


Appendix B



Accreditation Quality Improvement Survey Results

All Respondents

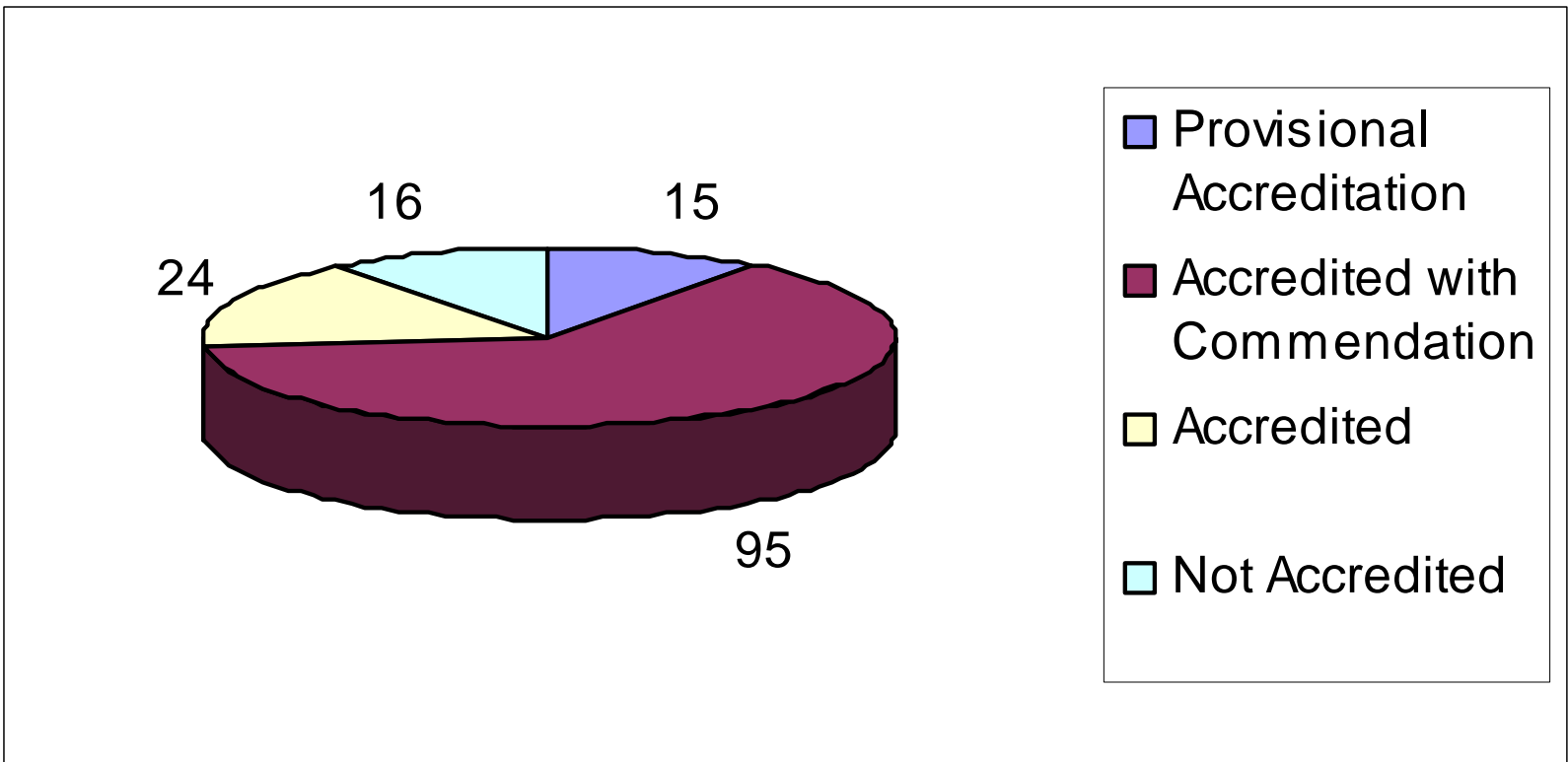
December 2003



Legend & Layout

- Depicted are responses that were answered using a 5-point Likert Scale
- SA & IA represent 'Strongly Agree' and 'Inclined to Agree'
- Neither represents 'Neither Agree nor Disagree'
- SD & ID represent 'Strongly Disagree' and 'Inclined to Disagree'
- Slides follow order of on-line survey

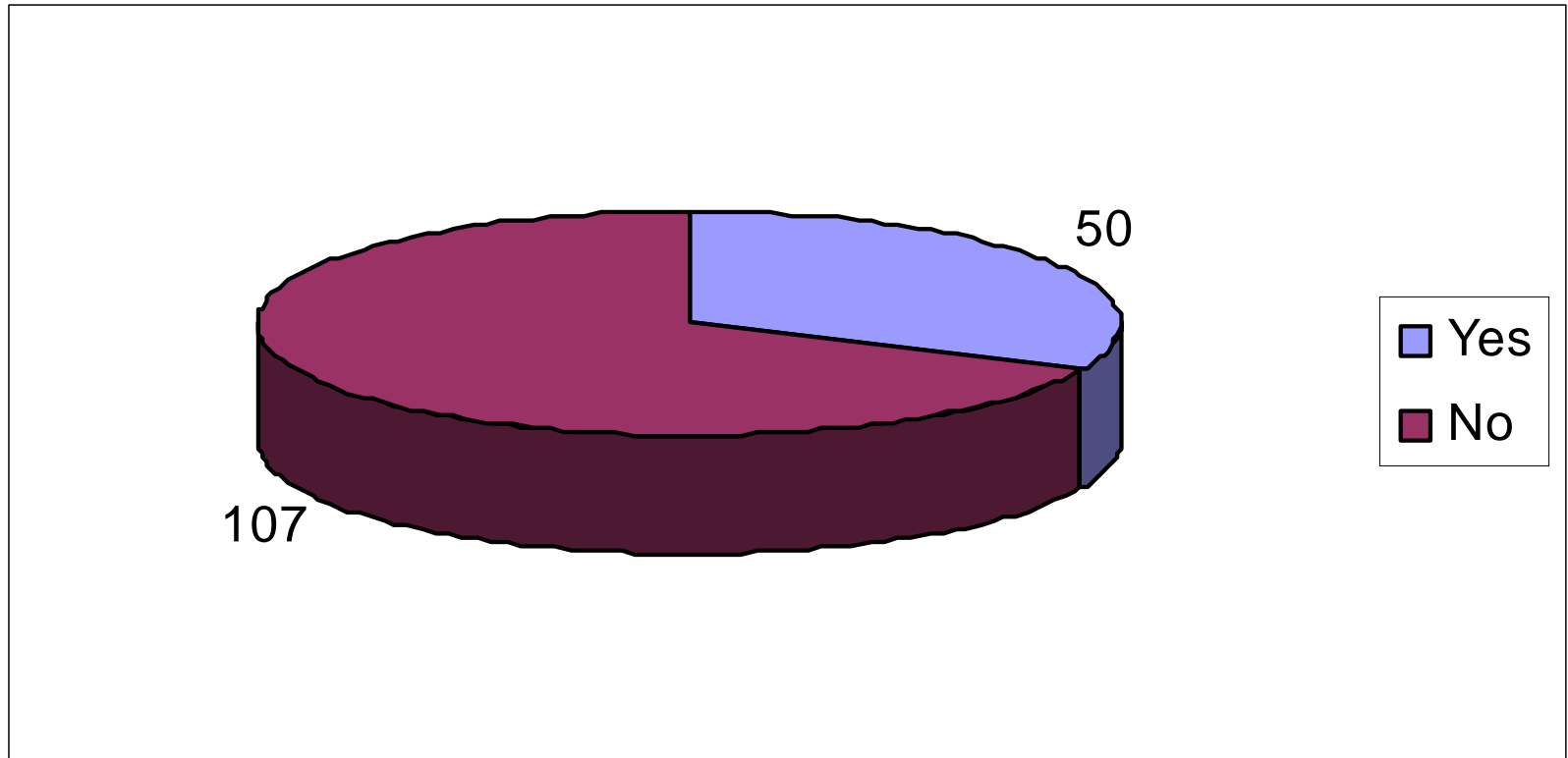
Demog1: If you represent a LPHD, what is your accreditation status?



N = 150, 30 'no responses'

Provisional Accreditation = 15, Accredited with Commendation = 95,
Accredited = 24, Not Accredited = 16

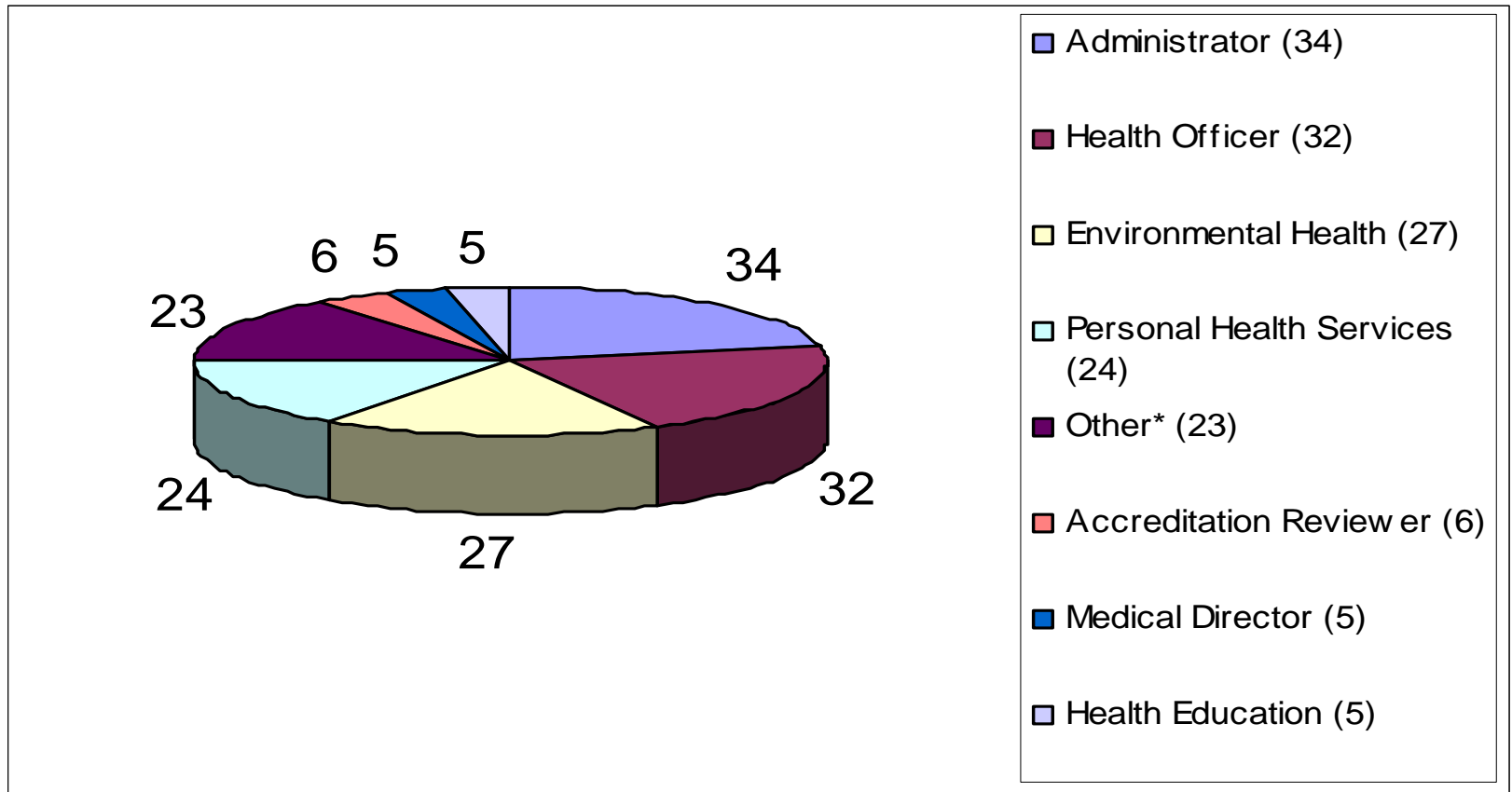
Demog2: If you represent a LPHD, has your health department completed Cycle 2?



N = 157, 23 'no responses'

Yes = 50, No = 107

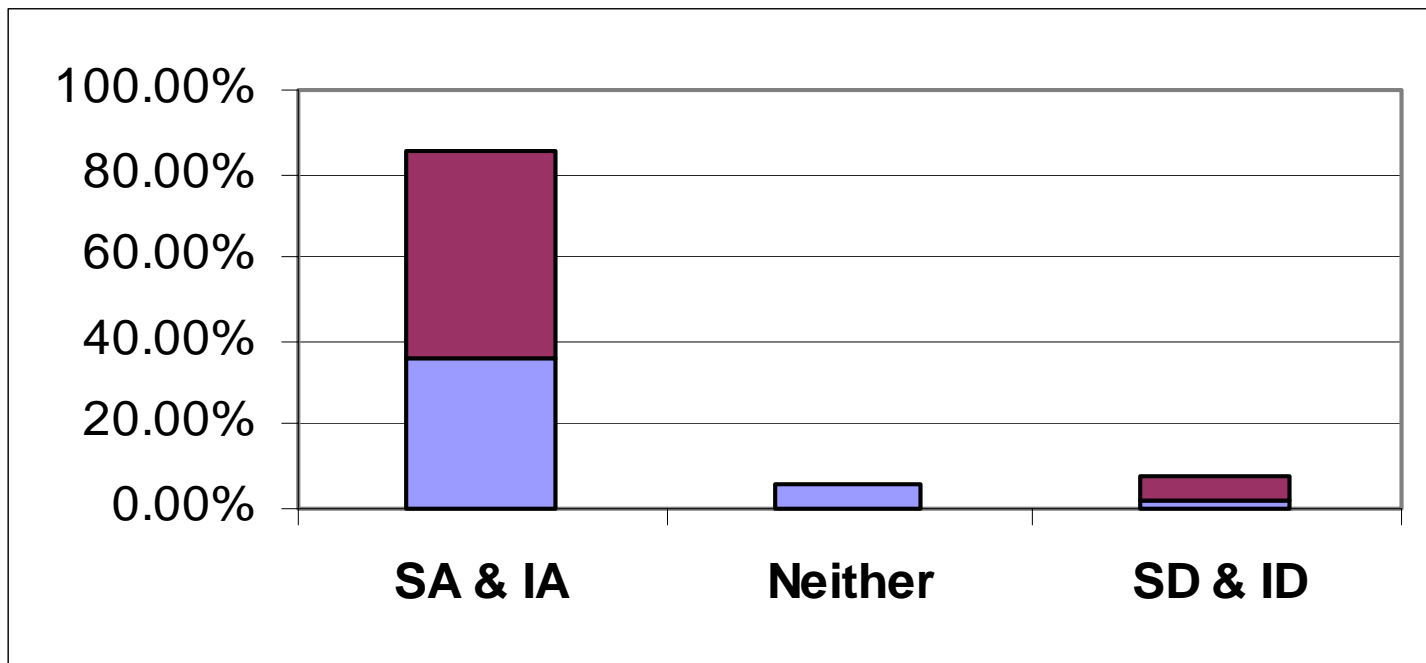
Demog3: Primary Area of Job Responsibility- All Respondents



N = 156, 24 'no responses'

* Other included: Finance, IT, and Planner

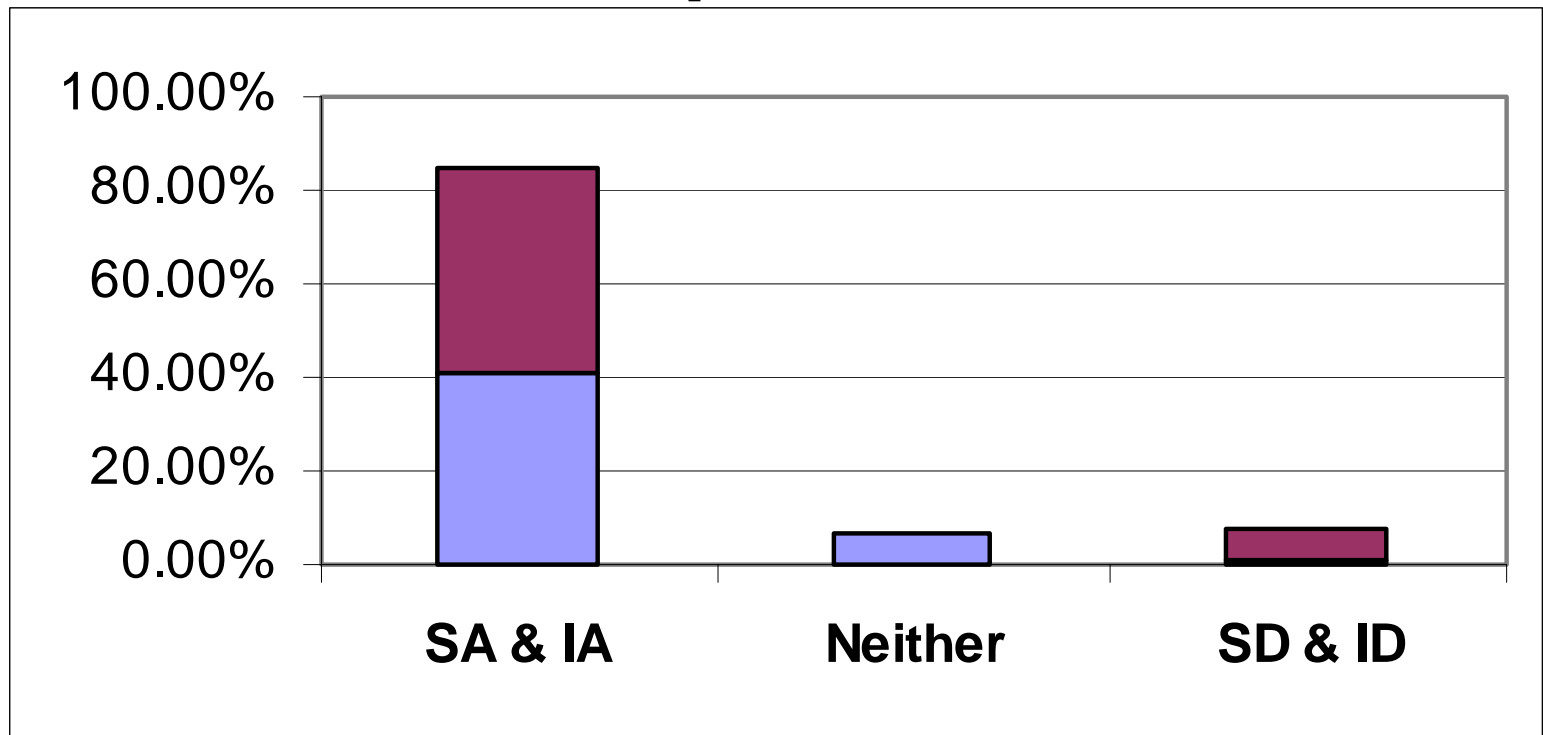
SA1: Self Assessment Useful Tool for Identifying Areas Needing Improvement- **All Respondents**



N = 179, 1 'no response'

SA = 65, IA = 89, Neither = 11, ID = 11, SD = 3

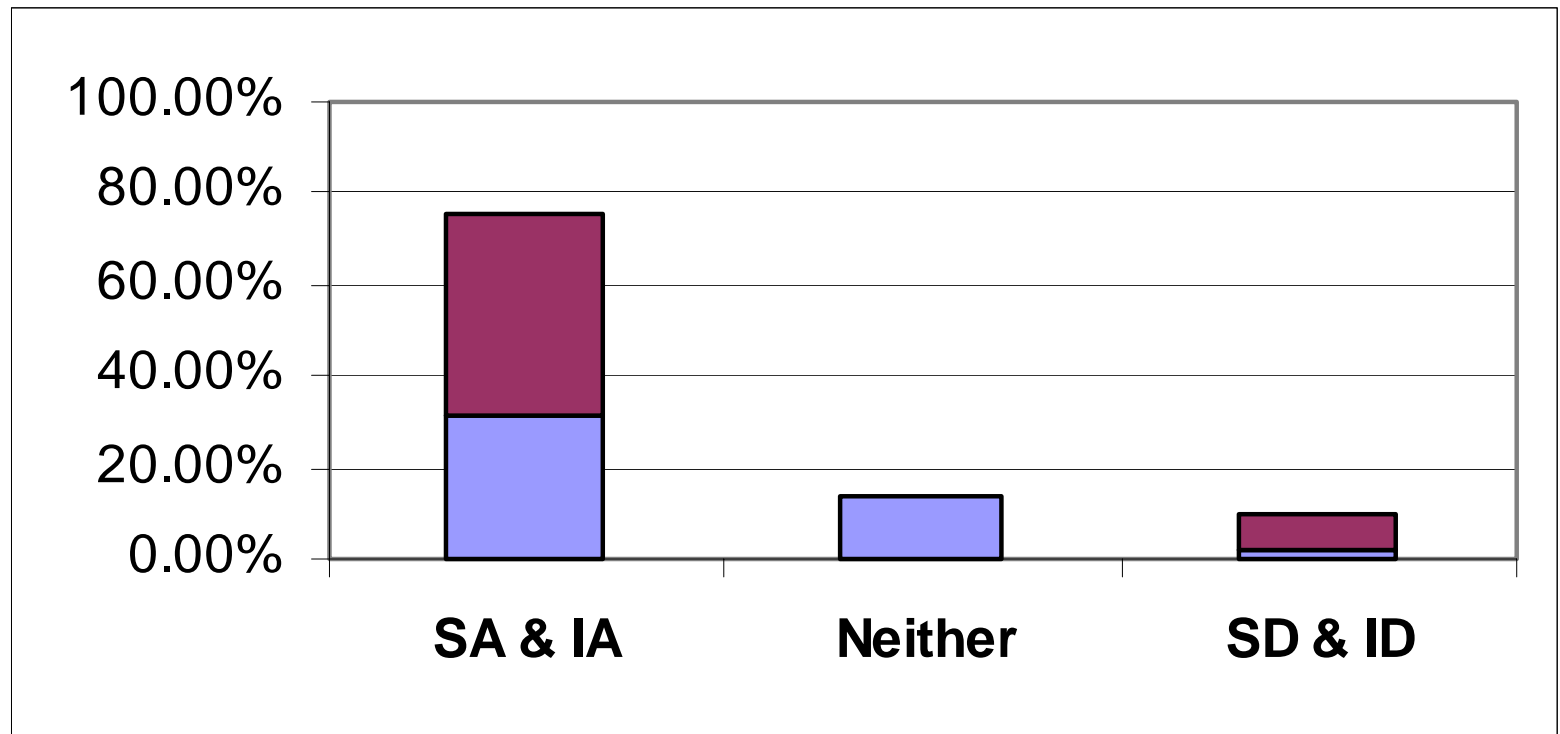
SA2: Self Assessment Process Useful in Preparing for On-site Review- All Respondents



N = 178, 2 'no responses'

SA = 78, IA = 74, Neither = 12, ID = 12, SD = 2

SA3: Self Assessment Process is Catalyst for Pre-review Consultation- All Respondents

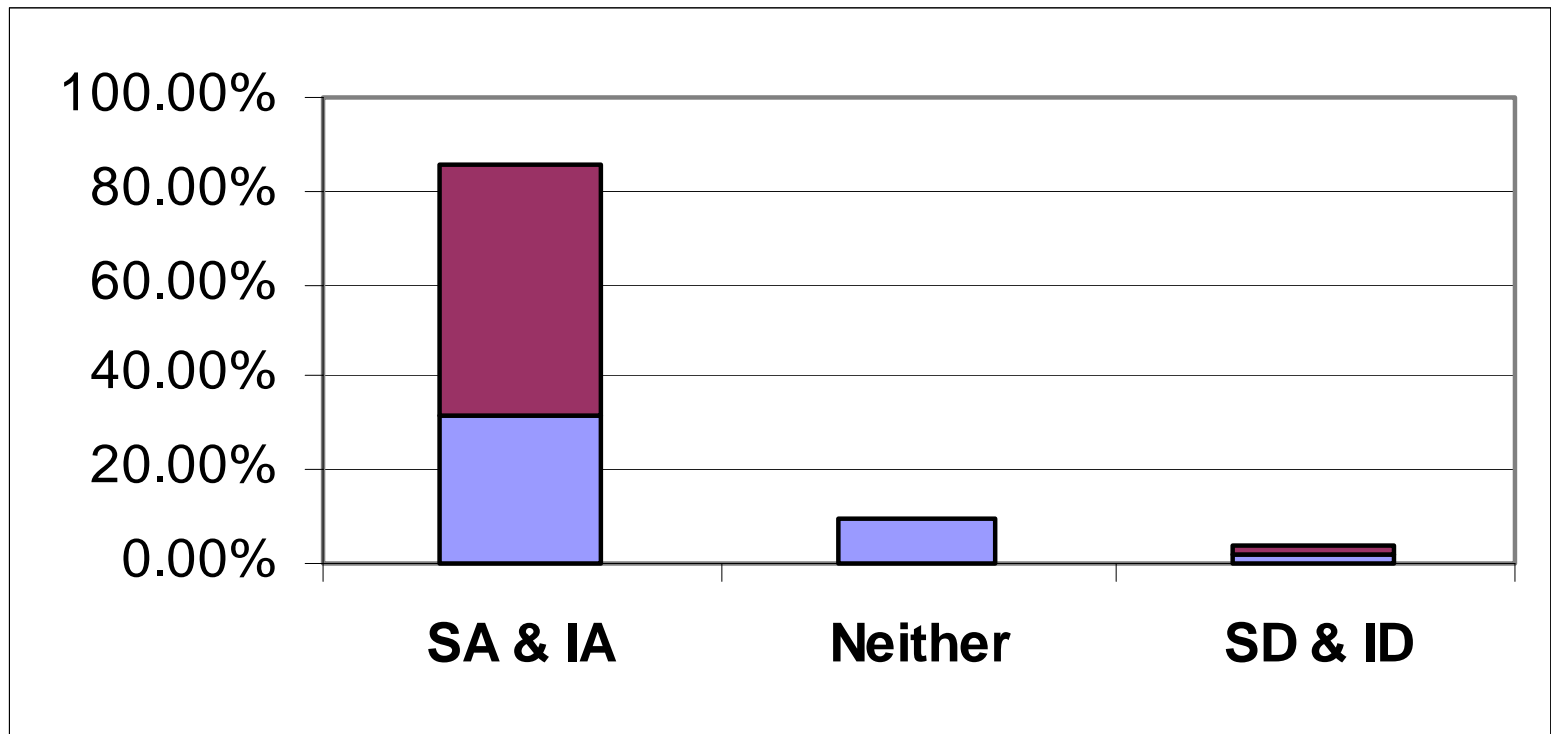


N = 179, 1 'no response'

SA = 56, IA = 80, Neither = 25, ID = 14, SD = 4

OSR1: On-site Review Can Be Improved by LPHD Evaluation of State Agency Reviewers

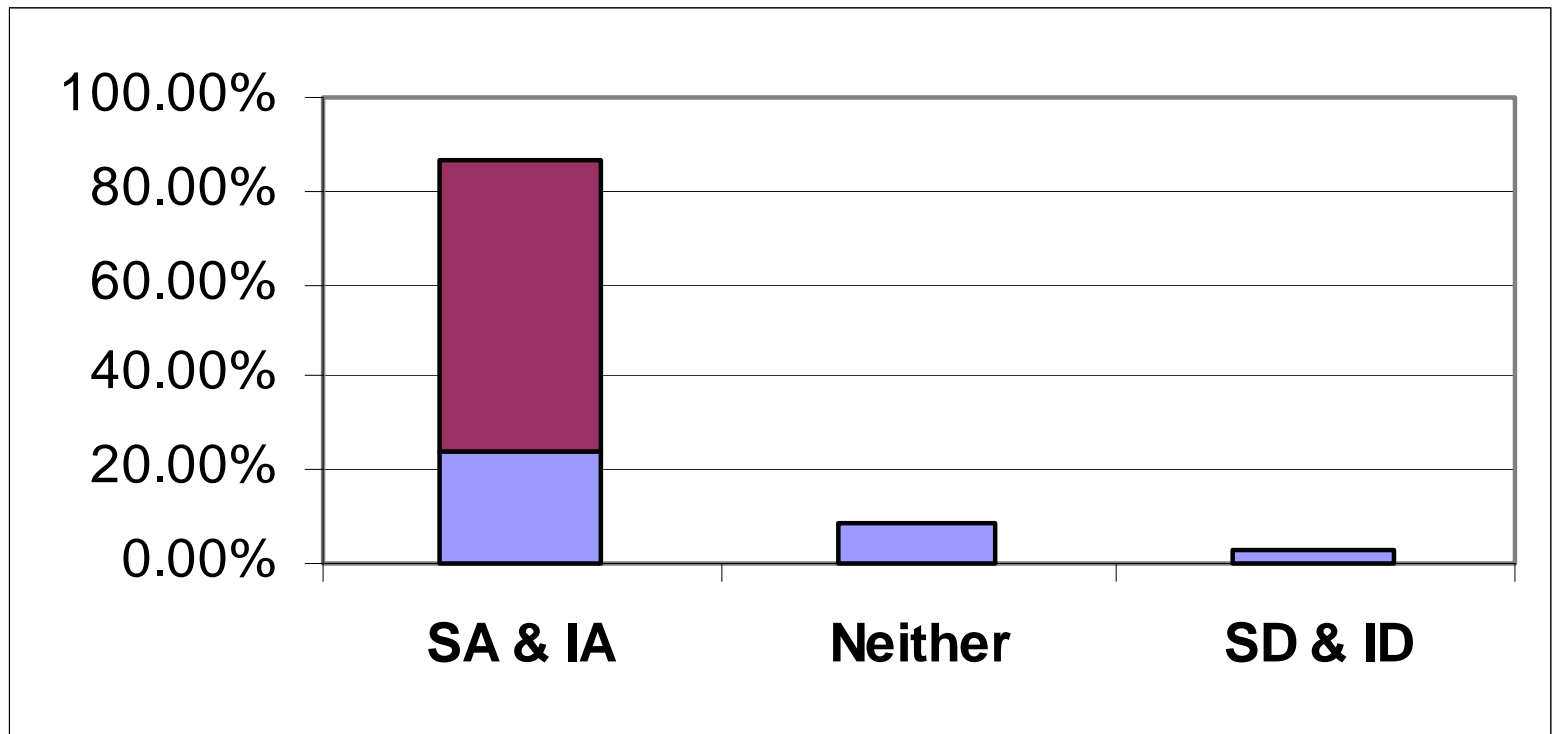
All Respondents



N = 178, 2 'no responses'

SA = 97, IA = 57, Neither = 17, ID = 4, SD = 3

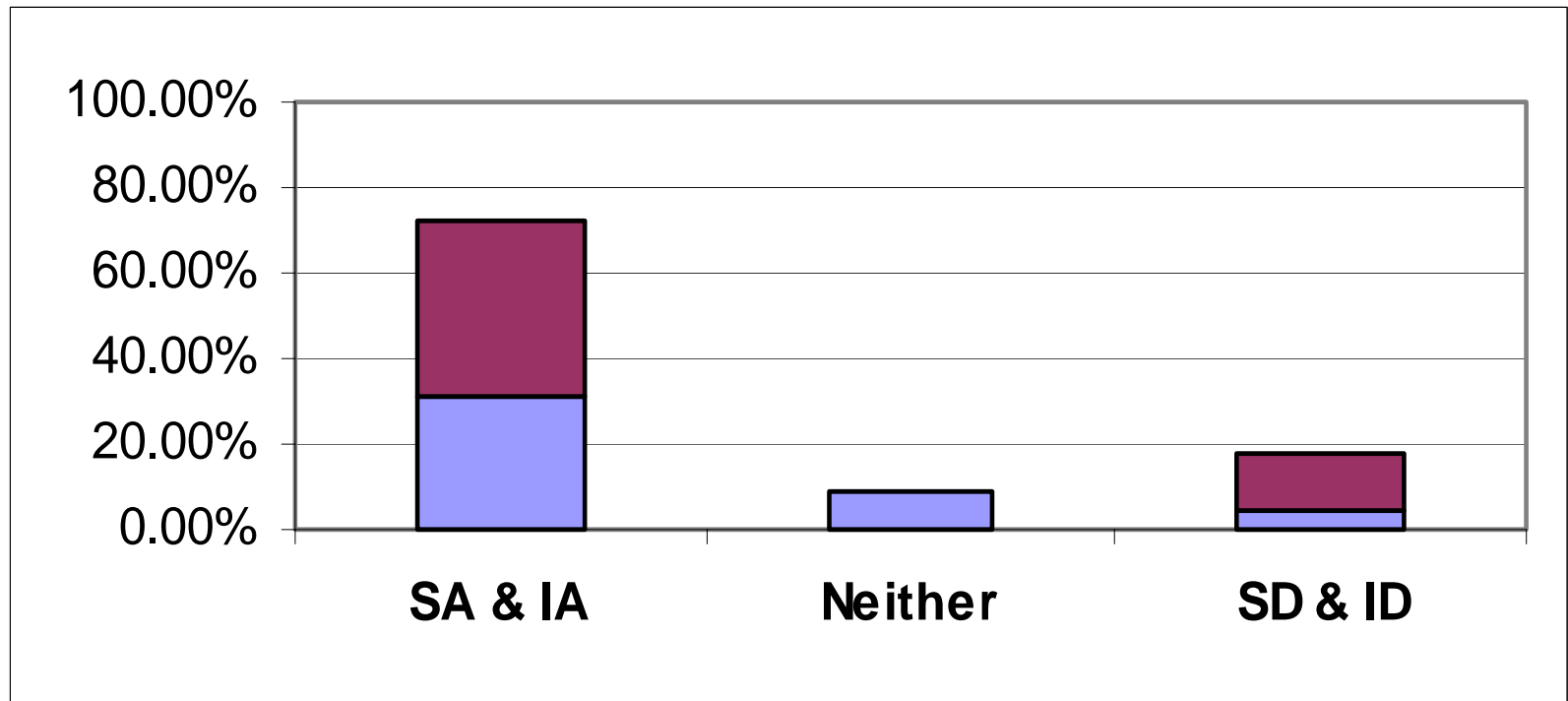
OSR2: On-site Review Process Can Be Improved By Increasing Exit Interviews- **All Respondents**



N = 177, 3 'no responses'

SD= 112, IA = 44, Neither = 15, ID = 6, SD = 0

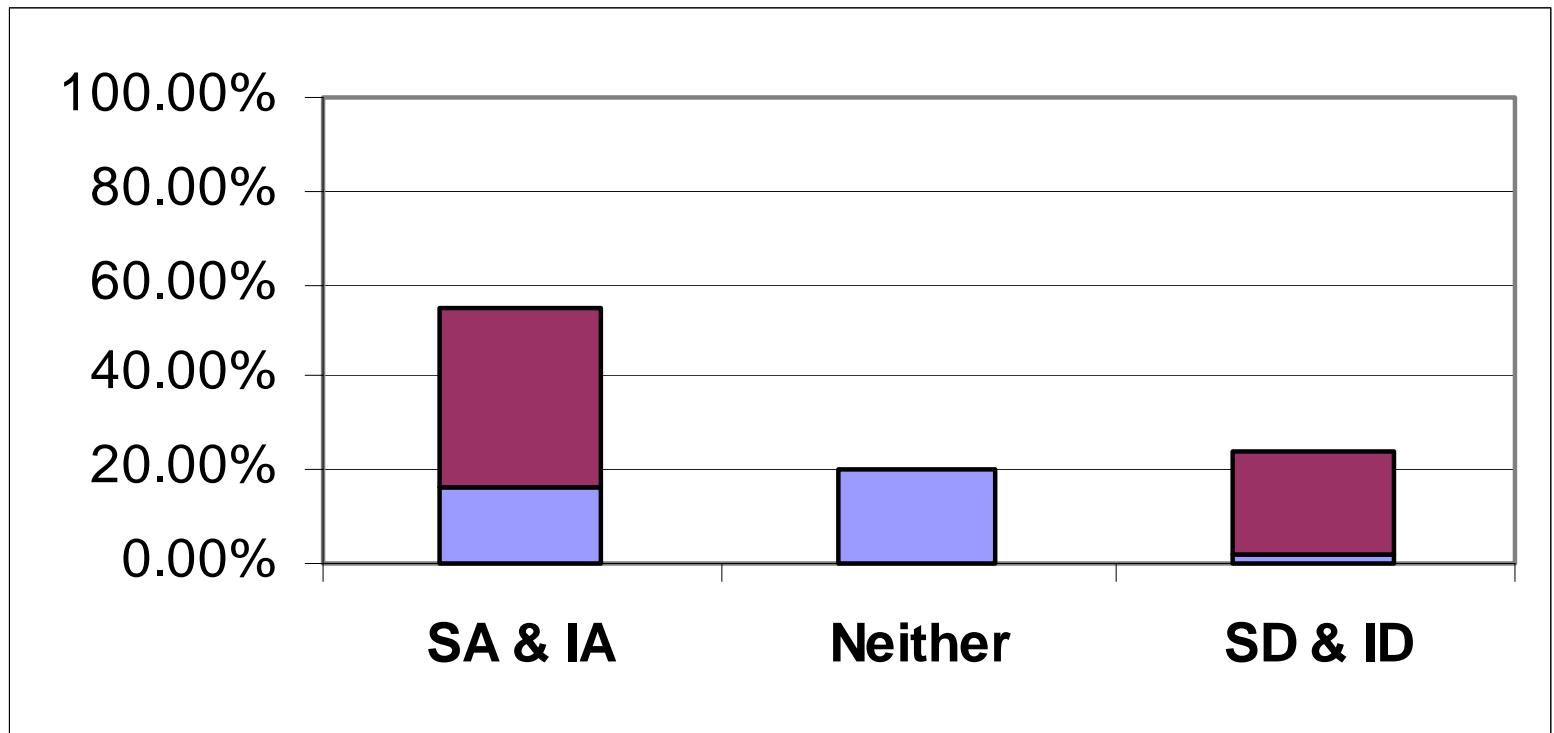
OSR3: On-site Review is Opportunity for Constructive Program Related Dialogue- All Respondents



N = 177, 3 'no responses'

SA = 74, IA = 55, Neither = 16, ID = 25, SD = 7

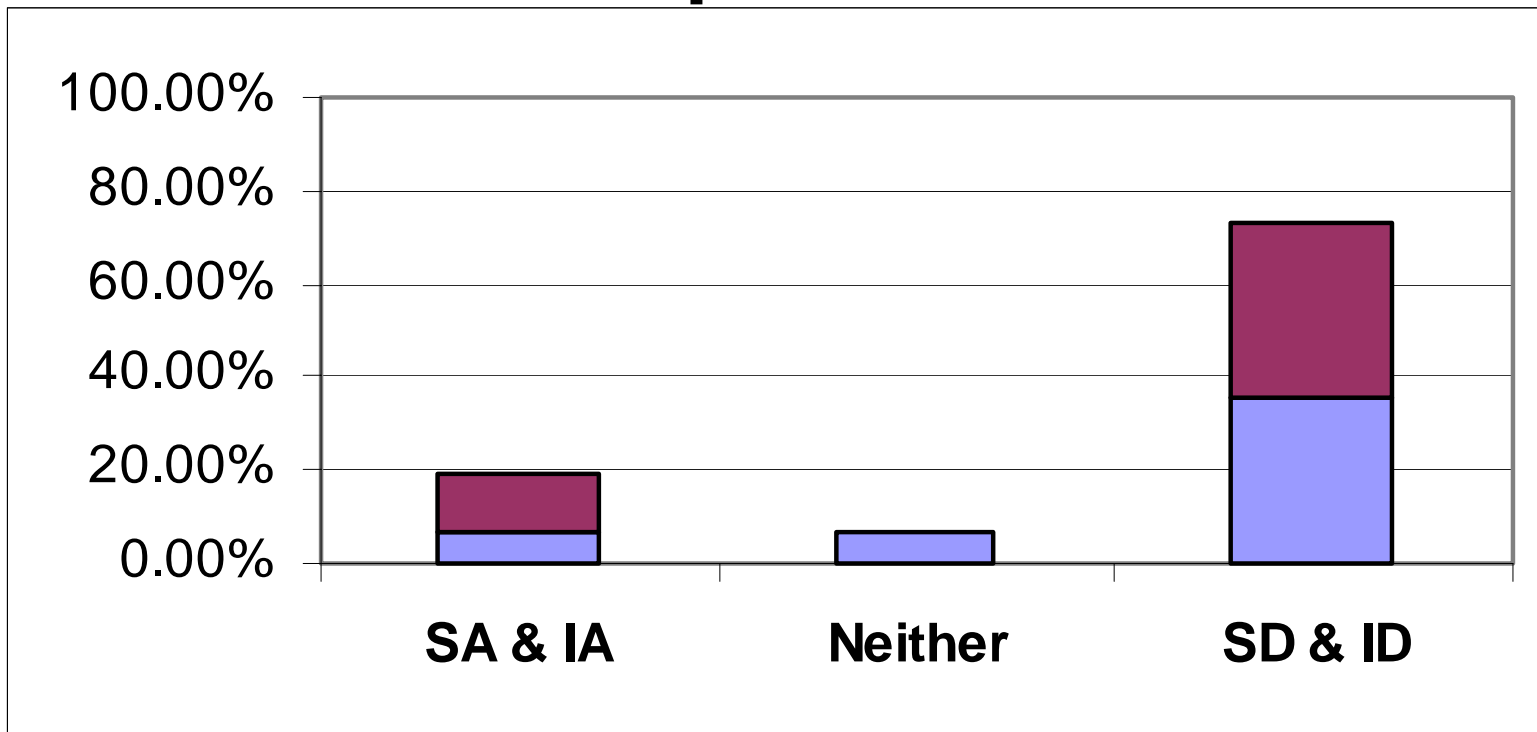
OSR4: Program Reviewers Have Good Understanding of Accreditation Standards- All Respondents



N = 179, 1 'no response'

SA = 30, IA = 69, Neither = 36, ID = 40, SD = 4

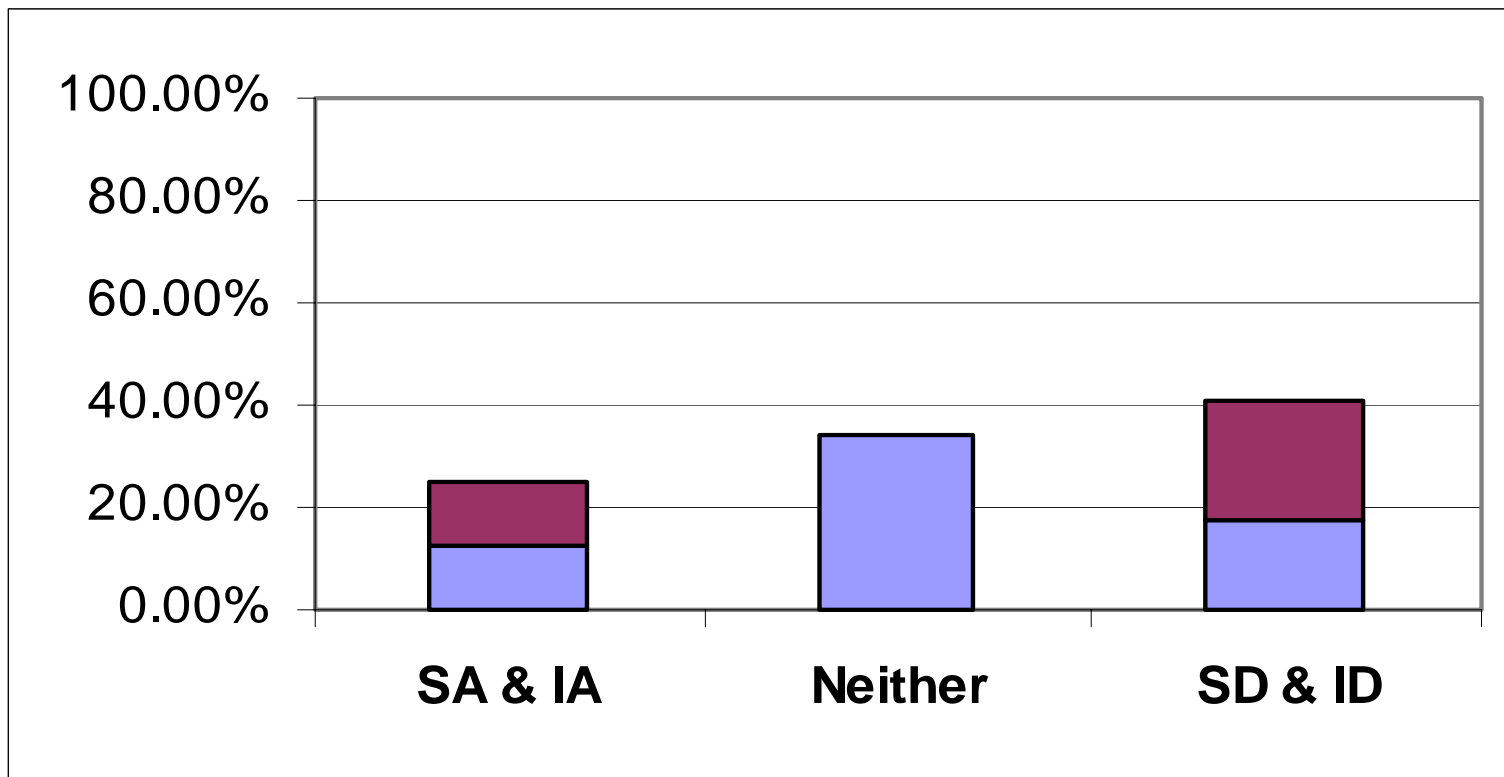
OSR5: All Reviewers Apply Accreditation Standards the Same Way- **All Respondents**



N = 179, 1 'no response'

SA = 13, IA = 21, Neither = 13, ID = 68, SD = 64

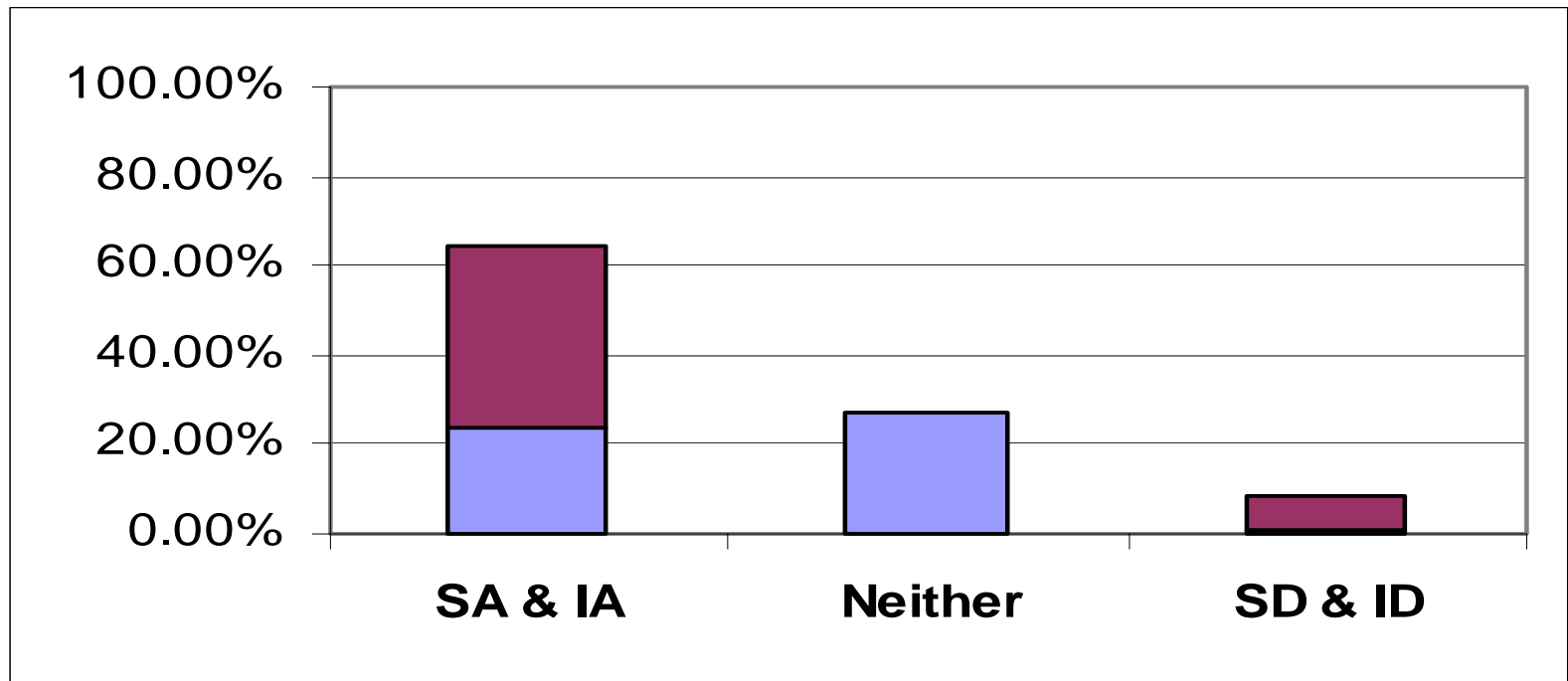
OSR6: Same Program Reviewer Applies Accreditation Standard Same Way at Each LPHD- **All Respondents**



N = 179, 1 'no response'

SA = 22, IA = 23, Neither = 61, ID = 42, SD = 31

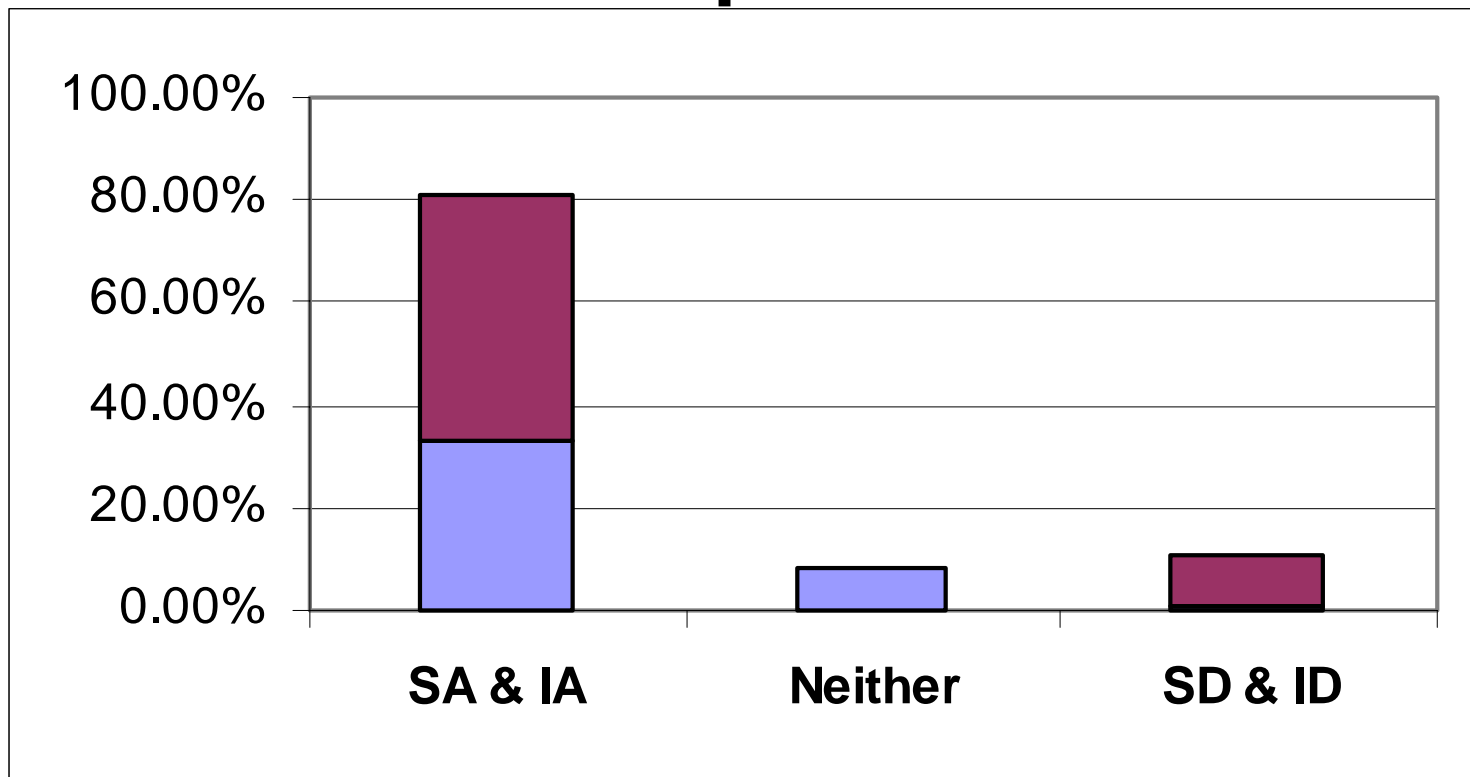
OSR7: Presence of Program Specific Peer Reviewer Would Improve On-Site Review Process- All Respondents



N = 179, 1 'no response'

SA = 43, IA = 73, Neither = 48, ID = 13, SD = 2

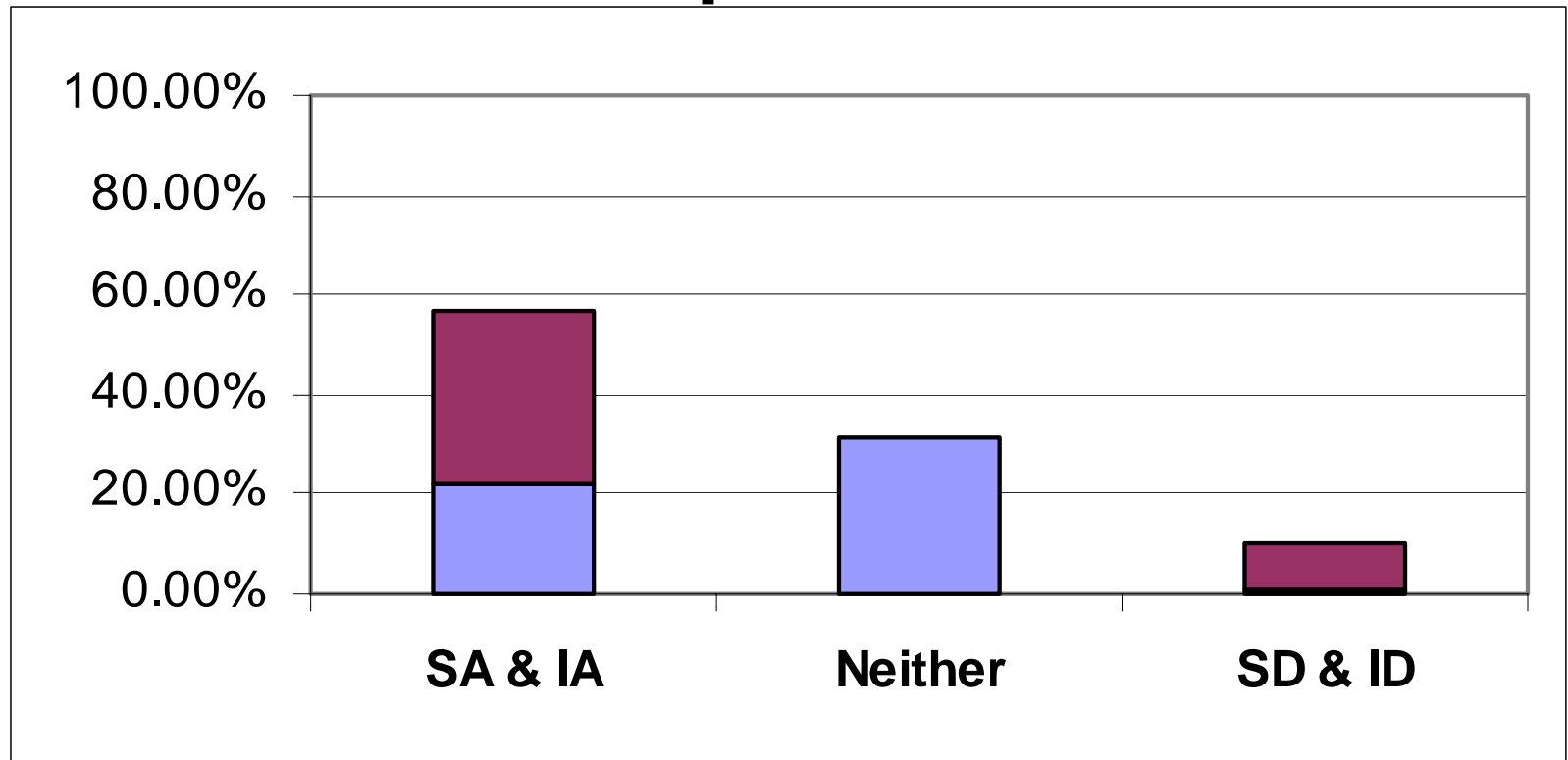
OSSR1: On-site Review Report Assists the LPHD As a Tool for Performance Improvement- **All Respondents**



N = 179, 1 'no response'

SA = 59, IA = 86, Neither = 15, ID = 18, SD = 1

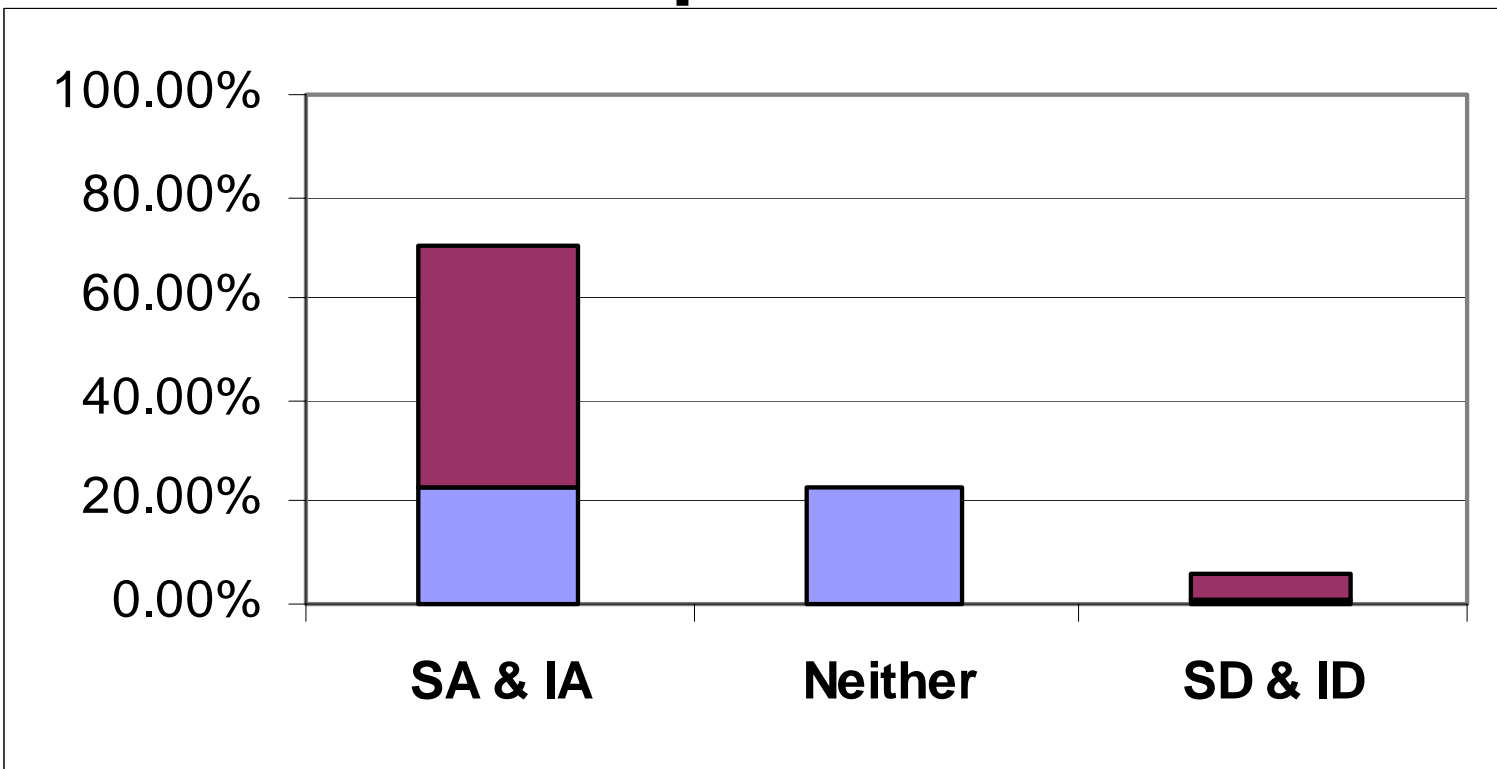
OSSR2: On-site Review Report Would Be Improved By More Use of Special Recognition Section- **All Respondents**



N = 178, 2 'no responses'

SA = 39, IA = 63, Neither = 57, ID = 17, SD = 2

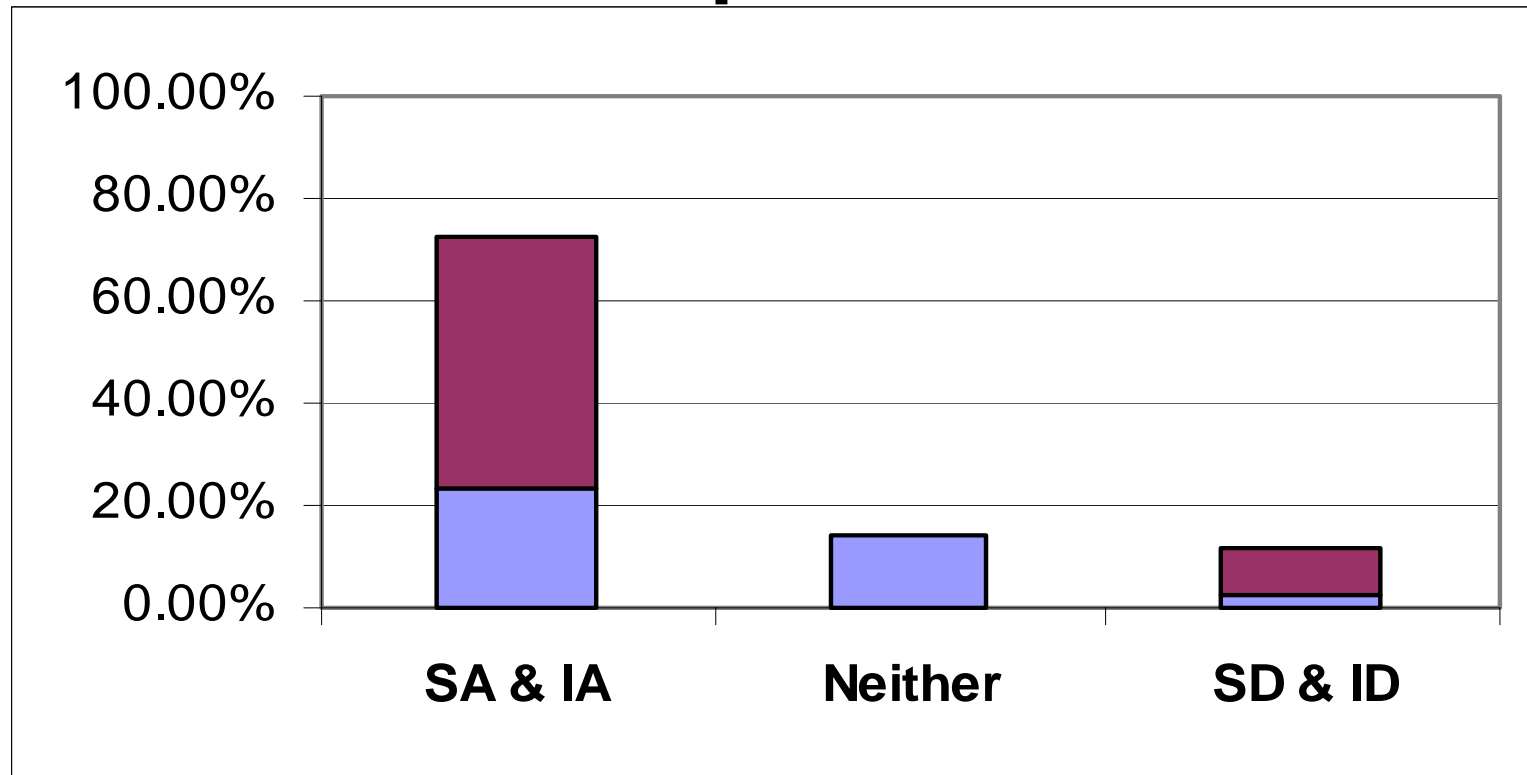
OSSR3: On-site Review Report Would Be Improved By More Use of Recommendations for Improvement Section- **All Respondents**



N = 178, 2 'no response'

SA = 42, IA = 84, Neither = 41, ID = 10, SD = 1

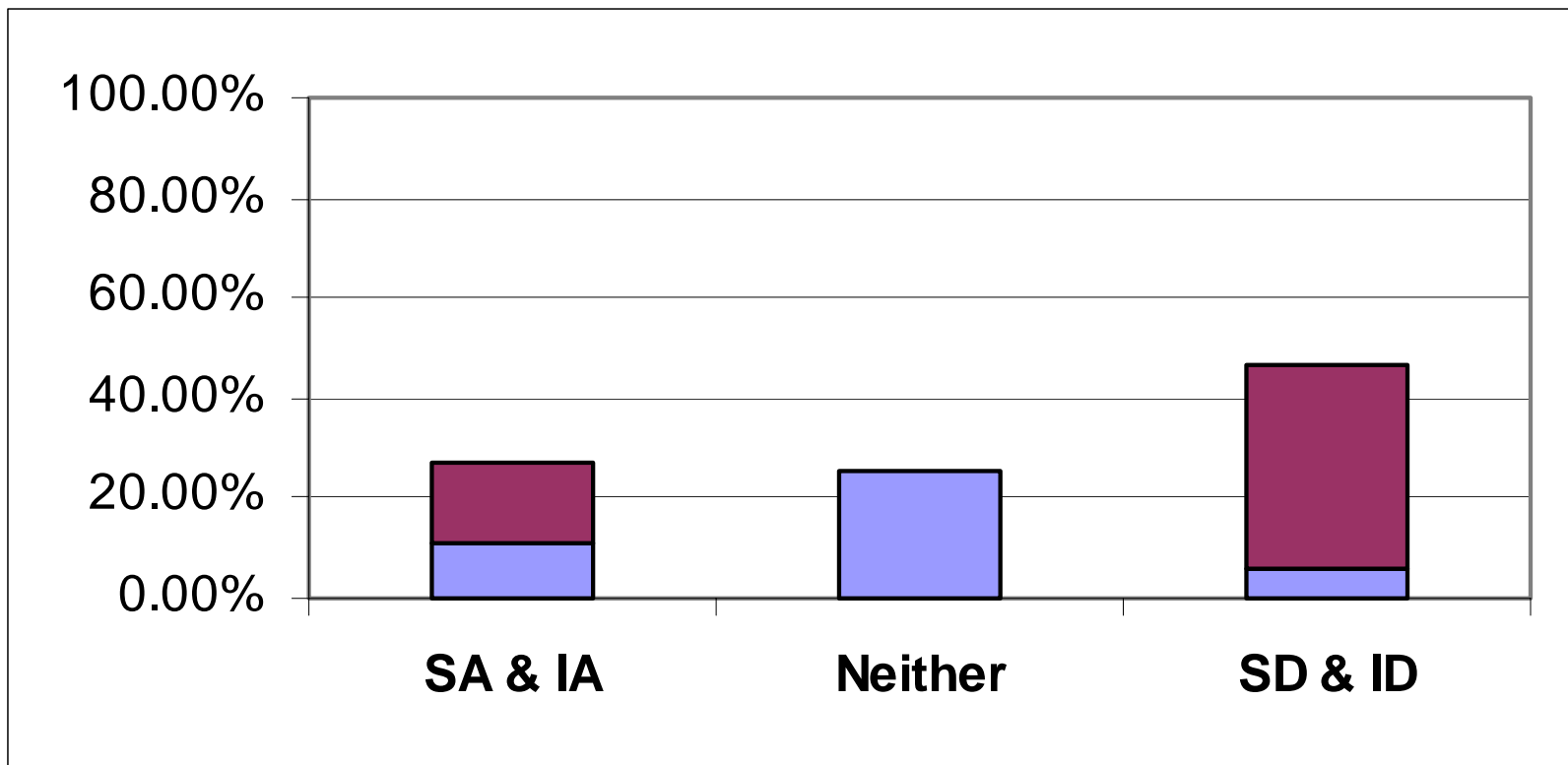
CPA1: Correction Plan of Action Serves As Useful Mechanism for Continuous Improvement- **All Respondents**



N = 179, 2 'no responses'

SA = 42, IA = 89, Neither = 26, ID = 16, SD = 5

CPA2: CPA Process Can Best Be Improved By a Shorter Time Frame for Implementation- All Respondents

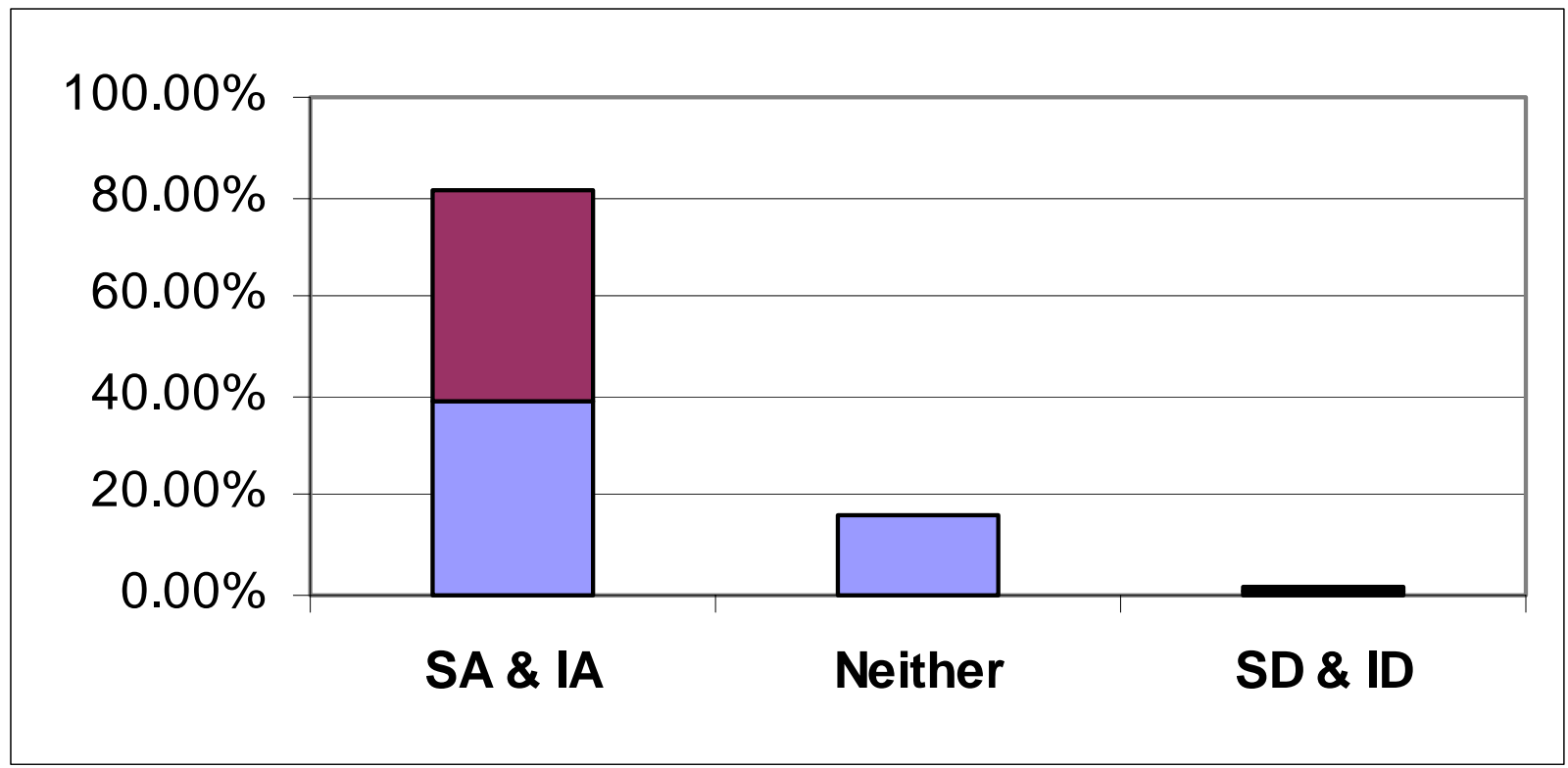


N = 178, 2 'no responses'

SA = 19, IA = 29, Neither = 46, ID = 74, SD = 10



CPA3: CPA Process Would Benefit From Improved Communication Between Program Reviewers and LPHD Staff- **All Respondents**

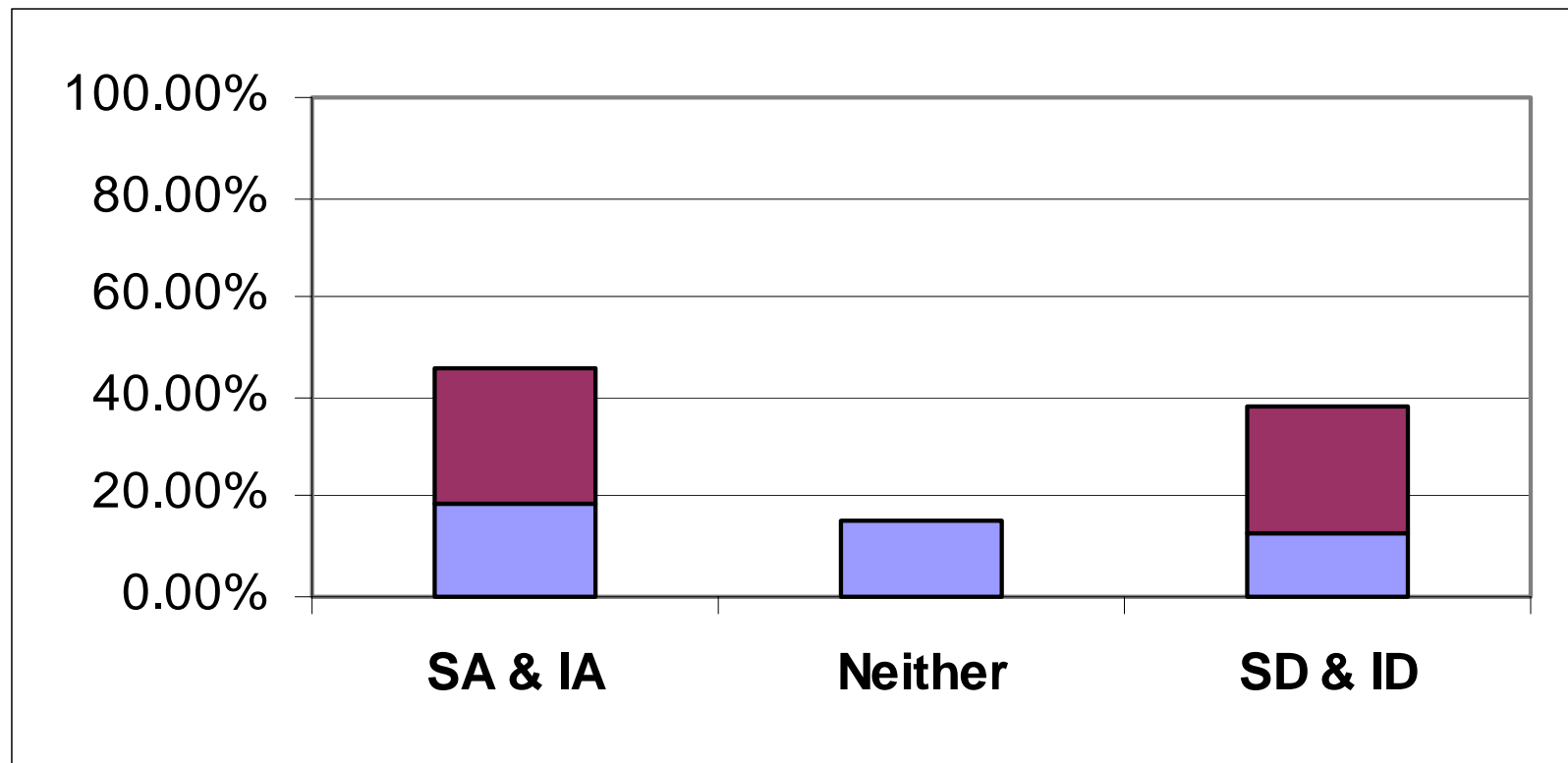


N = 179, 1 'no response'

SA = 76, IA = 71, Neither = 29, ID = 1, SD = 2



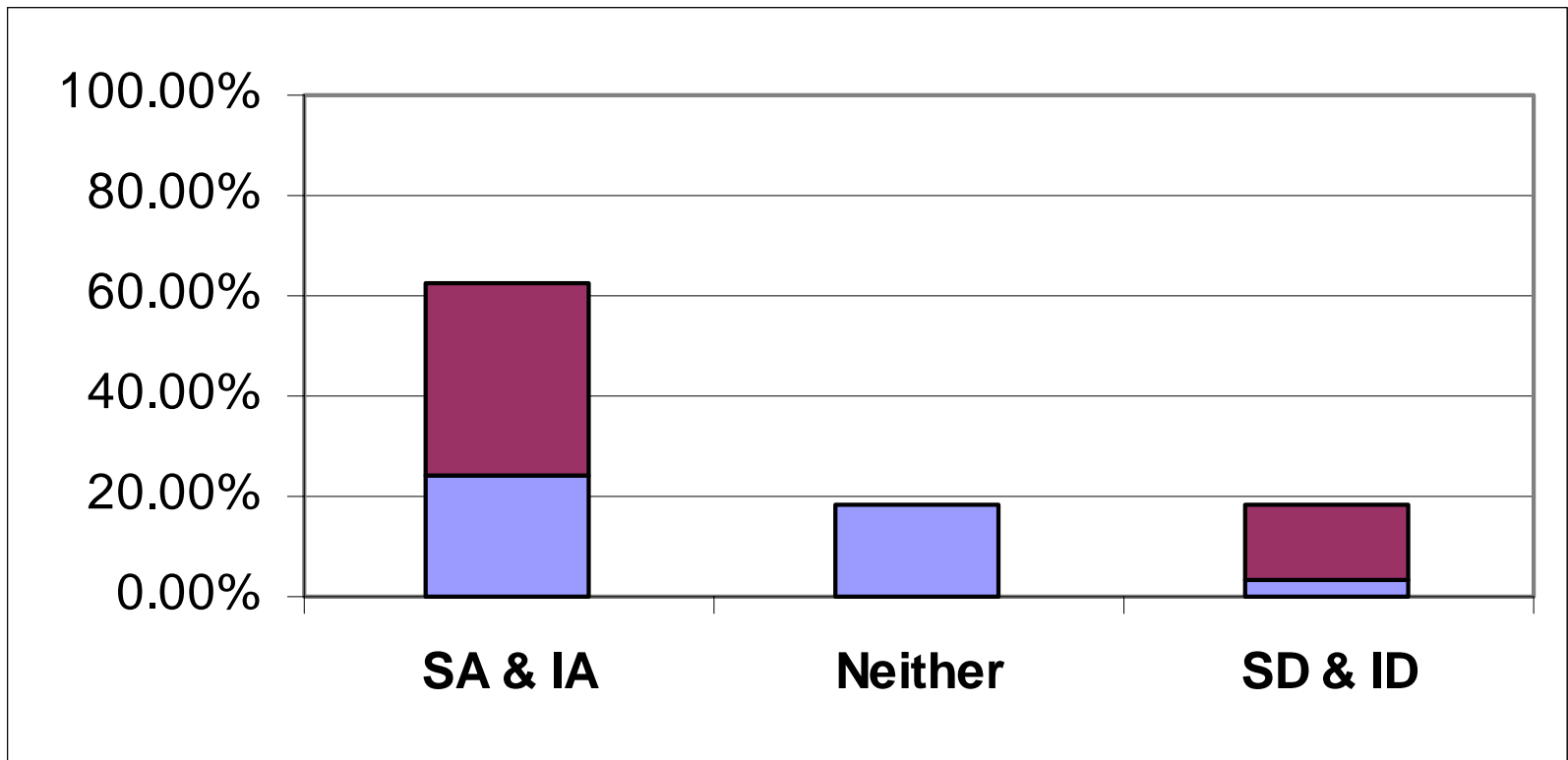
Tool1: Accreditation Tool Should Focus More on Achievable Optimal Performance Standards- **All Respondents**



N = 178, 2 'no response'

SA = 33, IA = 49, Neither = 27, ID = 46, SD = 23

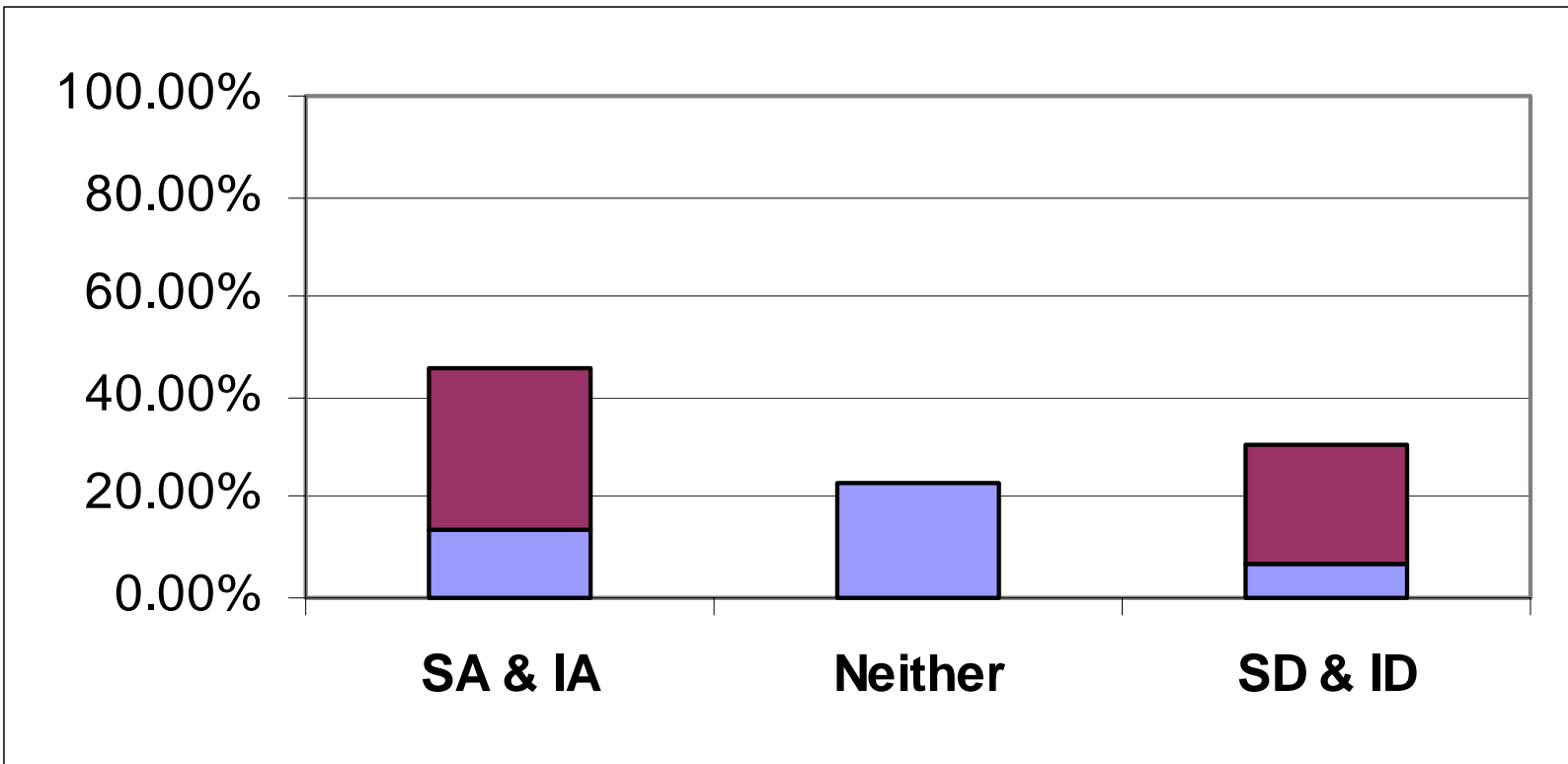
Tool2: “Accreditation with Commendation” is Reflective of Enhanced Program Capacity- **All Respondents**



N = 179, 1 'no response'

SA = 44, IA = 69, Neither = 33, ID = 27, SD = 6

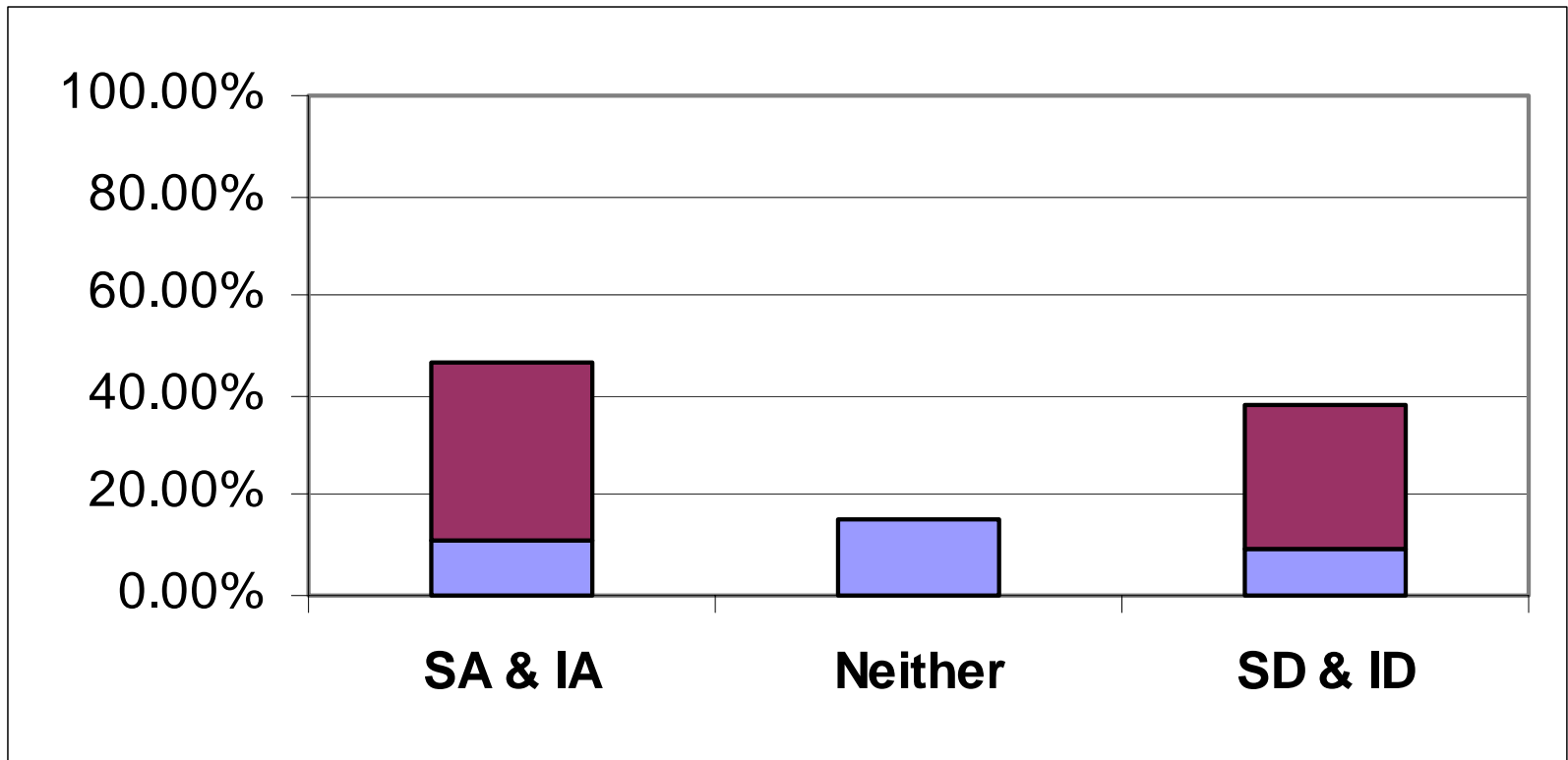
Tool3: Formatting of the Accreditation Tool Meets User Needs- All Respondents



N = 179, 1 'no response'

SA = 25, IA = 58, Neither = 41, ID = 42, SD = 13

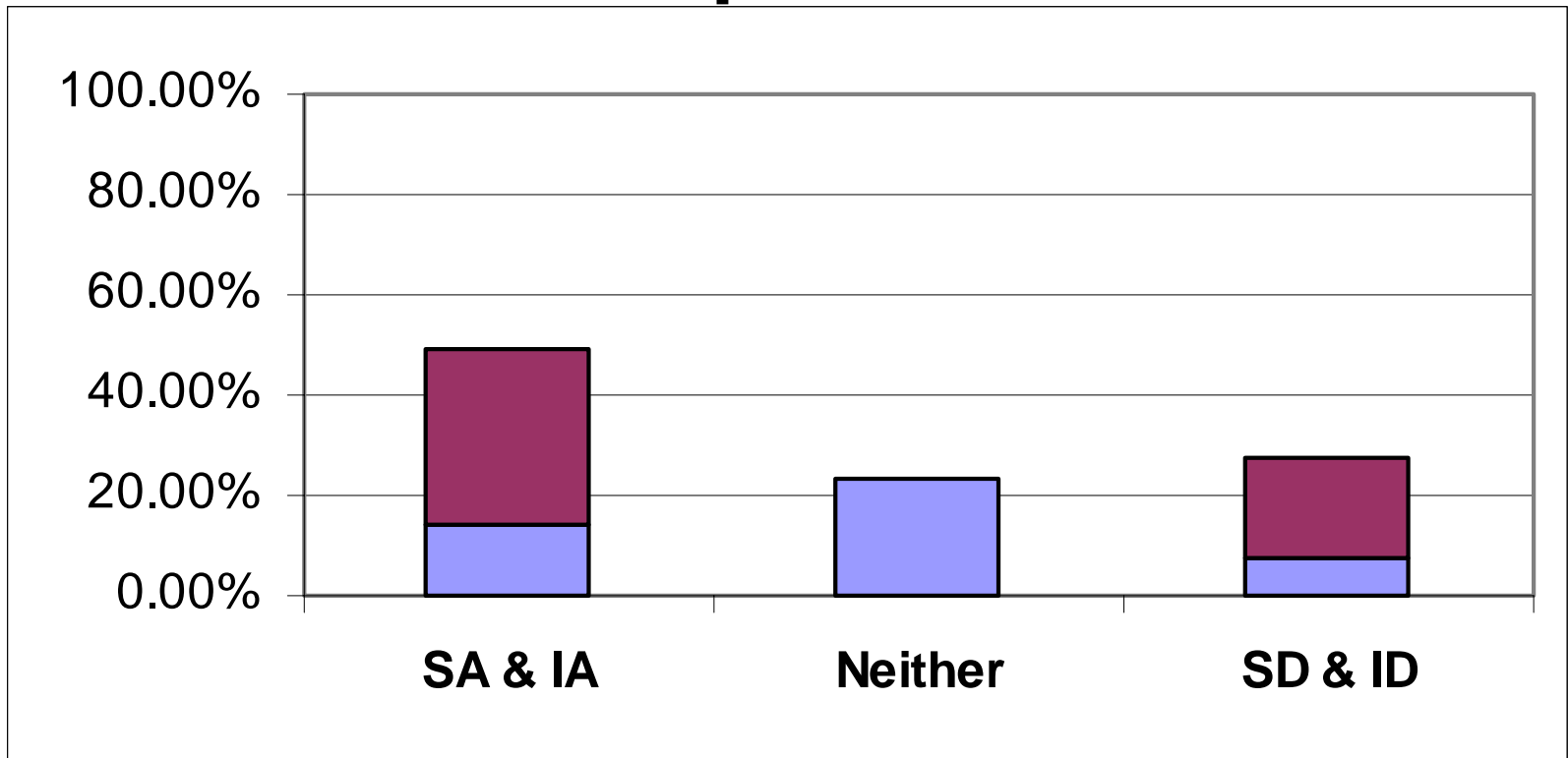
Tool4: Standards in the Tool Are Written Clearly and Concisely- All Respondents



N = 179, 1 'no response'

SA = 19 , IA = 64, Neither = 28, ID = 52, SD = 16

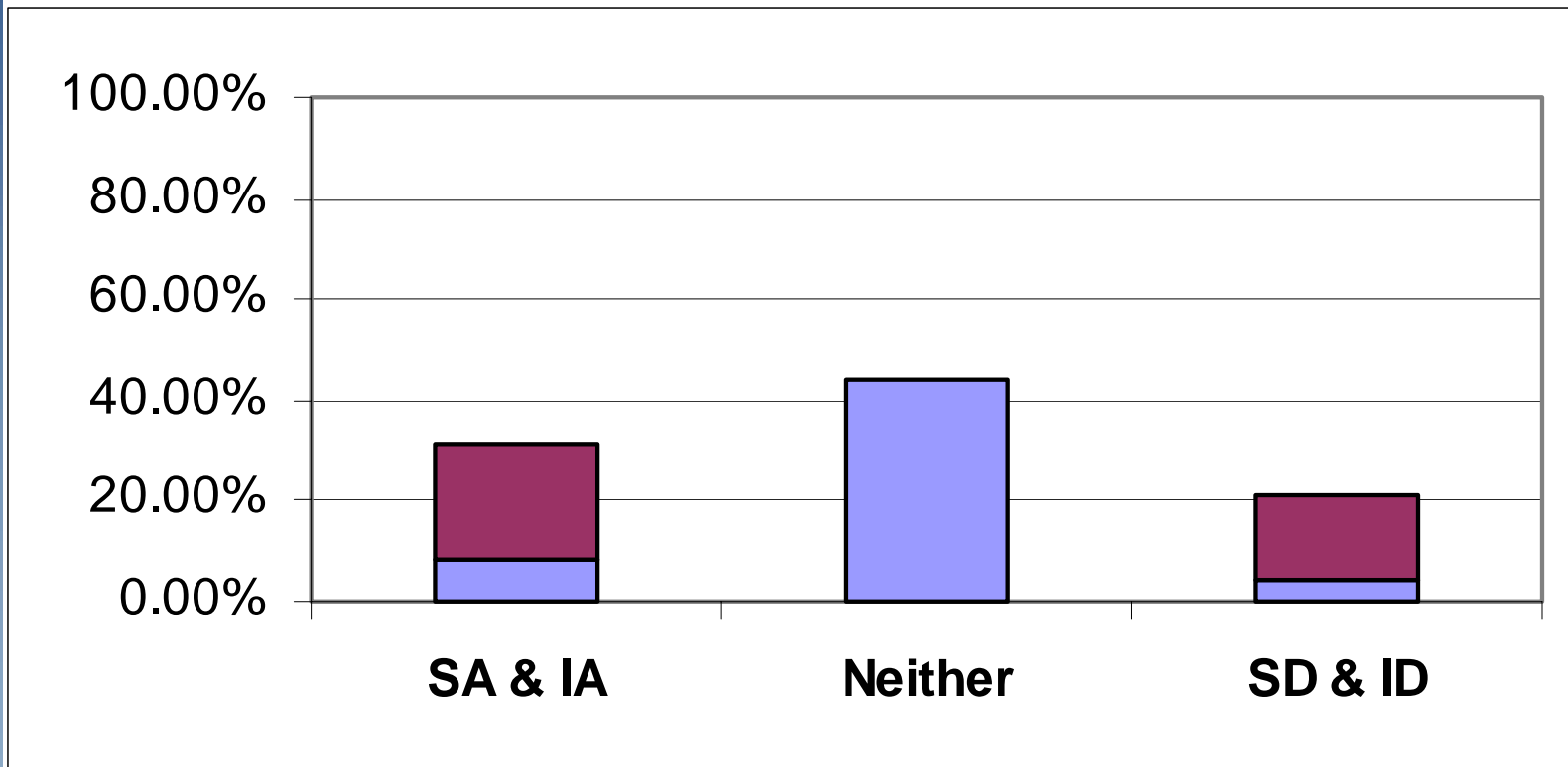
Tool5: Accreditation Tool is Useful Mechanism for Annual LPHD Program Planning Activities- **All Respondents**



N = 179, 1 'no response'

SA = 26, IA = 62, Neither = 42, ID = 36, SD = 13

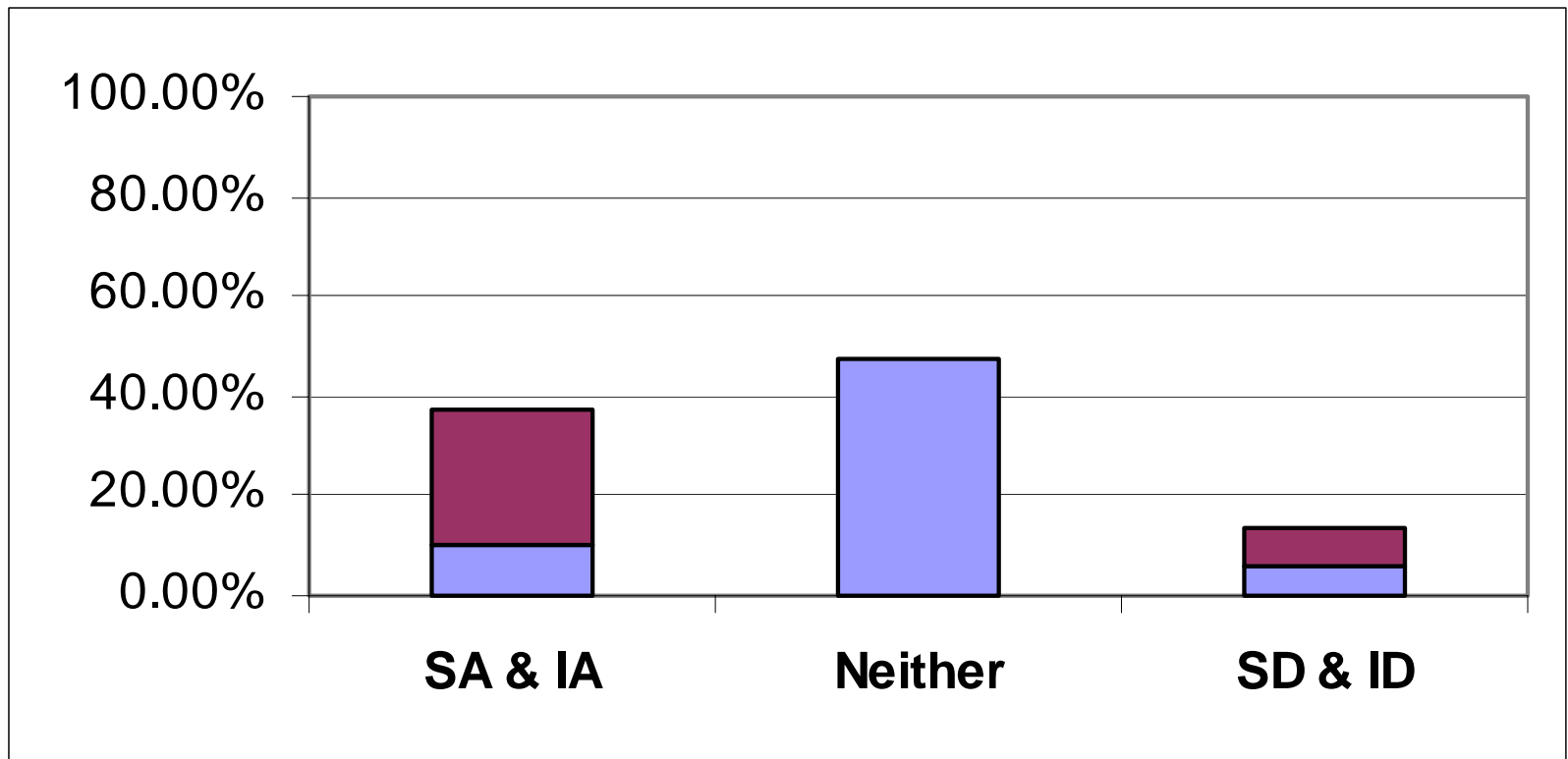
TA1: Current Technical Assistance Resource Contributes to Quality Improvement of Programs- All Respondents



N = 175, 5 'no responses'

SA = 15, IA = 42, Neither = 80, ID = 30, SD = 8

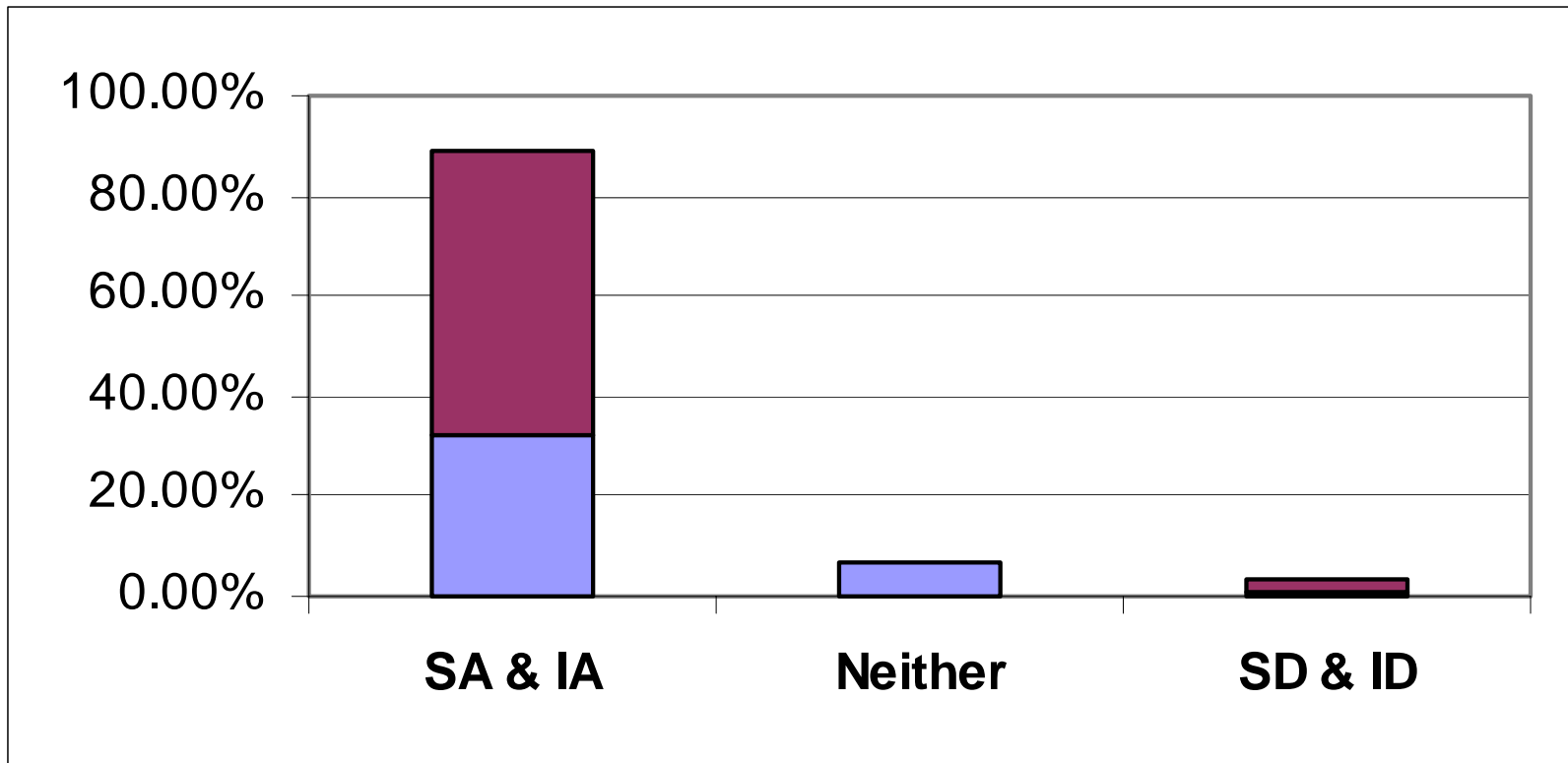
TA3: Accreditation Program Website is a Valuable Resource- All Respondents



N = 176, 4 'no responses'

SA = 18, IA = 49, Neither = 85, ID = 14, SD = 10

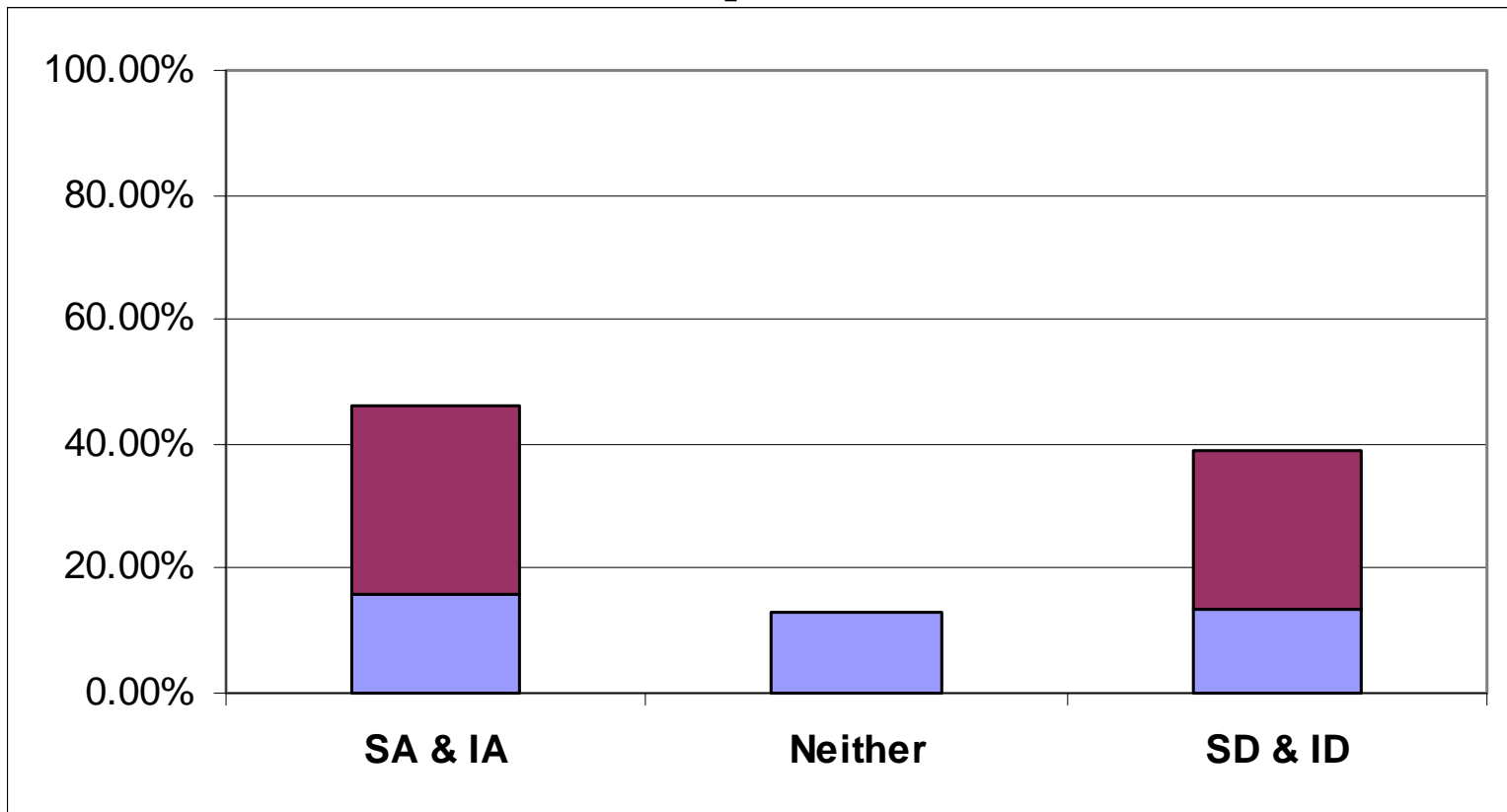
AP1: Purpose of Accreditation Process Should Be On-going Quality Improvement- **All Respondents**



N = 179, 1 'no response'

SA = 103, IA = 58, Neither = 12, ID = 4, SD = 2

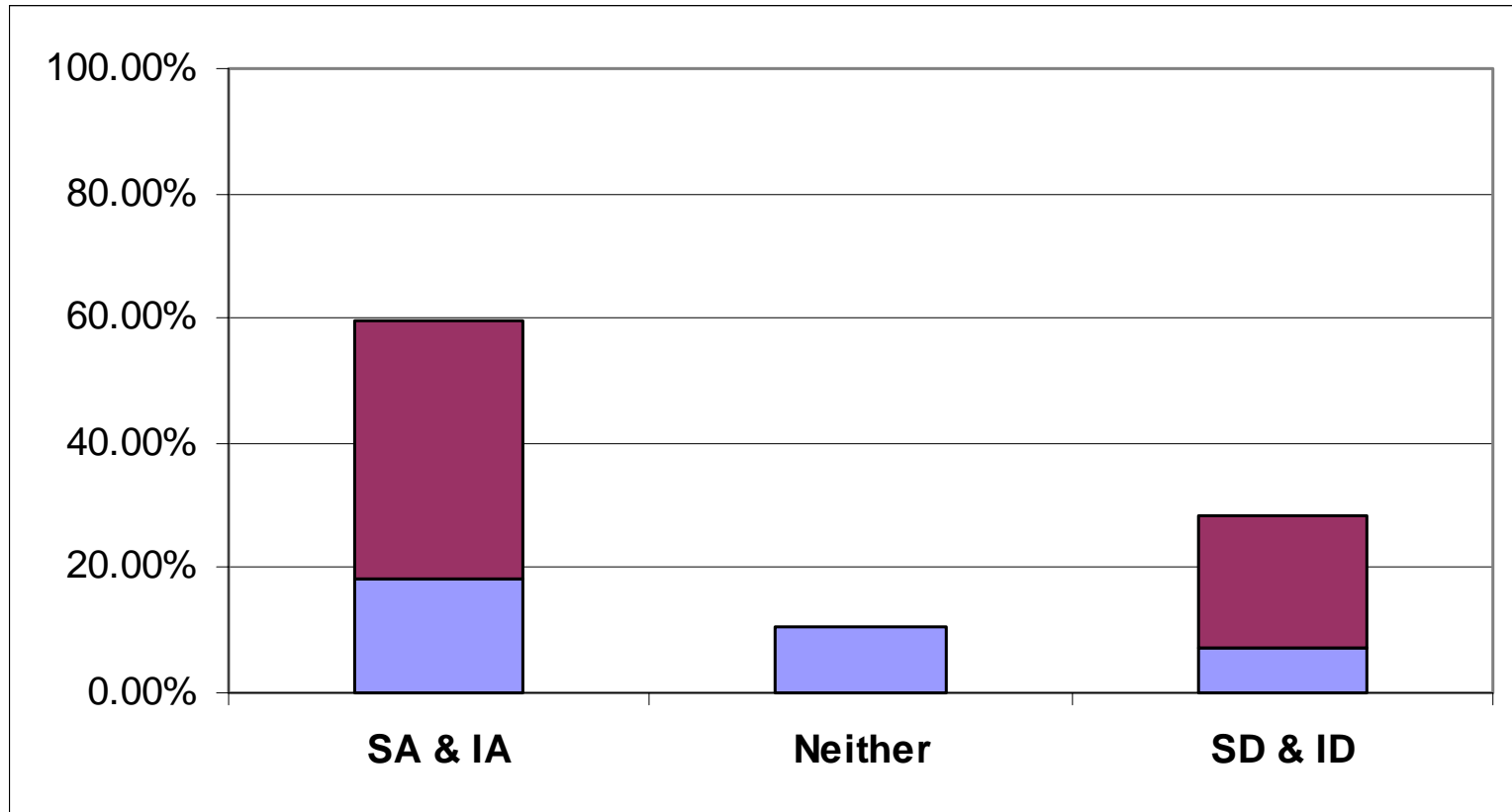
AP2: Purpose of Accreditation Process Should Be Contact Compliance- All Respondents



N = 176, 4 'no responses'

SA = 29, IA = 54, Neither = 23, ID = 46, SD = 24

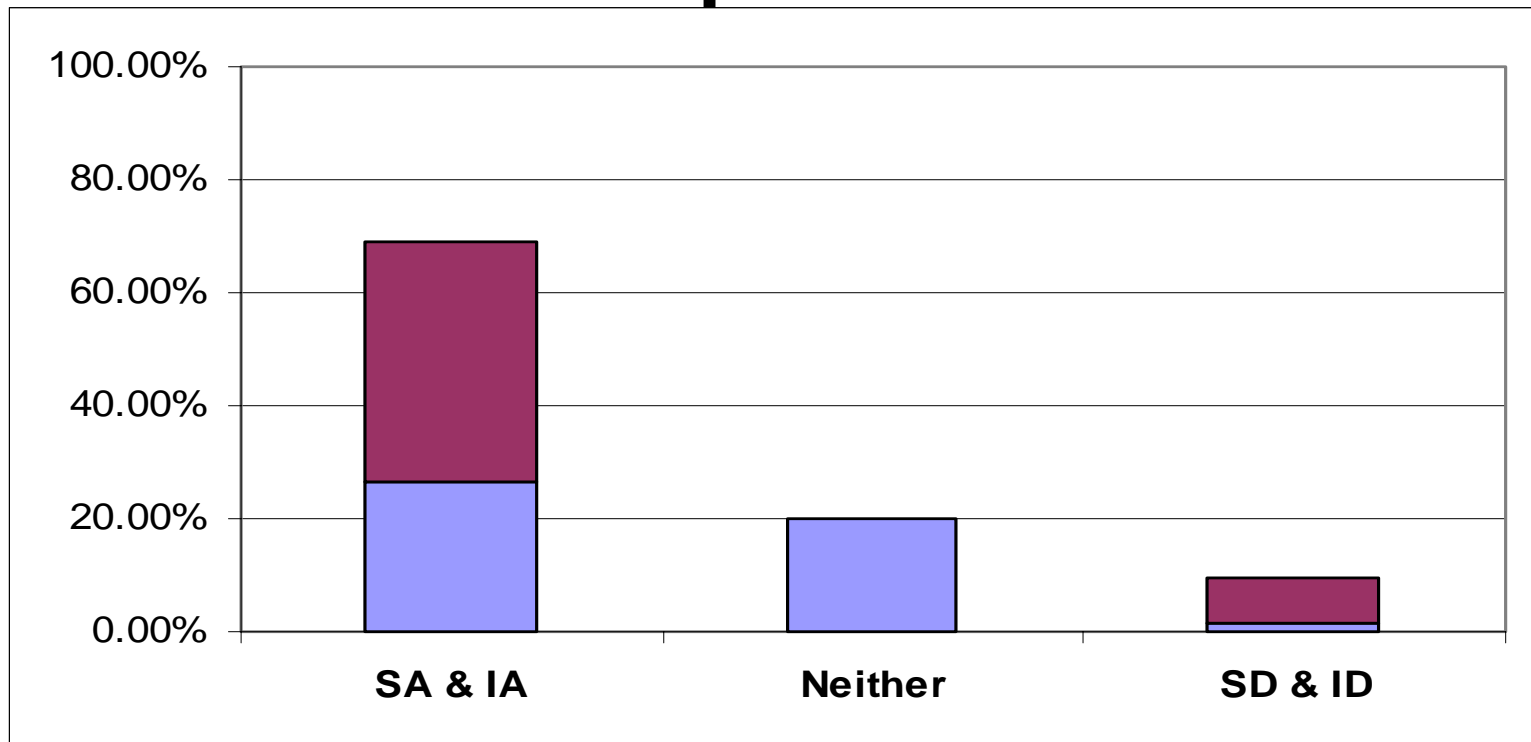
AP3: Accreditation Process Reflects a Set of Achievable Standards- **All Respondents**



N = 177, 3 'no responses'

SA = 33, IA = 74, Neither = 19, ID = 38, SD = 13

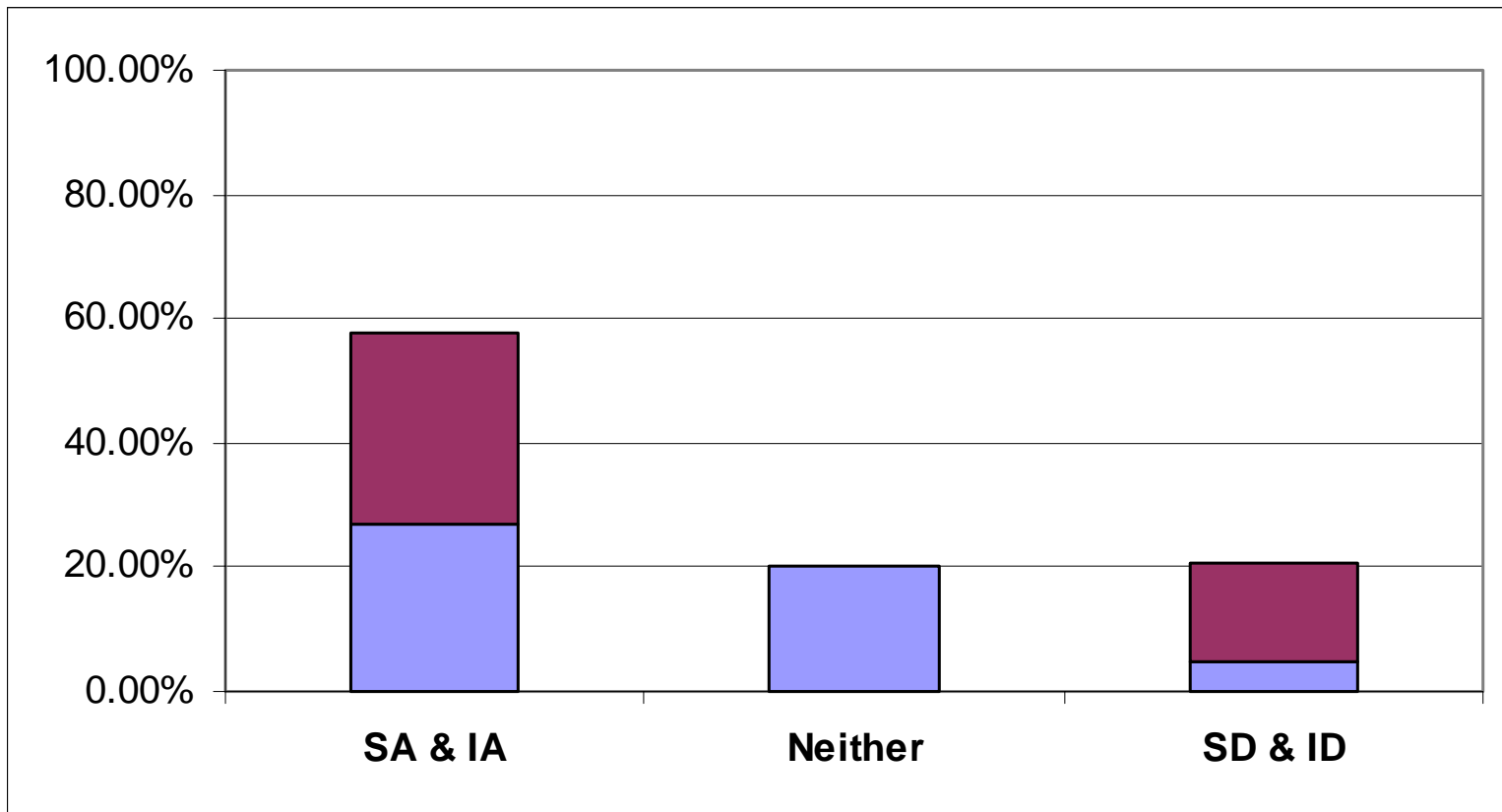
AP4: Accreditation Process Can Be Improved by Increased Focus on Recommendations for Performance Improvement- All Respondents



N = 177, 3 'no responses'

SA = 48, IA = 76, Neither = 36, ID = 14, SD = 3

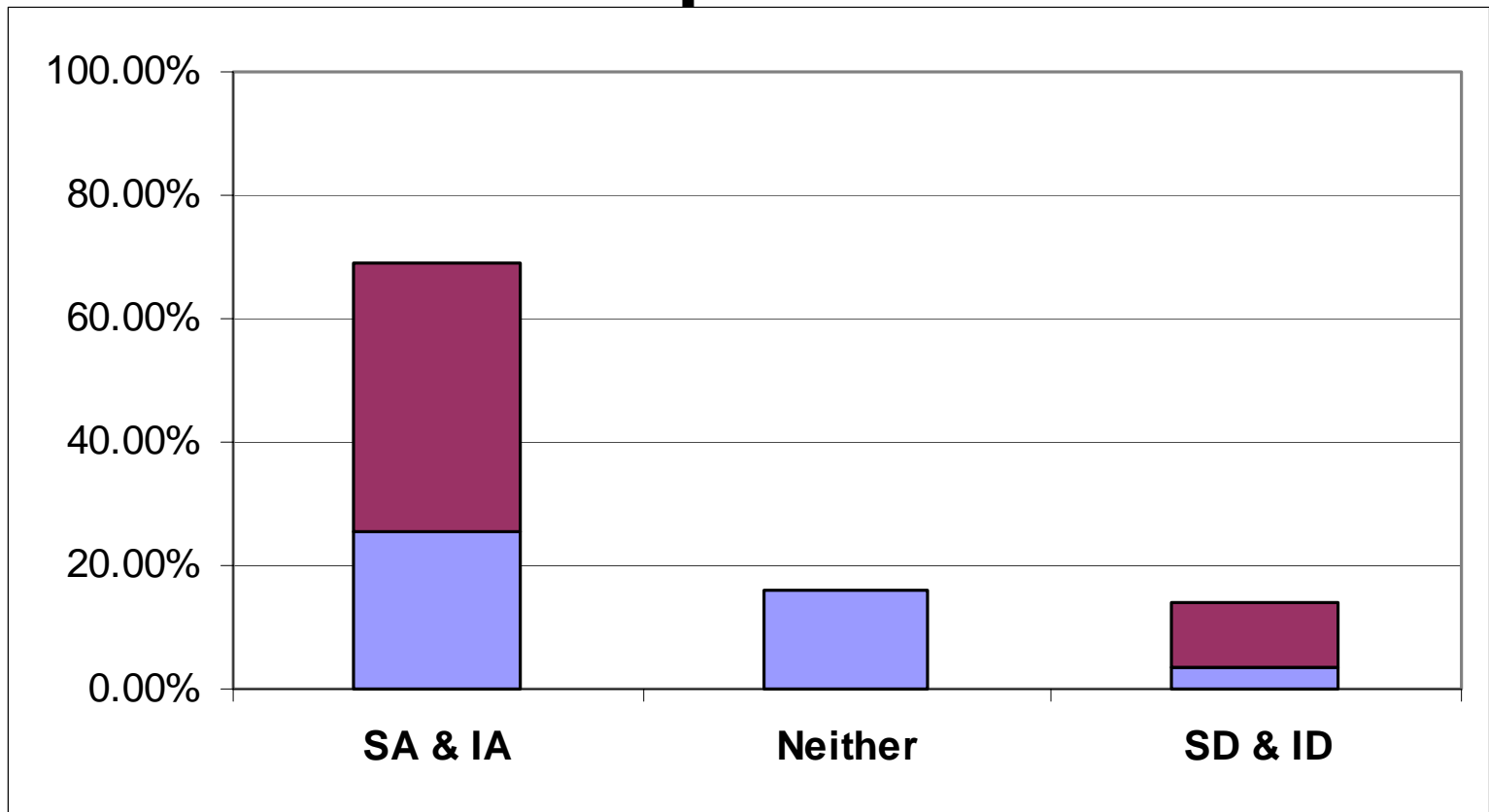
AP5: Is Important for Agencies to Seek Funds to Conduct an Outside Objective Evaluation of Accreditation Program- All Respondents



N = 177, 3 'no responses'

SA = 56, IA = 48, Neither = 36, ID = 28, SD = 9

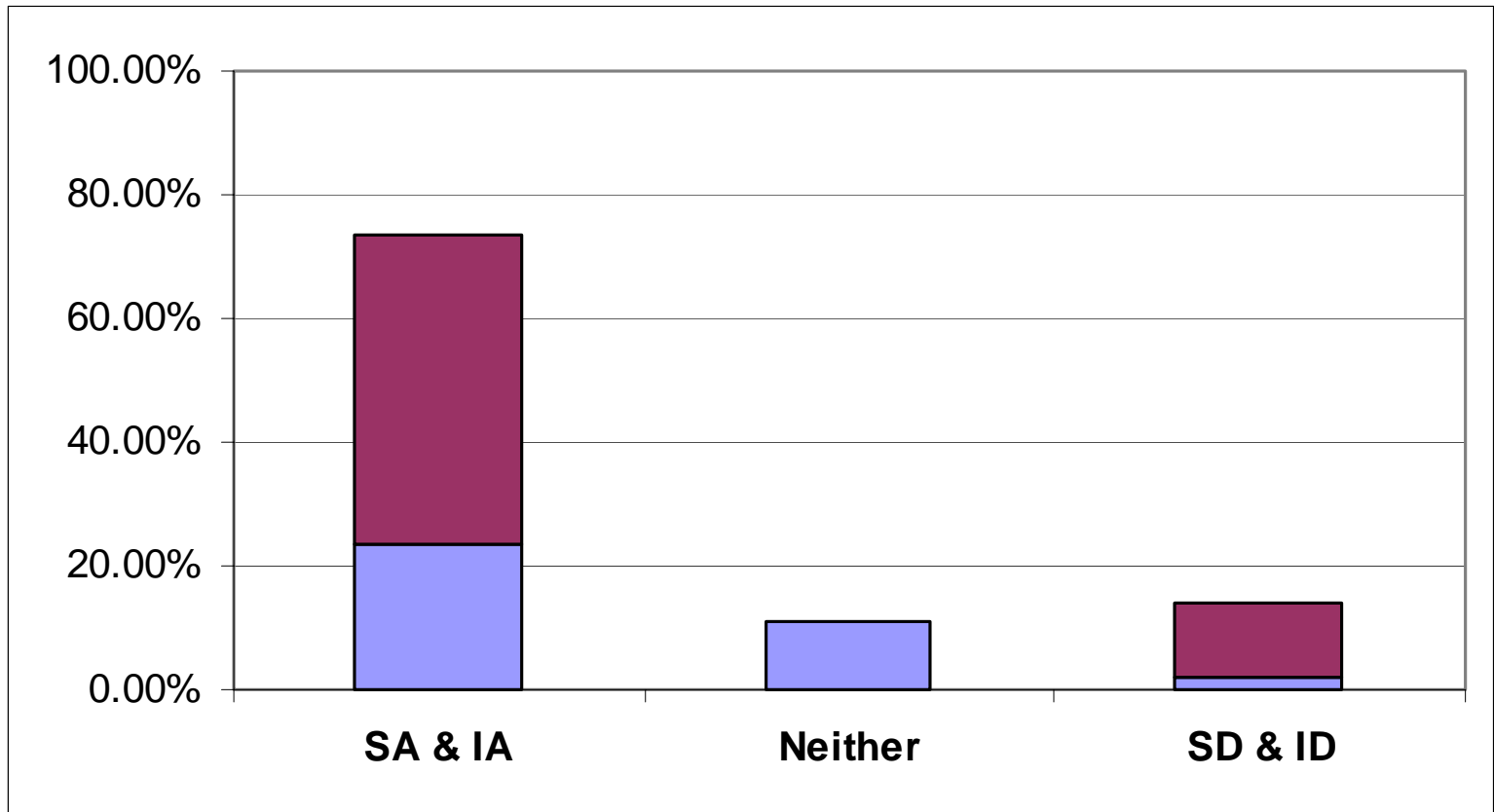
AP6: Overall, Accreditation Process Has Improved Program Performance of LPHD- All Respondents



N = 178, 2 'no responses'

SA = 46, IA = 78, Neither = 29, ID = 19, SD = 6

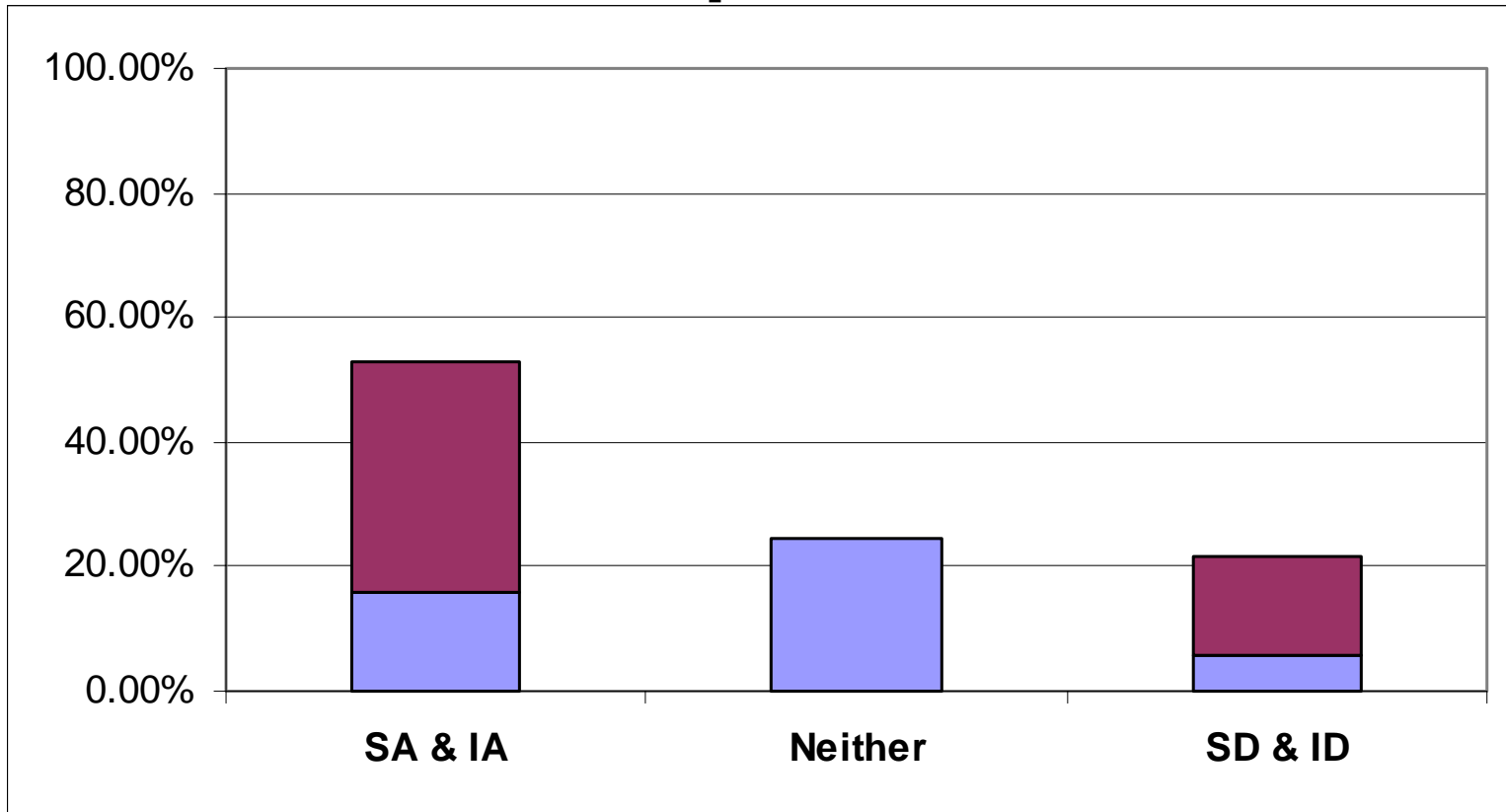
AP7: Accreditation Process is Useful for Internal LPHD Program Evaluation Tool- All Respondents



N = 177, 3 'no responses'

SA = 42, IA = 90, Neither = 20, ID = 21, SD = 4

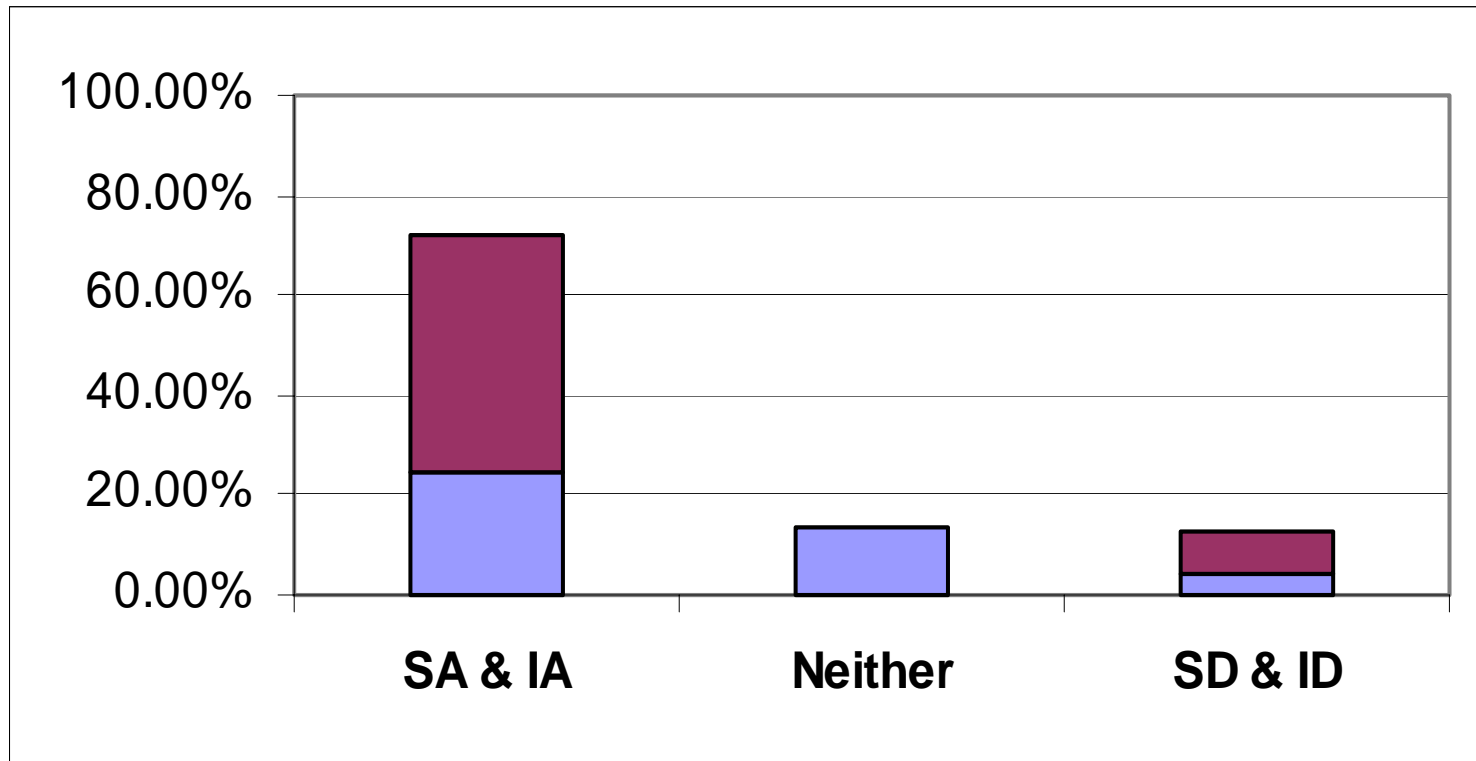
AP8: Accreditation Should Be Based On All State-Funded Services Included in Process- **All Respondents**



N = 178, 2 'no responses'

SA = 29, IA = 66, Neither = 44, ID = 29, SD = 10

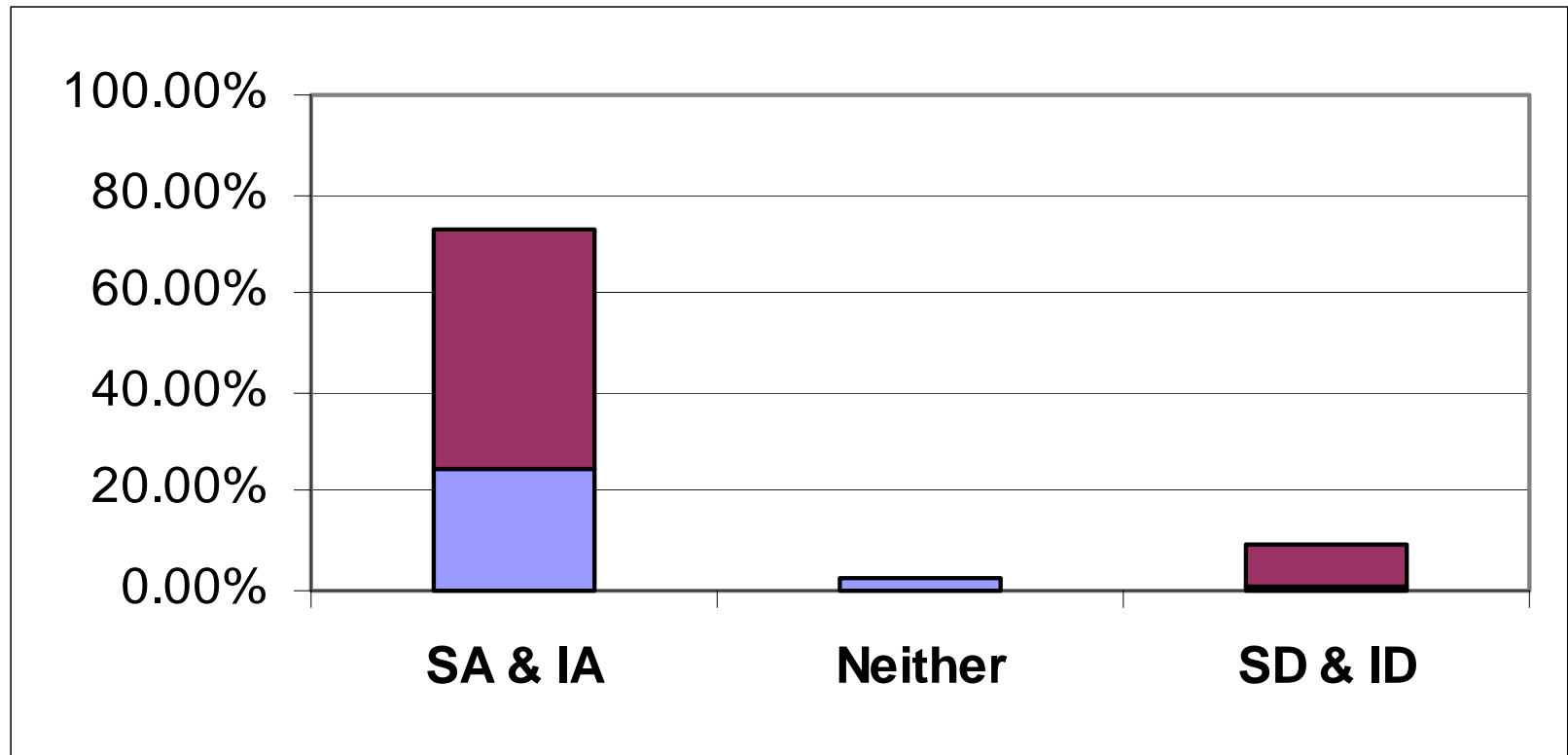
AP9: Accreditation Should Be Based on Minimum Set of Services That Every LPHD Must Provide- **All Respondents**



N = 176, 4 'no responses'

SA = 45, IA = 84, Neither = 24, ID = 16, SD = 7

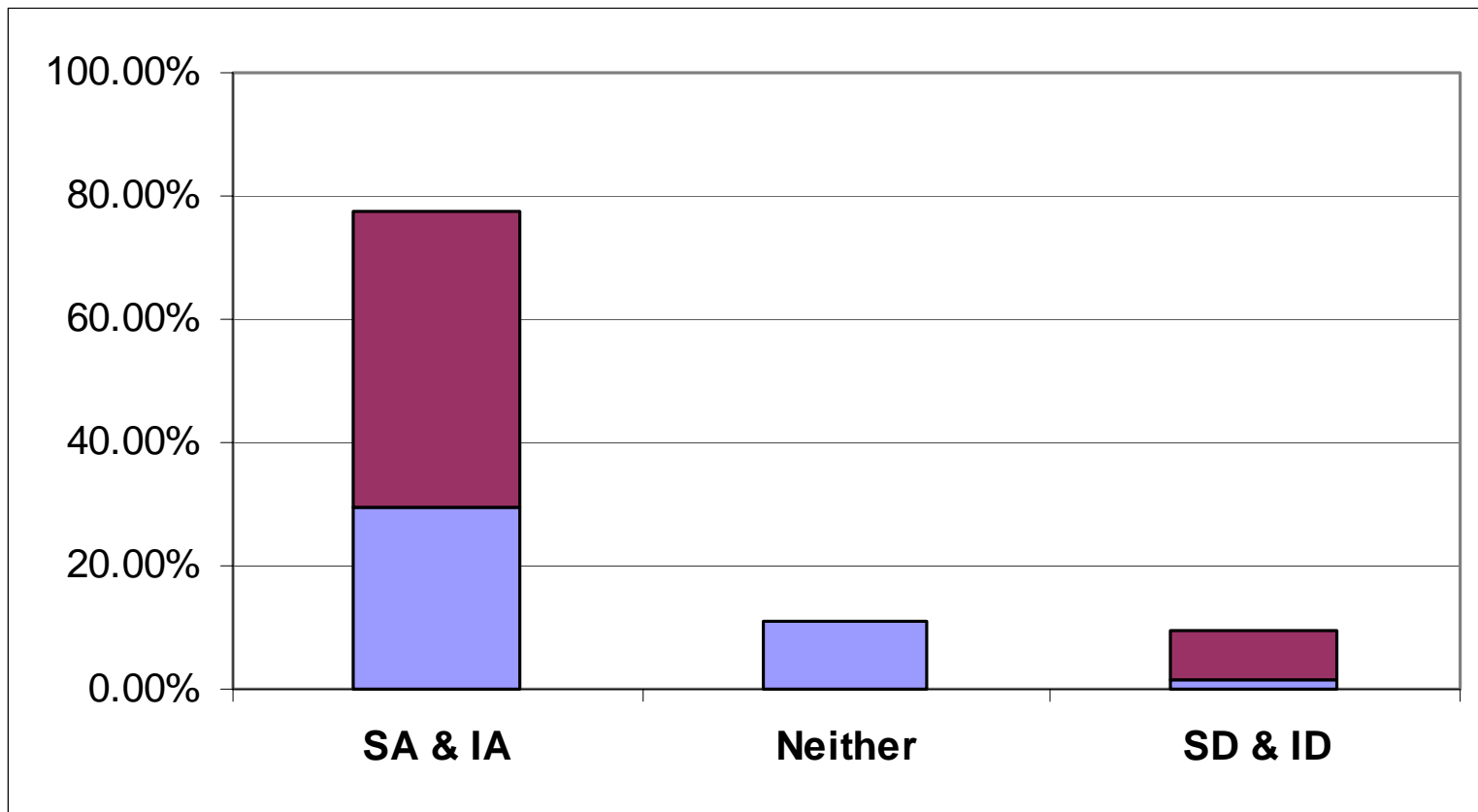
NtWk1: Establishment of APSN Would Improve Accreditation Process- All Respondents



N = 178, 2 'no responses'

SA = 45, IA = 87, Neither = 30, ID = 14, SD = 2

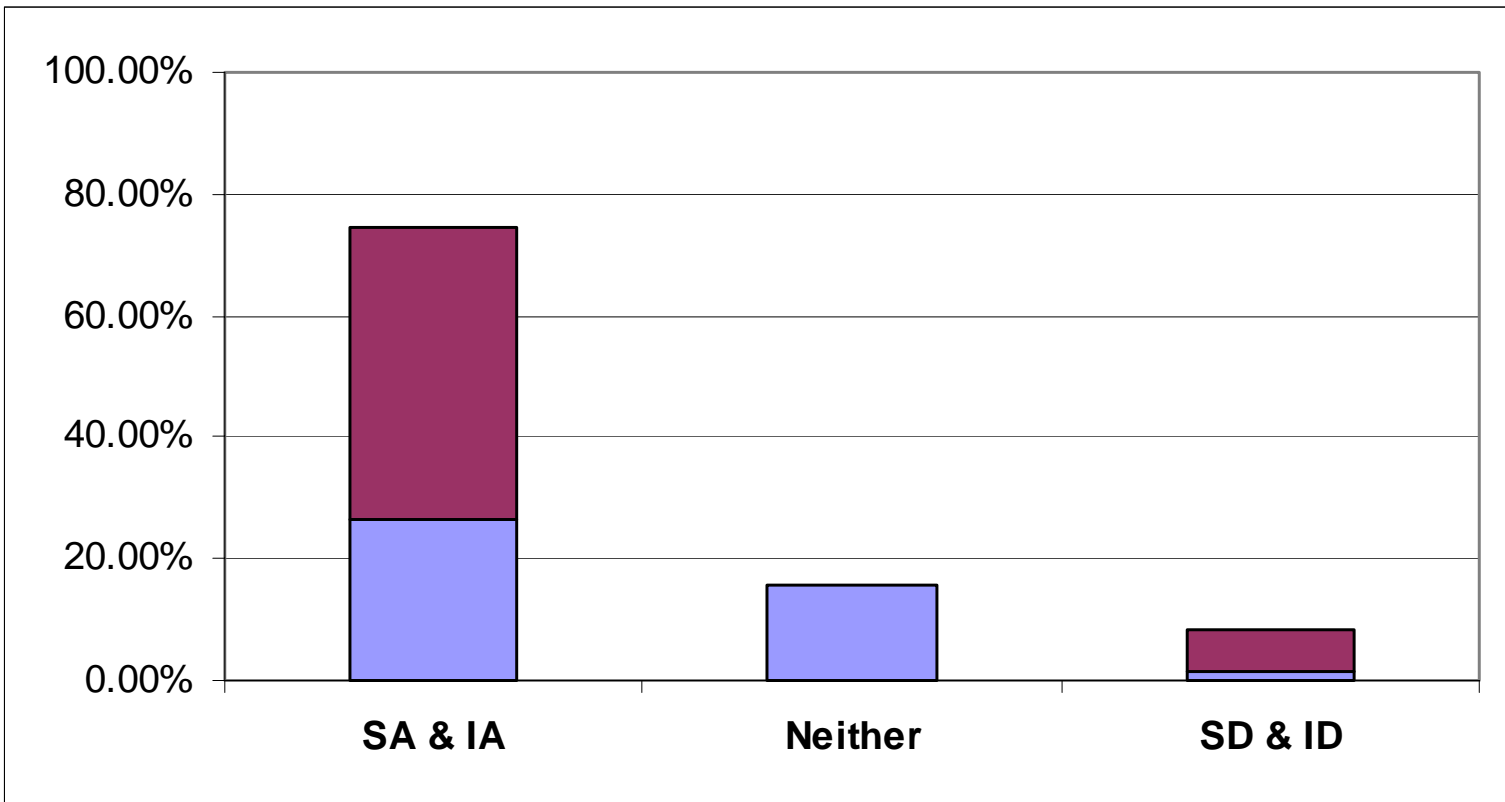
NtWk2: I would seek program guidance from peer network for purpose of achieving accreditation- **All Respondents**



N = 177, 3 'no responses'

SA = 53, IA = 87, Neither = 20, ID = 14, SD = 3

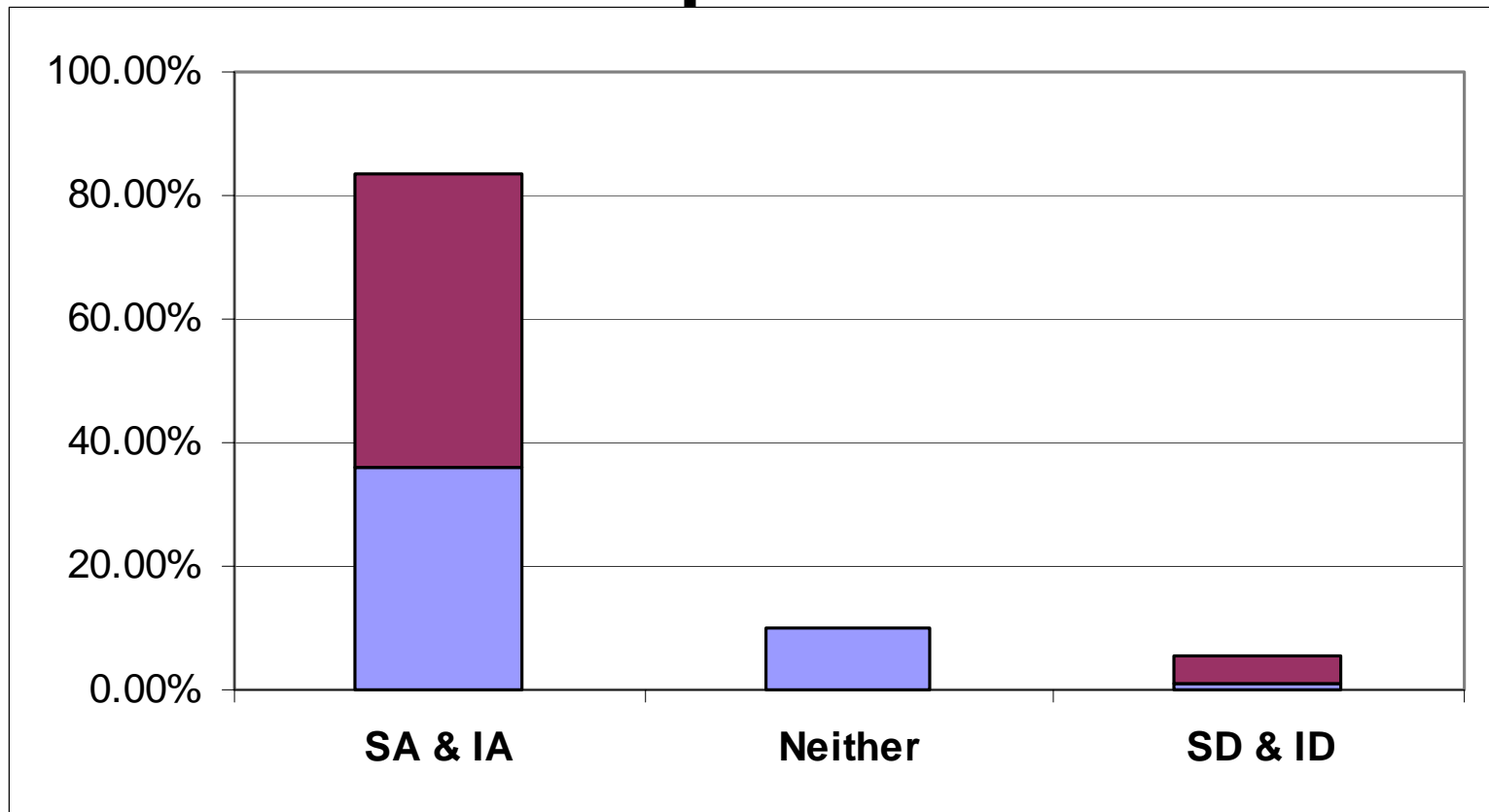
NtWk3: I would serve on and/or share resources with a peer network- All Respondents



N = 177, 3 'no responses'

SA = 48, IA = 86, Neither = 28, ID = 12, SD = 3

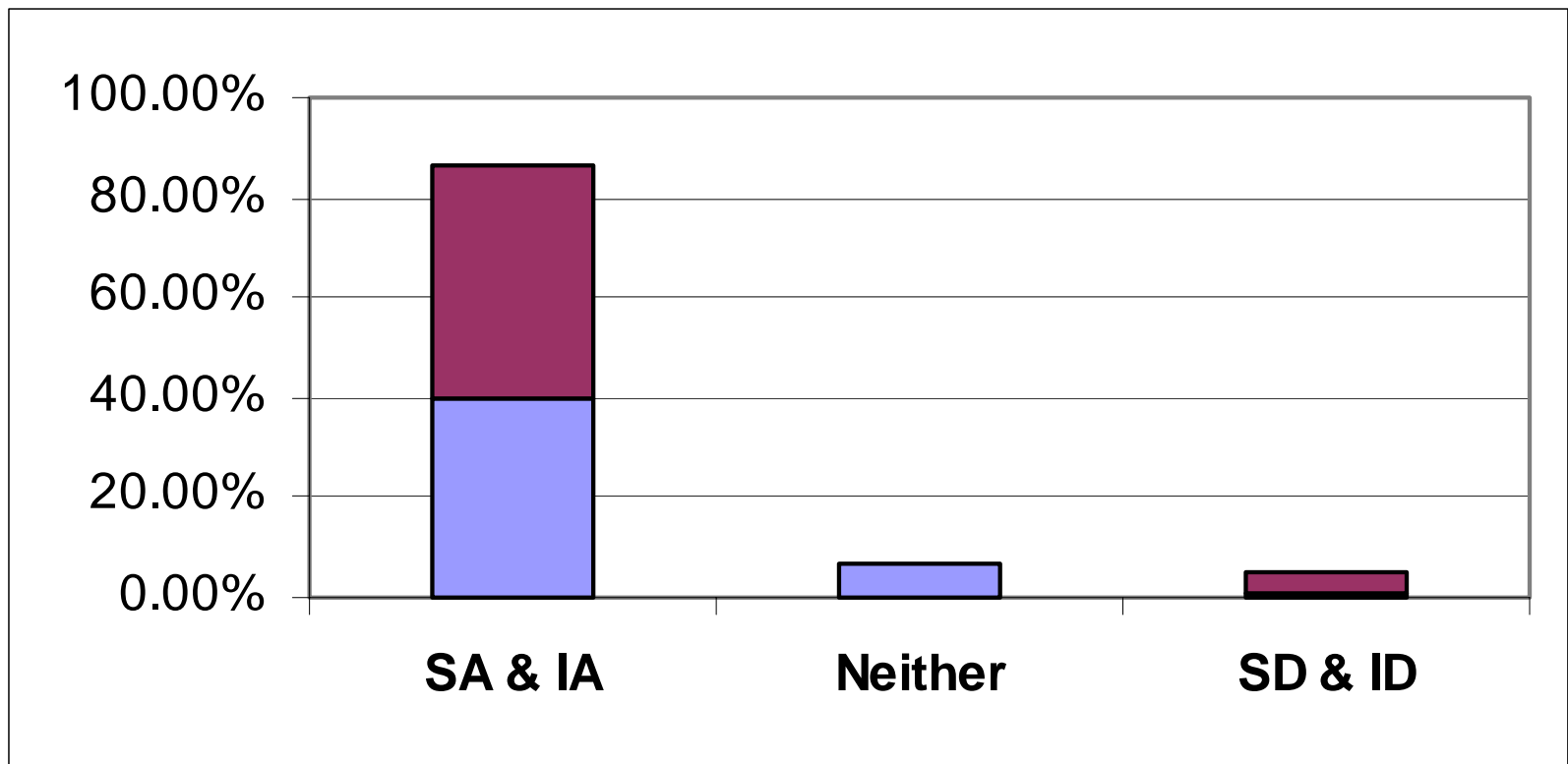
BP1: Establishment of Best Practices (BP) Directory Would Improve Accreditation Process- All Respondents



N = 178, 2 'no responses'

SA = 65, IA = 85, Neither = 18, IA = 8, SD = 2

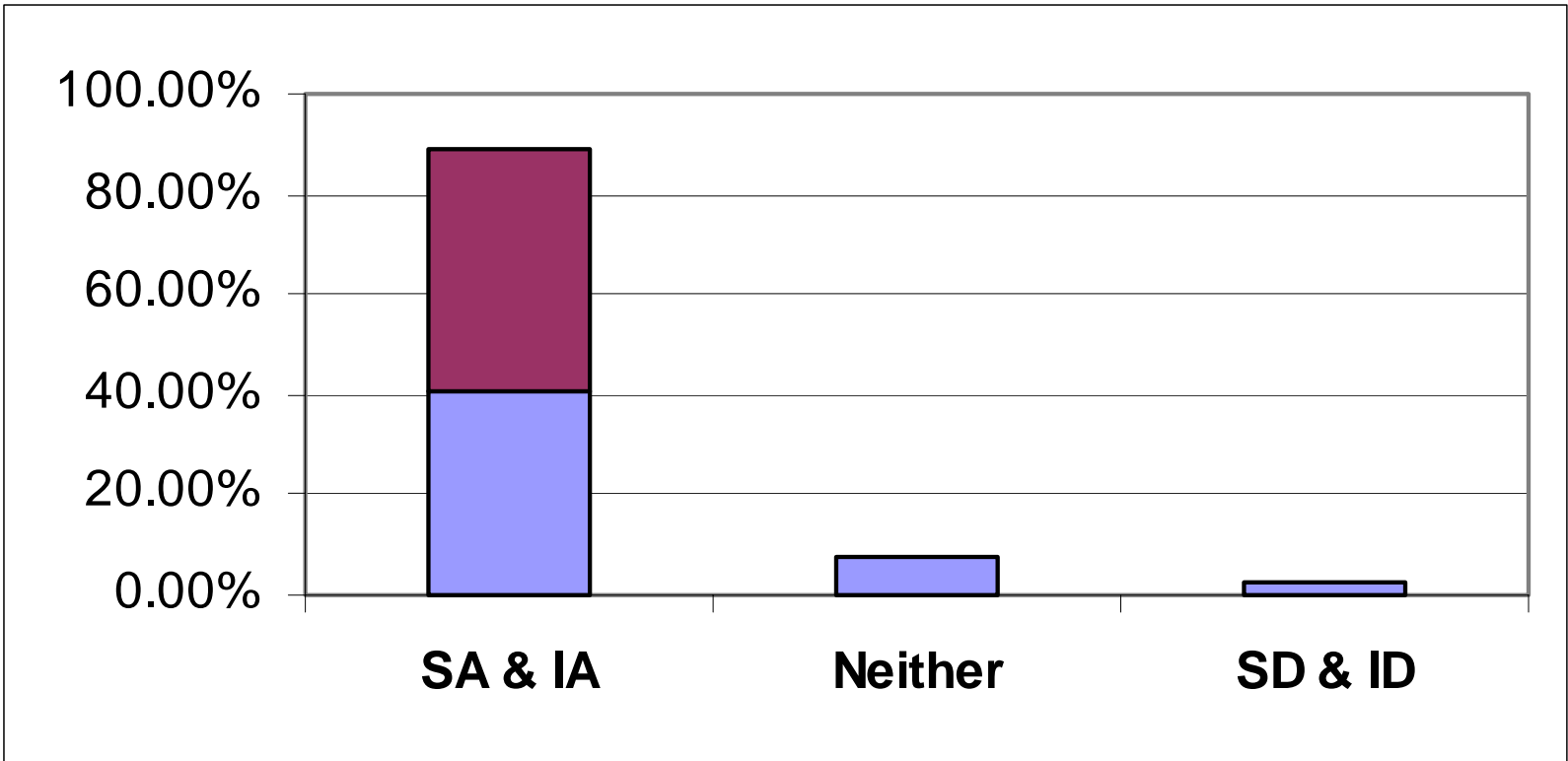
BP2: I would seek program guidance from BP Directory for purpose of achieving accreditation- All Respondents



N = 177, 3 'no responses'

SA = 72, IA = 83, Neither = 13, ID = 8, SD = 1

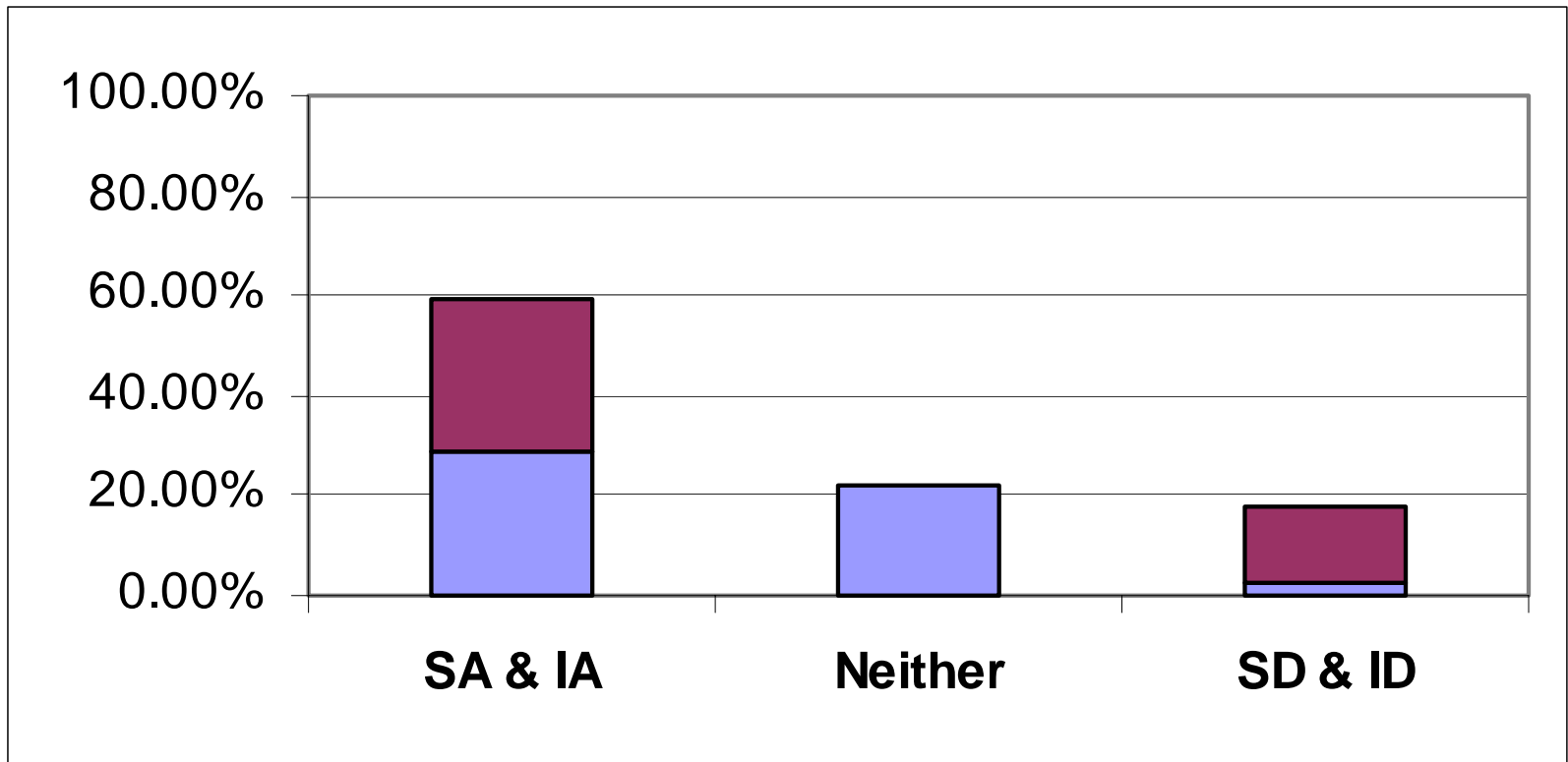
BP3: I would share results with the Best Practice Directory- All Respondents



N = 178, 2 'no responses'

SA = 74, IA = 86, Neither = 14, ID = 4, SD = 0

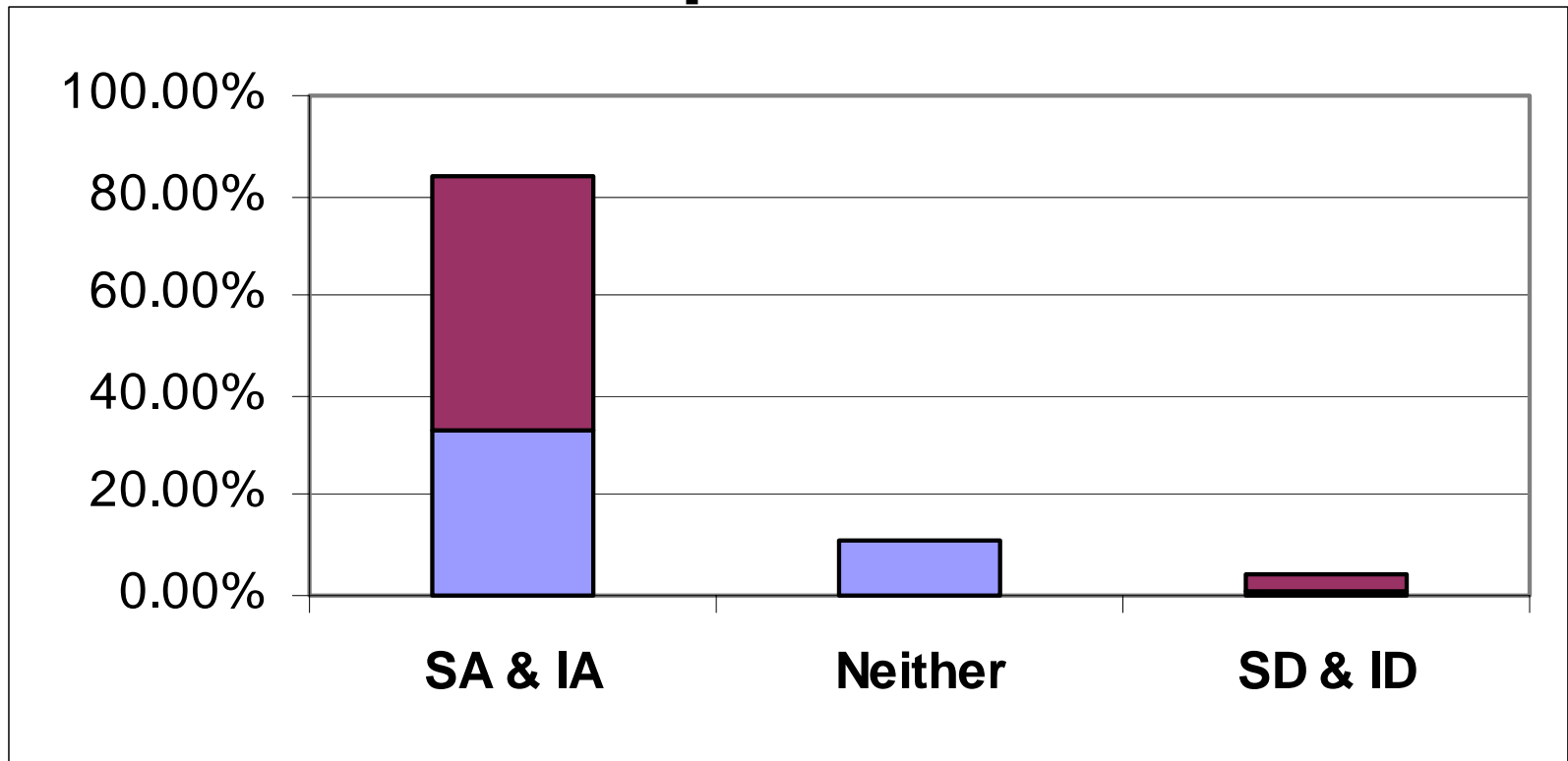
Train1: Additional Training on the Accreditation Process is Needed for LPHDs- All Responses



N = 178, 2 'no responses'

SA = 52, IA = 54, Neither = 40, ID = 27, SD = 5

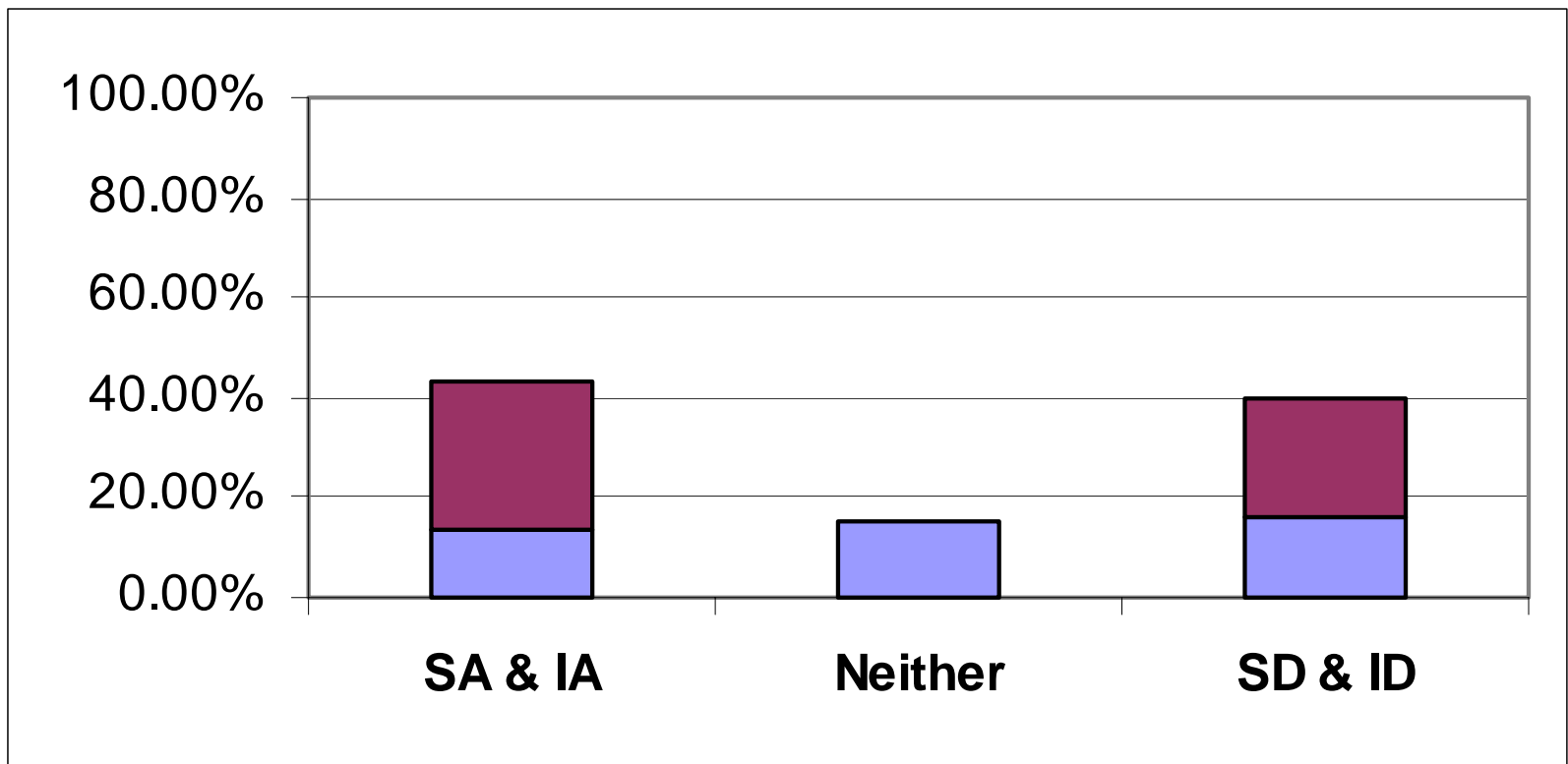
Train2: Additional Training on Accreditation Process is Needed for Program Reviewers- All Respondents



N = 178, 2 'no responses'

SA = 92, IA = 59, Neither = 19, ID = 7, SD = 1

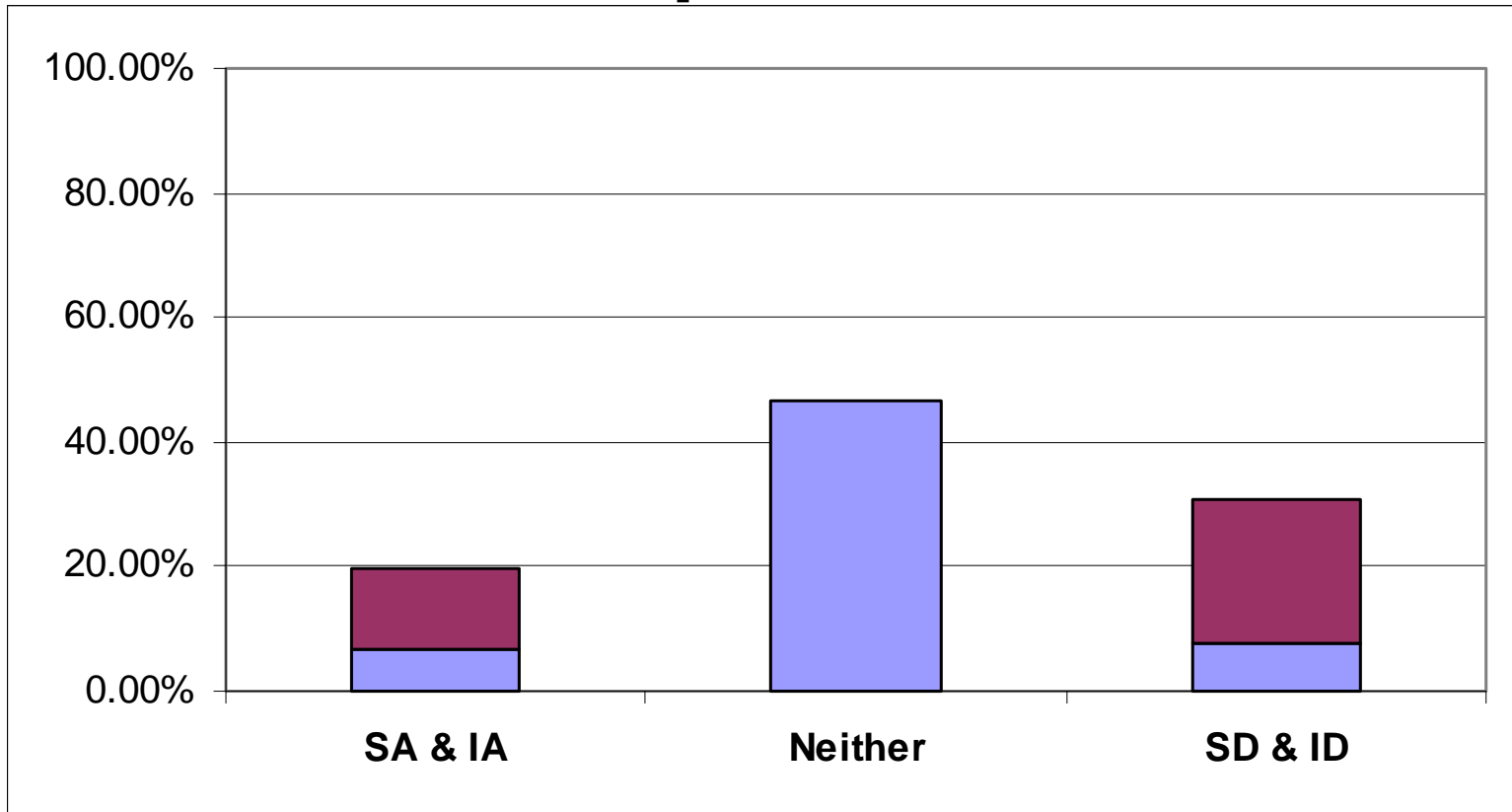
Comm1: I am familiar with the membership and purview of the Accreditation Commission- All Respondents



N = 178, 2 'no responses'

SA = 24, IA = 54, Neither = 28, ID = 43, SD = 29

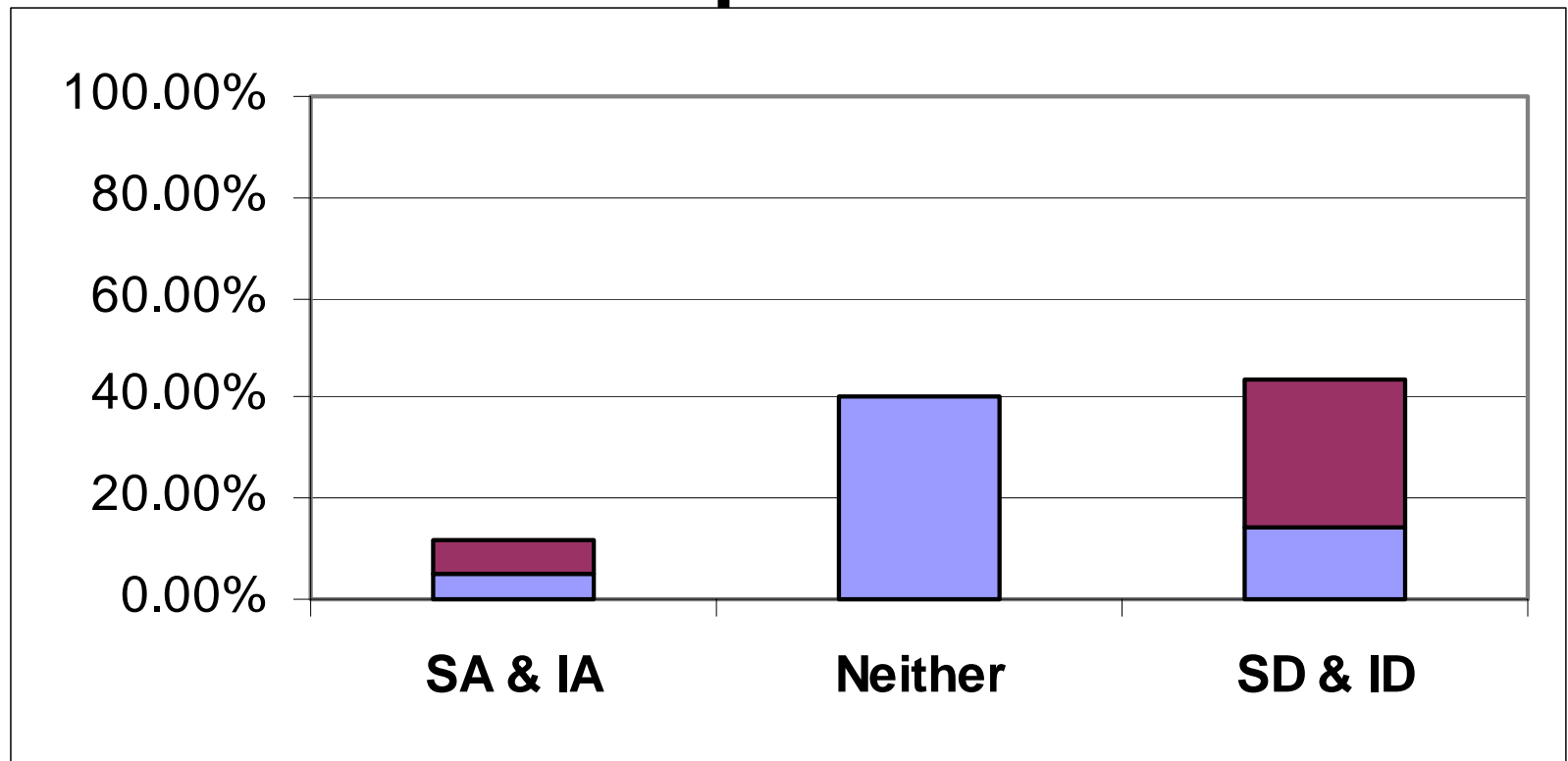
Comm2: There Is Adequate Representation of LDH on the Commission- All Respondents



N=174, 6 'no responses'

SA = 12, IA = 23, Neither = 84, ID = 41, SD = 14

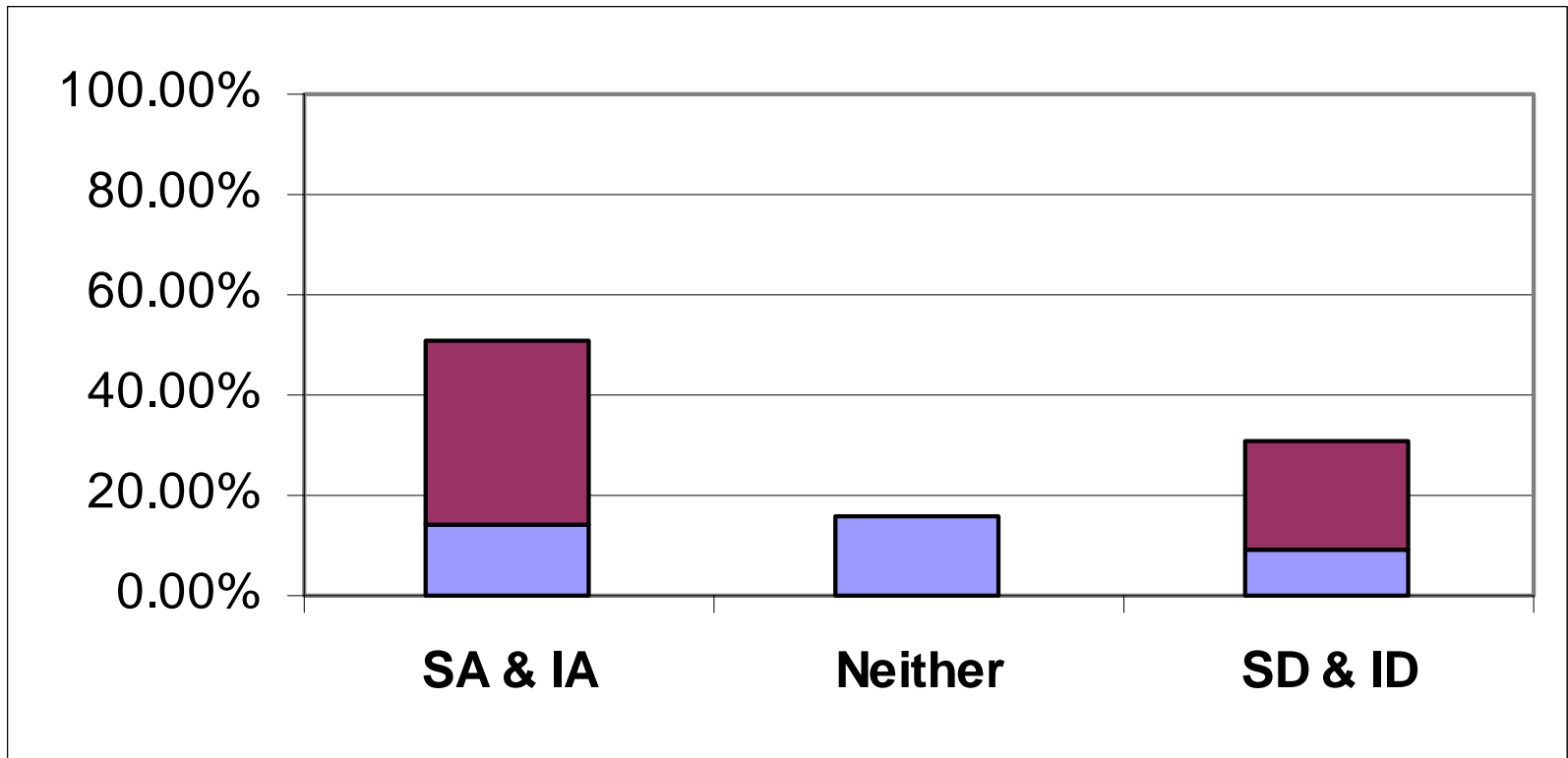
Comm3: Current Communication Between the Commission and Accreditation Process Stakeholders is Adequate- **All Respondents**



N = 173, 7 'no responses'

SA = 9, IA = 12, Neither = 73, ID = 54, SD = 25

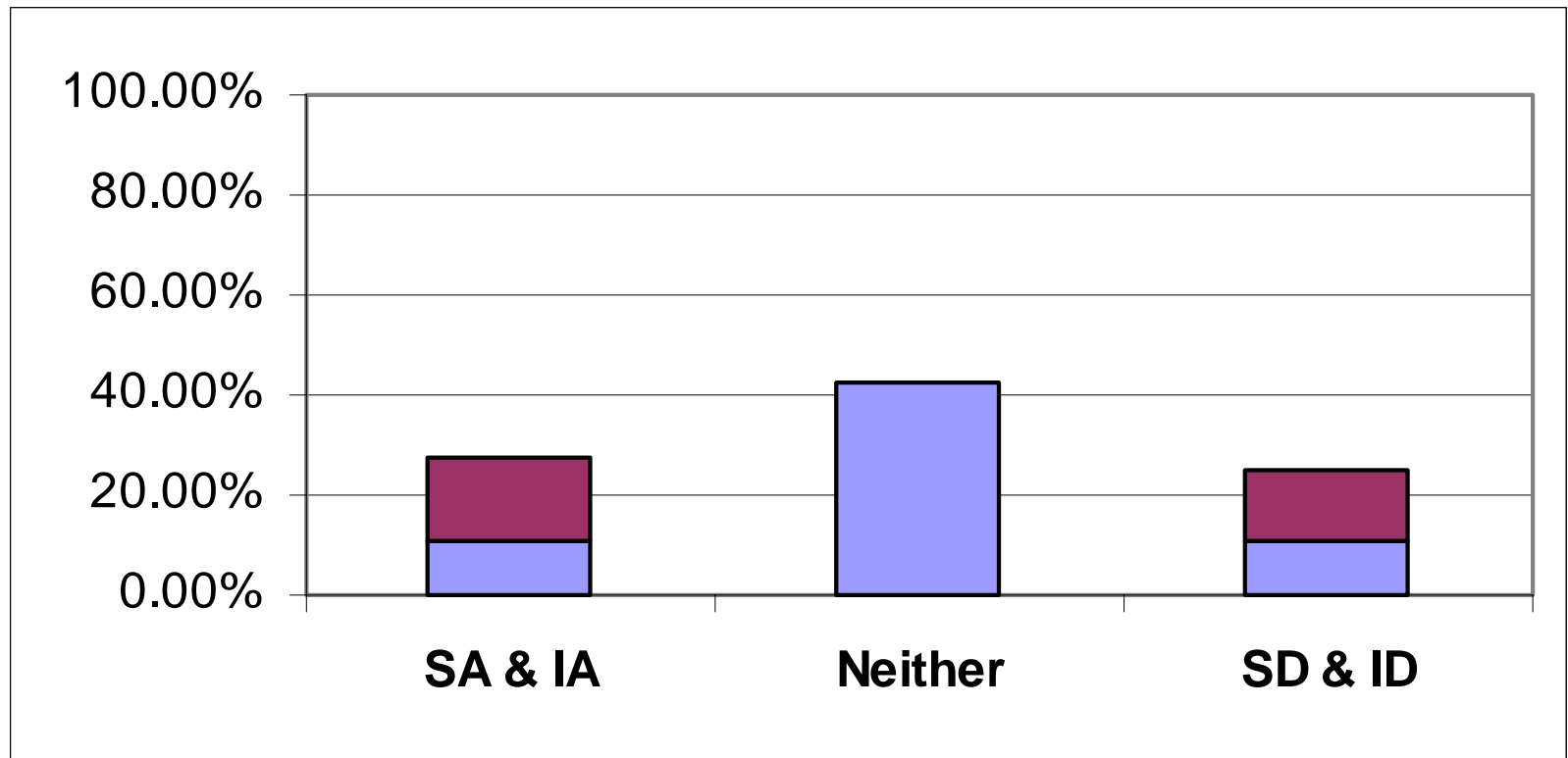
MPHI1: I understand MPHI's role in the accreditation process- All Respondents



N = 175, 5 'no responses'

SA = 25, IA = 66, Neither = 29, ID = 38, SD = 17

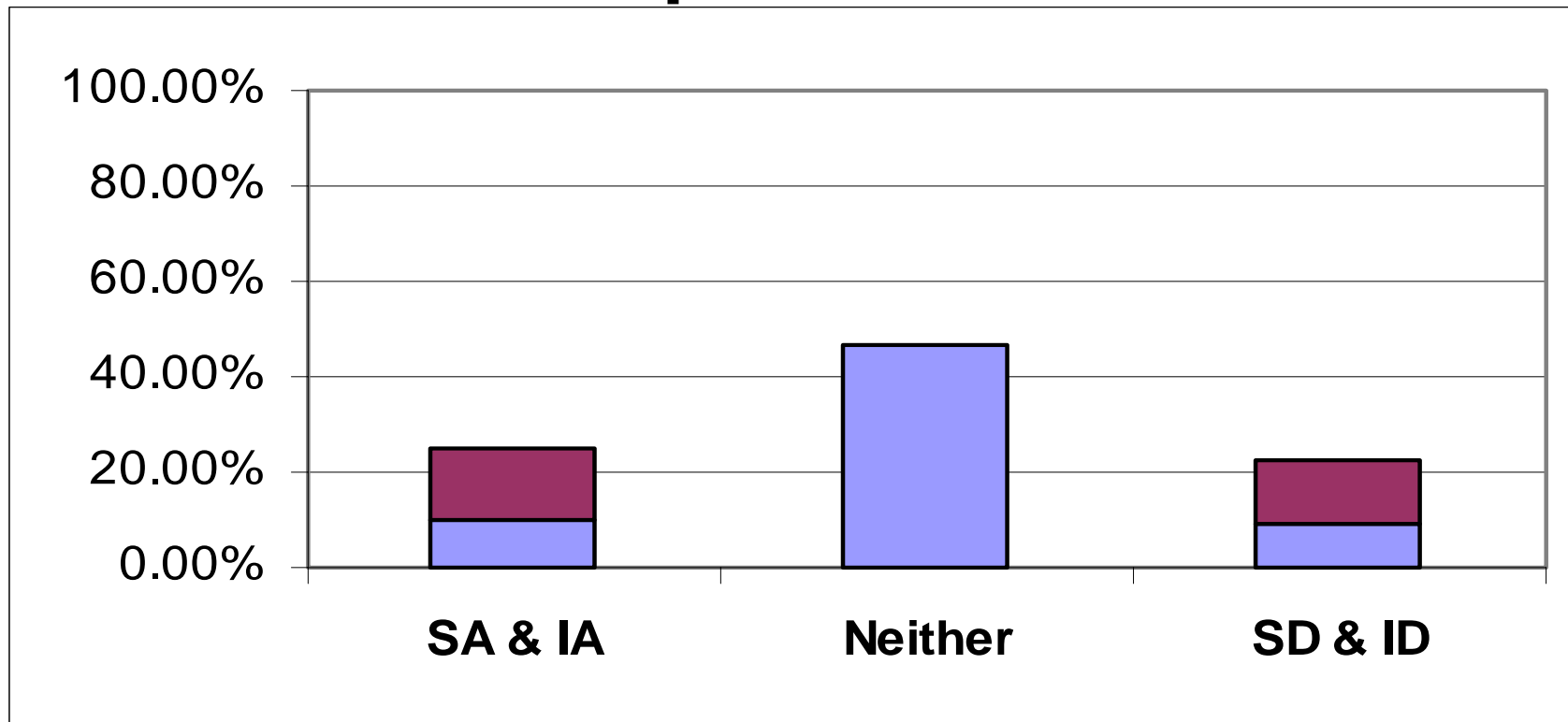
MPHI2: Coordination of Accreditation Program is Enhanced by MPHI's Participation- All Respondents



N = 170, 10 'no responses'

SA = 19, IA = 30, Neither = 76, ID = 25, SD = 20

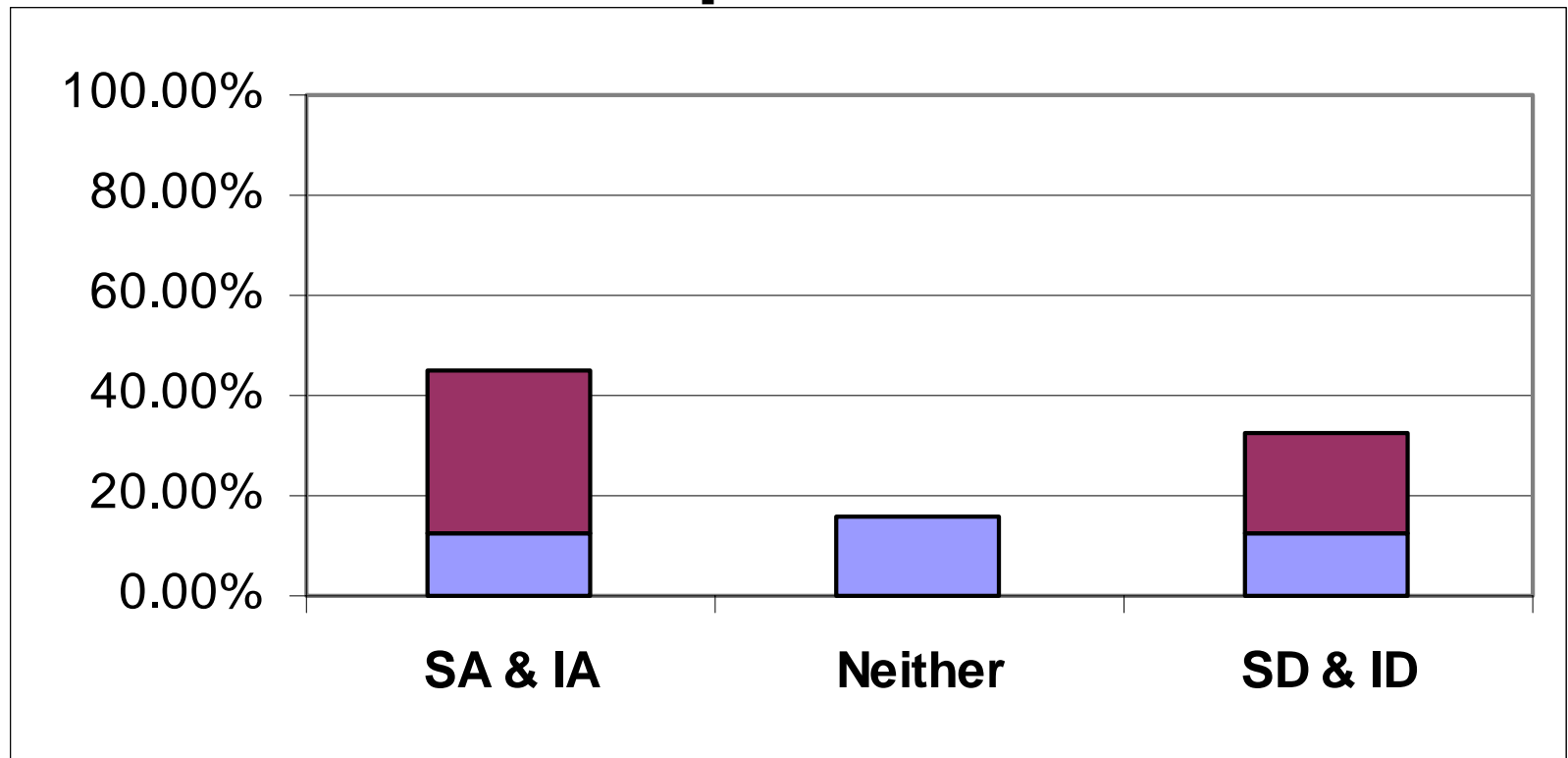
MPHI3: Processes for which MPHI is Responsible are Handled in a Satisfactory Manner- **All Respondents**



N = 169, 11 'no responses'

SA = 18, IA = 27, Neither = 84, ID = 23, SD = 17

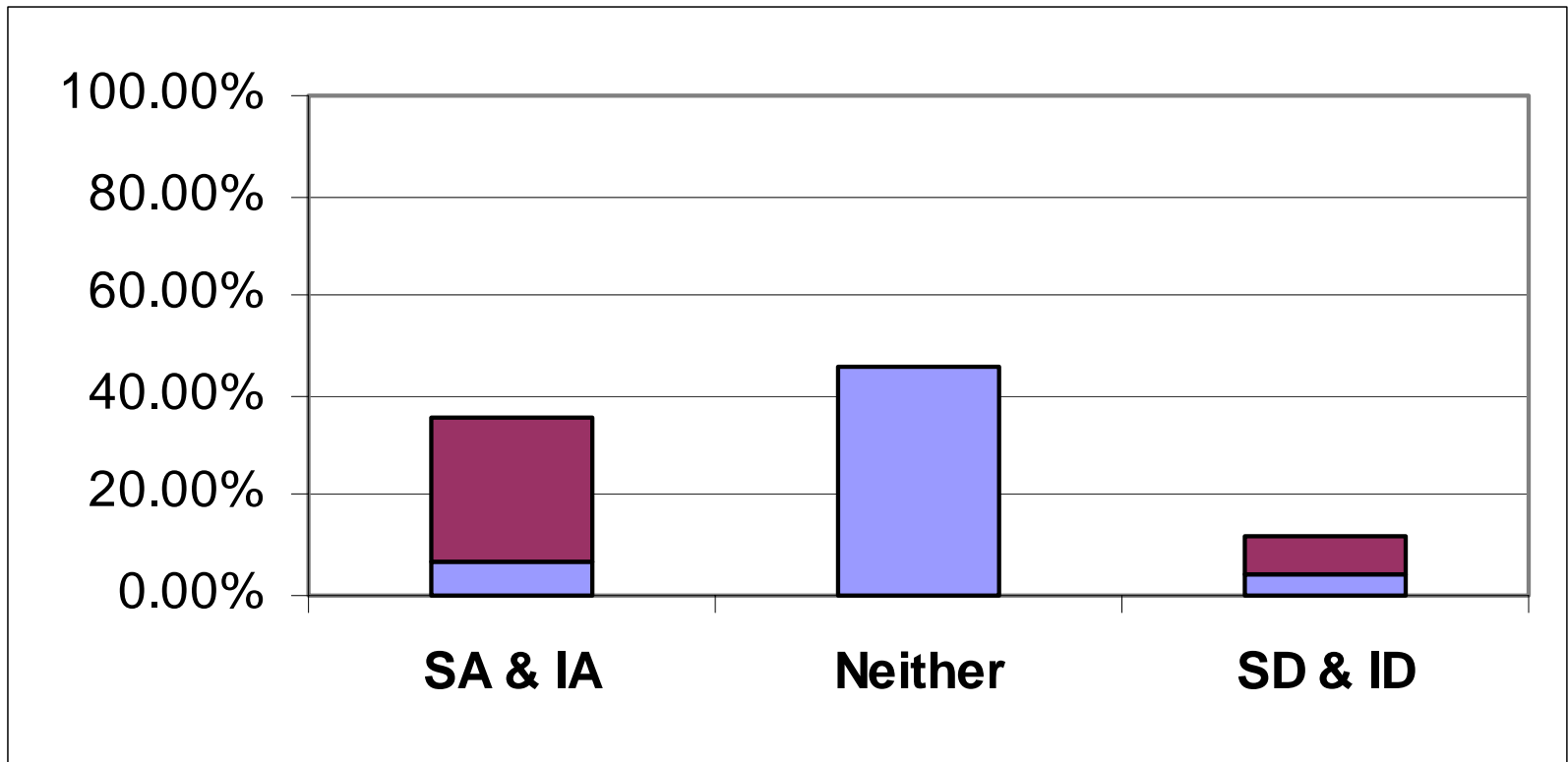
NPHPS1: I am familiar with the CDC National Public Health Performance Standards- All Respondents



N = 168, 12 'no responses'

SA = 23, IA = 58, Neither = 29, ID = 35, SD = 23

NPHPS2: Accreditation for Commendation for LPHDs Should Be Tied to Use of NPHPS- **All Respondents**

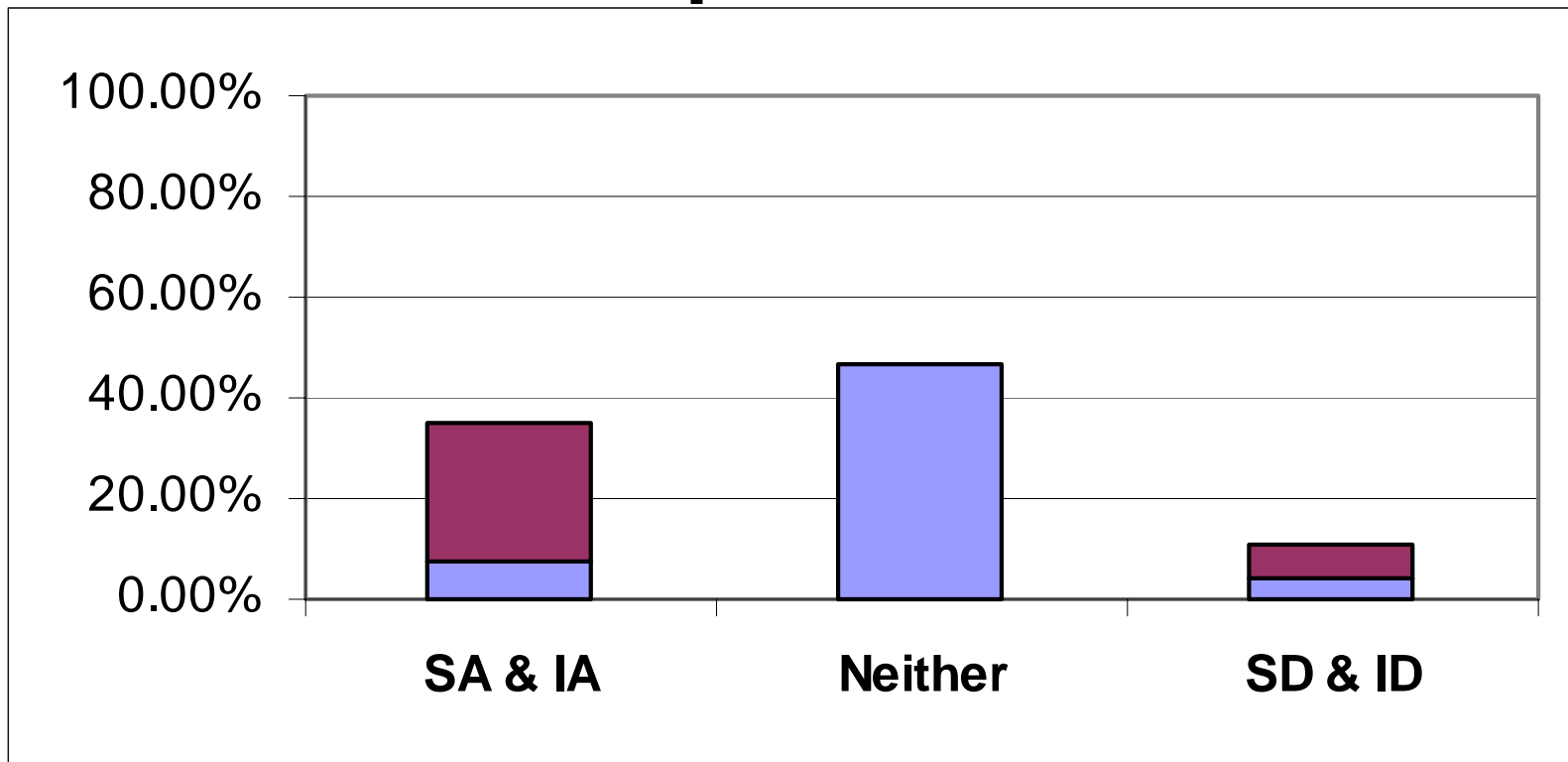


N = 168, 12 'no responses'

SA = 13, IA = 51, Neither = 82, ID = 15, SD = 7



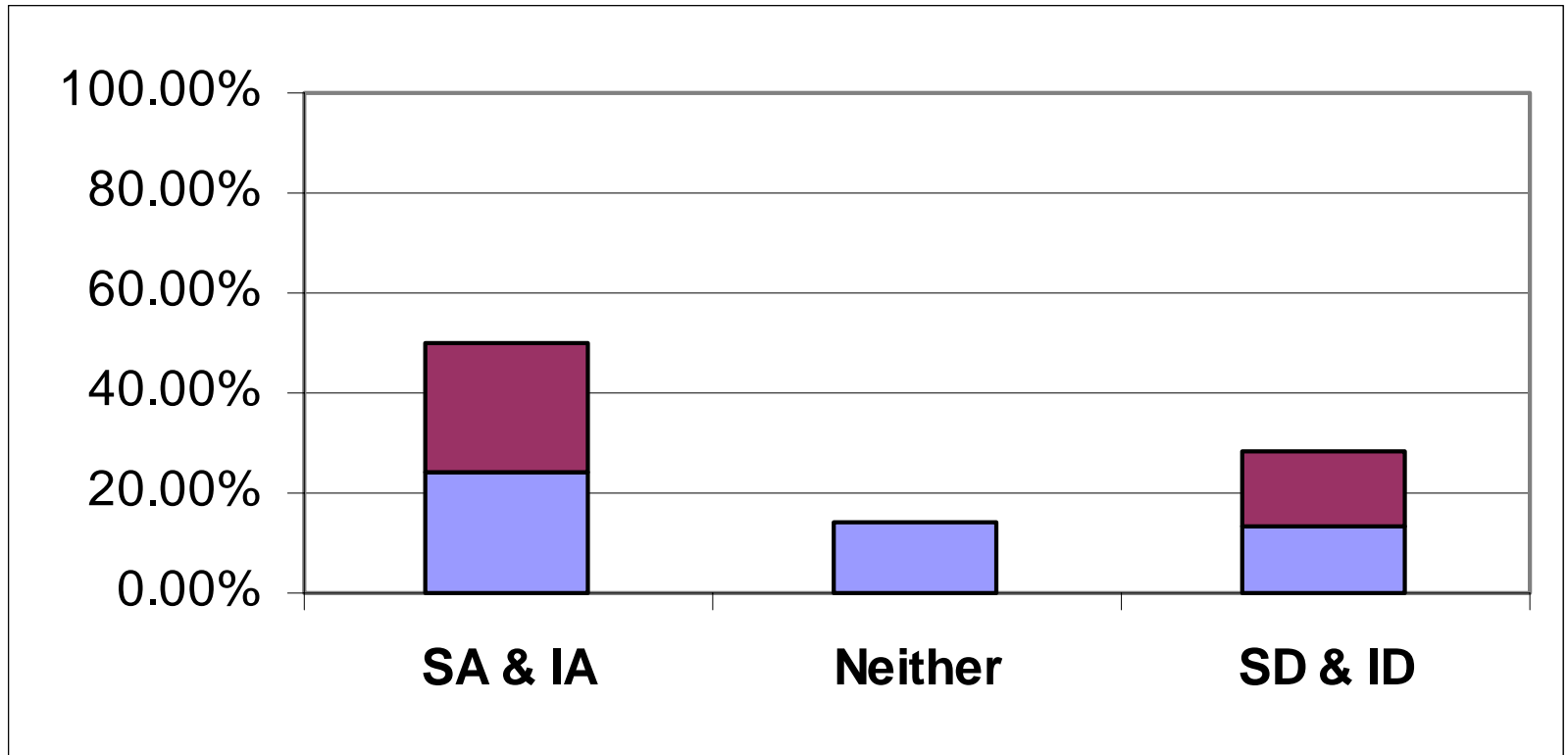
NPHPS3: NPHPS for LPHDs Should Be Incorporated into the Accreditation Program in a Subsequent Cycle- **All Respondents**



N = 166, 14 'no responses'

SA = 13, IA = 50, Neither = 84, ID = 12, SD = 7

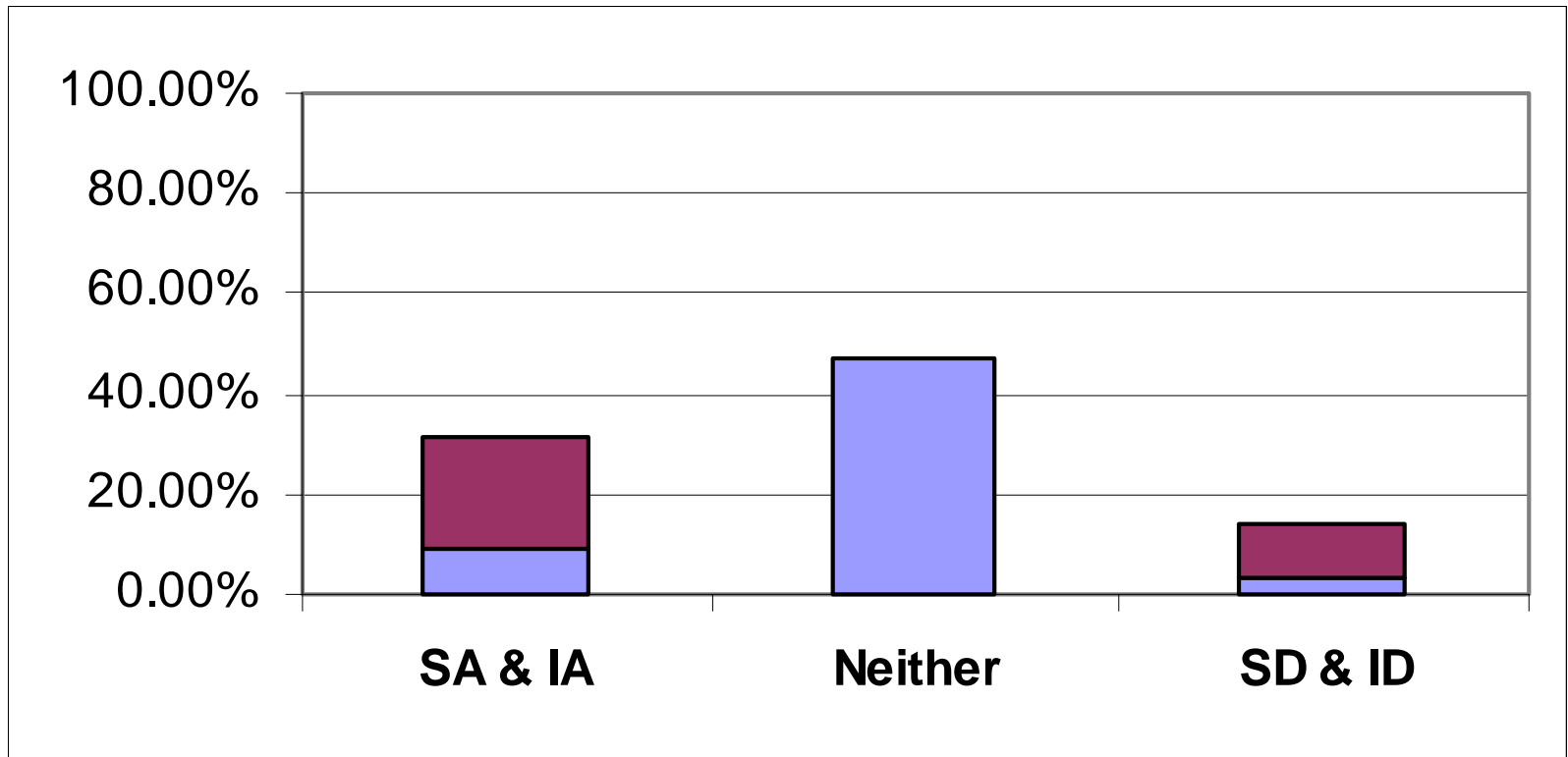
MD1: I am familiar with the indicators that address medical directors- All Respondents



N = 176, 14 'no responses'

SA = 43, IA = 47, Neither = 25, ID = 27, SD = 24

MD2: Indicators in the Administration Section of the Accreditation Tool are Sufficient to Address Medical Director Competencies- **All Respondents**



N = 175, 15 'no responses'

SA = 16, IA = 40, Neither = 84, ID = 19, SD = 6