as an Excel file.

or Choose Existing

<

PREV.

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NEXT

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Bethany Wachter:

Option 8: Foundational Public Health Services (FPHS) Capacity & Cost Assessment

Health departments selecting this option will use the national Foundational Public Health Services (FPHS) Capacity and Cost Assessment tool to assess their role in the governmental public health system and to identify resources needed to transform it. Completion of the tool requires the involvement of both health department finance and program staff. The agency submits the completed spreadsheets through e-PHAB. Information from this assessment can be used to determine how best to allocated resources to meet the need of their jurisdiction and community; consider options to shift resources within the organization; identify opportunities to share resources and/or services; and advocate for funding. **This option is offered in the first, second, and third Annual Report cycles.**

Reflection & Learning Options by Year

REFLECTION & LEARNING OPTION	YR 1	YR 2	YR 3	YR 4
Document Review	✓	✓	✓	✓
Domain Reflection Report	✓	✓	✓	✓
Foundational Capability Report	✓	✓	✓	✓
Quality Improvement (QI) Report	✓	✓	✓	✓
Innovation		✓	✓	
Participation*	✓	✓	✓	✓
Reaccreditation Readiness			✓	✓
FPHS Capacity & Cost Assessment	✓	✓	✓	

* Participation is offered each year but can only be selected once during the four Annual Report cycles.

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Bethany Wachter:

This slide is a handy summary of when you can select the various Reflection & Learning Options.

Health Department Director Attestation Page 1

Annual Report 2025
Zanesville-Muskingum County Health Department

SAVE

Attestation HISTORY On

Director Attestation [HELP](#)

Health Department Director

Date	Name
Add confirmation/attestation	

Progress	Documents	Issues
100%	Updates	
100%	Measures	
100%	Reflection and Learning	
0%	Attestation	

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Bethany Wachter:

Health Department Director Attestation

The final step in the Annual Report submission process must be completed by the Health Commissioner.

Health Department Director Attestation Page 2

Response

Health Department Director

Confirmation

☒ I confirm, as the Health Department Director, that all documents have been reviewed and are accurate for submission.

Please enter today's date

Please type your full name

09

September 2025

Su	Mo	Tu	We	Th	Fr	Sa
31	01	02	03	04	05	06
07	08	09	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	01	02	03	04

DONE

ADD

Cancel

37

Bethany Wachter:

Health Department Director Attestation

They must confirm that they have reviewed all documents and that they are accurate for submission.

Health Department Director Attestation – After Submission

The screenshot shows a web application interface for the 'Annual Report 2025' for 'Zanesville-Muskingum County Health Department'. The main heading is 'Health Department Director Attestation'. Below this, there is a table for the 'Health Department Director' with columns for 'Date' and 'Name'. The table contains one entry: '09/11/2025' and 'Corey Hamilton'. To the right of the table, there is a 'Progress' section with a table showing the completion status of various tasks. The tasks are 'Updates', 'Measures', 'Reflection and Learning', and 'Attestation', all of which are marked as '100%' complete. At the bottom of the screen, there are navigation buttons: 'PREV.', 'NEXT', and 'Unsubmit'. The page number '38' is displayed in the bottom right corner.

Annual Report 2025	
Zanesville-Muskingum County Health Department	
Attestation	
Director Attestation HELP	
Health Department Director	
Date	Name
09/11/2025	Corey Hamilton

Progress	Documents	Issues
100%	Updates	
100%	Measures	
100%	Reflection and Learning	
100%	Attestation	

< PREV. NEXT > Unsubmit

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Bethany Wachter:

Health Department Director Attestation

This screen now shows the name of the Health Commissioner and the date they completed the attestation. It is now ready for submission to PHAB.

Now that we've submitted the Annual Report, I'm going to hand the webinar back to Anne to address what happens next.

What Happens After Submission?

RESPONSE SUMMARY

Annual Report 2025 - INITIAL RESPONSE

Zanesville-Muskingum County Health Department (3161)

SUBMITTED on 09/11/2025

SUMMARY

100%	Updates
100%	Measures
100%	Reflection and Learning
100%	Attestation

Unsubmit

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Anne Goon:

This is a screen shot of what appears on your screen after the Annual Report has been submitted. Note that it says “Submitted”, provides the date of submission, and reflects that all 4 required sections have been fully completed.

What Happens After Submission?

PHAB may:

- ✓ Accept,
- ✓ Request more info, or
- ✓ Refer to Accreditation Committee.

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Anne Goon:

Once submitted in e-PHAB, the health department's Annual Report will be reviewed by PHAB staff. Upon review, PHAB may take any or all of the following actions:

- Accept the Report and provide feedback to the health department about continuing to report on specific measures and/or the Reflections and Learning documentation submitted.
- Engage other public health professionals in reviewing and providing feedback to the department.
- Determine that the department has not demonstrated sufficient progress on measures required for reporting or has circumstances that may impact their ability to continue conformity with the standards. When this occurs, the Annual Report may be referred to the Accreditation Committee.

What Happens After Submission?

Example 1, Page 1

The screenshot shows the 'PHAB Annual Report' header with the PHAB logo. Below it is the 'Documentation Review' section. The 'Documentation Review Feedback' table contains the following information:

Documentation Review Feedback	
Health Department: City of Springdale Health Department	
Reaccreditation Measure: 1.1.1	
Month Review Completed: October 2024	

The 'Documentation Form Recommendations' table contains the following information:

Documentation Form Recommendations	
This Documentation Form could be used for reaccreditation	The Documentation Form was used appropriately, and the required elements were noted clearly within the document.
This Documentation Form should consider this feedback and suggestions before submission	

The 'Summary Comments' section contains the following text:

RD: The CSHD provides the Community Health Assessment 2023 presented to the BOH in September 2024.

a. i. A list of partners that contributed to the CHA is provided and includes academia and CBOs representing non-governmental public health. ii. Representatives from the Foodbank and the Health Gap participated and represent those disproportionately affected by conditions that contribute to poorer health outcomes.

b. The CHA partnership followed the MAPP process to develop the CHA; the staff brainstormed which partners should be invited to participate and the partners were asked to complete a partner survey to illicit information about the partner, a community status assessment and community context assessment were completed, and the steps are listed for how data was reviewed to identify issues.

c. Data is provided within the assessment. i. Primary data includes Windshield survey results, What Health Means to Me survey results, and results from the Forces of Change Survey. ii. Secondary data results include data from the US Census Bureau, Franklin County Public Health, and the USDA.

d. Demographic data is also included in the CHA. i. Race and ethnicity are identified for western and eastern Springdale, with the largest population identified as non-Hispanic White with non-Hispanic African American as the second largest group. ii. Languages spoken at home are listed with English only at 80% and Spanish as the second largest at 11%. iii. Other demographics provided are age, disability, economics, poverty, and national origins.

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Anne Goon:

The City of Springdale Health Department is allowing us to share the PHAB Feedback they received to the Annual Reports they submitted in 2024 and 2025. For 2024, the health department submitted a copy of their Community Health Assessment for Measure 1.1.1, just like they would be submitting it for reaccreditation.

PHAB provided this written feedback to the health department:

1. The Documentation Form (or Cover Sheet, as some of us still call them) was used appropriately and all of the required elements were noted clearly within the documents.
2. They addressed how each required element was addressed.

What Happens After Submission?

Example 1, Page 2

e. A description of the health challenges in the jurisdiction include, i. health status information related to cause of death, noting that there is a positive correlation between gender and cause of death and Caucasians and older adults both have a higher number of deaths. Additional causes of death are reviewed for the African American and Hispanic populations. ii. Health behaviors are reviewed for cigarette use related to cardiovascular disease and it is noted that more African Americans die from smoking related diseases than those that are white. It is also noted that trauma and infant deaths are higher in the Hispanic/Latinx populations; however, it is not clear if this is tied to health behaviors. The assessment also notes that there is a difference in health behaviors comparing the western and eastern portions of Springdale, with greater incidence of smoking and physical inactivity in the eastern census tract.

f. The CHA offers a section related to the social determinants of health with the social vulnerability index noting differences between western and eastern Springdale; the socioeconomic score provides information related to age, disability, HS graduation, poverty level, single parent households, and unemployment comparing the two census tracts.

g. The profiles of the participating organizations are included for those related to access to health care; the services provided by each that can be mobilized to address health challenges are listed.

Recommendation	
x	This example could be used for reaccreditation
	This example should consider the feedback and revise before reaccreditation submission
	This example should be reconsidered

General Reminders

As the health department prepares for reaccreditation, encourage staff to review the Reaccreditation Journey in the Learning Center. If you'd like more staff to have access to the Learning Center, please reach out to EducationServices@phaboard.org.

Other reaccreditation resources that may be helpful:

- [Version 2022 Reaccreditation Measure FAQ \(new!\)](#)
- [PHAB Glossary of Terms](#)
- [PHAB IDEA Glossary of Terms](#)

The health department may consider participating in PHAB's Learning Events, such as the Reaccreditation Documentation Intensive training. For more information: [Learning Events - Public Health Accreditation Board \(phaboard.org\)](#).

For next year's Annual Report, the department is encouraged to select a different Reflection and Learning option. Health departments are strongly encouraged to select the Reaccreditation Readiness Self-Assessment tool in their third or fourth Annual Report prior to reaccreditation.

Anne Goon:

PHAB indicates that this documentation could be used for reaccreditation, and then provides some general reminders re: PHAB resources that may be helpful to the health department as it progresses toward reaccreditation.

What Happens After Submission?

Example 2, Page 1

PHAB Annual Report

Innovation Review

Innovation Review Feedback
 Health Department: City of Springdale Health Department
 Month Review Completed: July 2025

Approvals

☒ The Documentation Form was used appropriately, and the required elements were noted clearly within the document. If not checked, see comments within the "Annual Report Feedback" section. This feedback should be addressed if repackaging this documentation to submit as part of reaccreditation documentation.

☐ This example could be used for reaccreditation - The department should submit this form and the same documentation from the Annual Report within its Reaccreditation Documentation. PHAB has already reviewed and approved of the documentation submitted and will credit the department for this submission within its reaccreditation documentation. Please remember to check that this documentation is still within the required timeframe specified in the Standards & Measures at time of documentation submission.

☒ This example should consider the feedback and revise before reaccreditation submission - The department could submit this form and documentation noting any changes based on the "Annual Report Feedback" section, as part of their reaccreditation documentation. Please use the Documentation Form to indicate what changes were made based on annual report feedback. Please remember to check that this documentation is still within the required timeframe specified in the Standards & Measures at time of documentation submission.

☐ This example should be reconsidered - The department should reconsider documentation and address any gaps/deficiencies noted within the "Annual Report Feedback" section prior to submitting reaccreditation documentation. The documentation may be resubmitted with any changes made based on PHAB's feedback indicated in the Documentation Form, as part of next year's annual report, if the department would like PHAB to re-review.

Summary Comment

This year's report reflects the department's collaborative efforts to facilitate interaction, information sharing, and membership through the formation of a regional Accreditation Coordinators learning community in Southwest Ohio. The department demonstrated superb leadership by working with the Brown County Health Department to support other local health departments at varying stages in the accreditation process. These efforts not only address meeting a need to achieve accreditation (based on state requirements), but also support advancing public health practice by building a stronger public health infrastructure by working across each of the 10 Essential Public Health Services and Foundational Public Health Services frameworks.

The department should be incredibly proud of its proactive approach and allocation of resources to support peer learning and information exchange. While PHAB works closely with the Ohio Department of Health (ODH) and other partners, such as the Public Health Services Council of Ohio to facilitate state-wide learning communities, please do not hesitate to reach out to us at askPHAB@phaboard.org if there are materials or information that would support the Southwest Ohio learning community.

PHAB staff conducted a review of conformity with the Standards & Measures for Reaccreditation, Version 2022, Measure 9.2.2.A. While the narrative addresses aspects of fostering innovation skills,

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Anne Goon:

For 2025, the City of Springdale chose to submit an Innovation Example for the Reflection & Learning component of their Annual Report. Here is the feedback that PHAB provided to the health Department.

PHAB indicates :

- 1) The documentation form has been used appropriately and the required elements are clearly identified within the document.
- 2) While noting that the department should be incredibly proud of its proactive approach and allocation of resources to support peer learning and information exchange through its collaborative efforts to establish a regional Accreditation Learning Community in SW Ohio, PHAB encourages the health department to consider its feedback and make revisions before submitting it for reaccreditation.

What Happens After Submission?

Example 2, Page 2

practices, or processes, such as brainstorming that may have occurred during the initial formation of the learning community, it is unclear how those efforts fostered growth among the internal staff. It also appears, based on the description provided, that the narrative focuses on a process/product (the learning community) the department considers to be innovative rather than efforts to foster skills.

As the department prepares documentation for reaccreditation, it might consider incorporating use of specific innovative processes that were used during the planning process, such as design thinking to tackle problems, encouraging staff to develop prototypes to test new ideas, demonstrating leadership commitment to creativity in the application of innovation concepts and an understanding that failure may be part of the innovation process, or collaborating with teams for co-production. The department could also highlight if training has been provided to staff (internally) on innovation topics (see below for a list of free resources, including on-demand courses).

Innovation Resources

The following resources can be used to help foster a culture of innovation:

- PHAB's definition of public health innovation: <https://phaboard.org/center-for-innovation/public-health-innovation/>
- PHAB Learning Center - What is Innovation: <https://phab.bridgeapp.com/learner/courses/2dd38bf0/enroll>
- PHAB Learning Center - Innovation & Design Thinking in Public Health: <https://phab.bridgeapp.com/learner/courses/7a05d5a8/enroll>
- PHAB Learning Center - Design Thinking: An Introduction: <https://phab.bridgeapp.com/learner/courses/02b64c82/enroll>
- Annual Report Innovation Reflection: How to Describe an Innovation Process - Public Health Accreditation Board (phaboard.org) - while this is focused as a tool for the Annual Report, the content applies to reaccreditation as well.

General Reminders

As the health department prepares for reaccreditation, encourage staff to review the Reaccreditation Journey in the Learning Center. If you'd like more staff to have access to the Learning Center, please reach out to EducationServices@phaboard.org.

Other reaccreditation resources that may be helpful:

- [Version 2022 Reaccreditation Measure FAQ \(new!\)](#)
- [PHAB Glossary of Terms](#)

The health department may consider participating in PHAB's Learning Events, such as the Reaccreditation Documentation Intensive training. For more information: [Learning Events - Public Health Accreditation Board \(phaboard.org\)](#).

For next year's Annual Report, the department is encouraged to select a different Reflection and Learning option. Health departments are **strongly encouraged** to select the Reaccreditation Readiness Self-Assessment tool in their third or fourth Annual Report prior to reaccreditation.

Anne Goon:

PHAB notes that Measure 9.2.2 requires the health department to show how it fosters growth among the internal staff and builds innovation skills. PHAB provides suggestions for strengthening this example and provides examples of helpful resources. The same general reminders are then provided at the end of the document, just like the 2024 Annual Report.

What Happens After Submission?

PHAB may:

- ✓ Request more info, or
- ✓ Refer to Accreditation Committee.

Failure to submit → Refer to Accreditation Committee → Accreditation at risk

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Anne Goon:

If the department submits an incomplete report with too little information, the department will be asked to resubmit a complete report or the report submitted may be referred to the Accreditation Committee. The Accreditation Committee may:

- Decide to take no action.
- Ask the health department for additional information.
- Require another site visit.
- Revoke accreditation.

If the Annual Report is not received by PHAB more than three months past the original due date, or a health department does not respond to the Accreditation Committee's request for further information, the health department's accreditation status will be reviewed by the Accreditation Committee. The committee will make a decision to continue or revoke the department's accreditation status.

Tips for Annual Report Success

- Start early – plan year-round.
- Choose Reflection options intentionally.
- Use the “PHAB Annual Report” document for guidance..
- Engage a team – NOT one person’s job.



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Anne Goon:

Here are a few tips for success to consider:

- Preparation for the Annual Report should be continuous. It's never too early to begin planning for your next Annual Report submission.
- As you choose your Reflection and Learning option each year, pick what will best suit where the health department is in its accreditation journey.
- Use the “PHAB Annual Report Overview & Process” document to help you remember what to do in each section within e-PHAB.
- Identify when the Annual Report is due and communicate this date with staff involved in submission.
- Pay attention to what the department must report on as you develop your work plan to complete the report.
- The Annual Report should be completed by a team, not any one individual.

Annual Report Resources & Support

[Annual Report Overview & Process March 2025.pdf](#)

[Annual-Report-Help-Sheet-for-AC-and-HDD.pdf](#)

[Domain Reflection Report Template.docx](#)

[Foundational Capabilities Reflection Report Template.docx](#)

[Innovation Guidance 2025.pdf](#)

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Anne Goon:

PHAB has many resources related to the Annual Report and how to submit it in e-PHAB. We will be providing a list of these resources on the PHSCO and OPHI website with the slides of this presentation.

Navigating e-PHAB

[Navigating e-PHAB in Readiness-and-Assessment-Year.pdf](#)

E-PHAB User Help Sheets found at [Resources - Public Health Accreditation Board](#)

Contact: askPHAB@phaboard.org

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Anne Goon:

PHAB has also developed several help sheets to assist you in navigating e-PHAB as it pertains to the Annual Report process.

In addition to these resources, PHAB staff are happy to answer any questions you may have about the Annual Report. Please contact askPHAB@phaboard.org for any Annual Report questions.

Please note that you only have access to the Annual Report instrument during the quarter in which it's due.

Q & A Time

This is our time to help each other succeed!



- What are your questions or concerns about the Annual Reporting process?
- What strategies have you found helpful to ensure the work doesn't land on one person's shoulders?
- How have you decided which option to select for Yr 1, 2, 3, and 4?

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Anne Goon:

We encourage you to unmute yourselves for this section of the webinar....*ad lib!*



Thank you for attending today's webinar!

A copy of the slides and resource lists will be available on the OPHI and PHSCO websites

www.ophi.org www.phsco.org

For more information about the Accreditation Learning Community, contact Anne Goon at

director@phsco.org; (419) 553-4316.

Anne Goon:

Ad lib