

Michigan Local Public Health Accreditation Program

Cycle 8

Reviewer Users' Guide

*Assuring and enhancing the quality
of local public health in Michigan*



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Michigan Local Public Health Accreditation Program Reviewer Users' Guide

I- Introduction

Developed as a tool for Michigan Local Public Health Accreditation Program Reviewers, the Reviewer Users' Guide is intended to systematically outline, clarify, and explain all relevant policies, procedures, and processes integral to successful review of a local health department's performance within Accreditation Program Areas.

This document is part of a continuous quality improvement process. It is fluid and fully expected to change as Reviewers provide input regarding points that contribute to its usefulness. To provide input or ask questions, please contact one of the individuals below.

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2- Overview

History

The State of Michigan has a mature, organized, and institutionalized local public health accreditation program. The timeline begins with the establishment of the Public Health Code in 1978, followed by state/local development of Minimum Program Requirements (MPRs) in 1980. During 1989, with state technical assistance, local health departments used the Assessment Protocol for Excellence in Public Health (APEXPH) tool as a means to assess and enhance core capacities. During 1989 – 1992, Established Committees One and Two (comprising state/local public health leaders) recommended pursuing accreditation. These early collaborative efforts defined the attributes of a local health department (LHD) and served as the basis for the Michigan Local Public Health Accreditation Program (MLPHAP).

The mission of this living program is to assure and enhance the quality of local public health in Michigan by identifying and promoting the implementation of public health standards for LHDs and evaluating and accrediting LHDs on their ability to meet these standards. The Program's goals are to:

- Assist in continuous quality improvement;
- Assure a uniform set of standards that define public health;
- Assure a process by which the state can ensure local level capacity to address core functions;
- Provide a mechanism for accountability.

Governance

The governing authority for the MLPHAP is the Michigan Department of Health and Human Services. Three state agencies comprise the accrediting body:

- Michigan Department of Health and Human Services (MDHHS)
- Michigan Department of Agriculture and Rural Development (MDARD)
- Michigan Department of Environment, Great Lakes, and Energy (EGLE)

An Accreditation Commission maintained by the Michigan Public Health Institute (MPHI) serves as the advisory body for Michigan's Accreditation Program.

Standards

The state departments are responsible for establishing minimum standards of scope, quality, and administration for the delivery of required and allowable services as set forth under the Public Health Code. The current model is based on MPRs.

- MPRs are constructed through a formal process, in collaboration with state and local partners, known as the Standards Review Process.
- MPRs must be based in law, rule, department policy or accepted professional standards.

Process

The Accreditation Program assesses the ability of a LHD to meet minimum administrative capacity requirements. The Accreditation Program also conducts LHD performance reviews for contractual local



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public health operations services and certain categorical grant funded services LHDs provide. The review process requires a team of approximately 70 state agency Reviewers, of which about 20 are used for each Site Visit. The review cycle is 3 years.

There are three steps to the Accreditation process:

1. Self-Assessment
2. On-Site Review (or Site Visit for Cycle 8)
3. Corrective Plans of Action (CPA) (not applicable for Cycle 8)

During a typical cycle, following the On-Site Review and CPA processes, there are three Accreditation status options. These are:

- Accredited
- Accredited with Commendation
- Not Accredited.

Cycle 8 is a capacity building cycle; LHDs will not be evaluated on whether they meet or do not meet MPRs and Indicators during Cycle 8. As such, during Cycle 8, local health departments will retain their most recent Accreditation status until a subsequent Accreditation status is granted in Cycle 9.

Evaluation

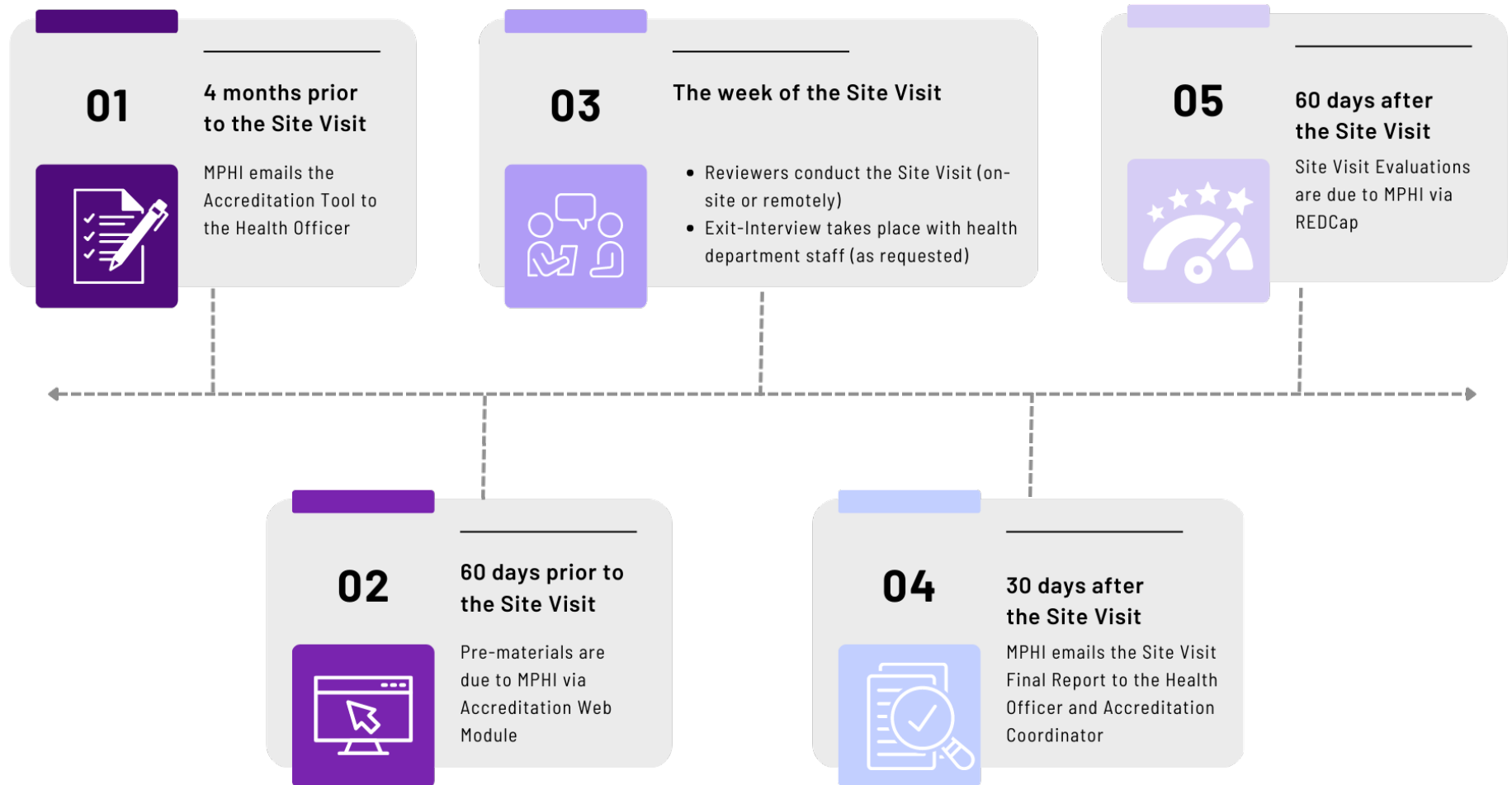
MPHI conducts ongoing evaluation of the Michigan Local Public Health Accreditation Program and its components throughout each 3-year cycle, by regularly reviewing available data, and providing data and recommendations to the Accreditation Commission. Evaluation results and data are used to improve the quality of the program.

Conclusion

The work that has been undertaken in Michigan to achieve the goals of building capacity and infrastructure development began with the creation of the Public Health Code (Public Act 368 of 1978, as amended), specifically Section 24, which begins to define the role of LHDs in Michigan. Without this framework, Michigan would have been challenged to establish an Accreditation Program with the depth and breadth present today. Continued commitment and collaboration by the MDHHS, MDARD, EGLE, MPHI, Michigan's 45 LHDs, and the Michigan Association for Local Public Health (MALPH) will enhance Michigan's Accreditation Program, improve the quality of local programs and services, and shape the future of public health in Michigan.

The Michigan Local Public Health Accreditation Program website is available for LHD staff and Reviewers. The website provides of a wealth of information about the Michigan Accreditation process and includes supporting resources such as User Guides, MPR Indicator Guide (for all or individual programs), and links to Quality Improvement resources and the Accreditation Web Module. To visit the site, use the following link: <https://accreditation.localhealth.net/>.

3- The Michigan Local Public Health Accreditation Process



4- Customer Service

A Customer Service Approach

MLPHAP is a service program. Examples of services include resources and information received prior to the Site Visit, at the Site Visit, and post Site Visit interactions. The success and quality of the program is dependent on these services, but also on interactions that occur between those who supply the services - Reviewers - and those who receive the services - members of the public health community including LHD employees and ultimately Michigan citizens. Our approach to service delivery includes the interface and relationship between Reviewers (suppliers) and the public health community (customers). It also includes a quality service approach when establishing collaborations and communications between suppliers and customers. Since the customers' voice within the Accreditation Program is central to what is done and how it is done, the development of good customer relations between Reviewers and LHDs is essential. This relationship will assist in maintaining and nurturing an increased quality of public health services provided.

In addition to reviewers, both MDHHS Local Health Services and MPHI are also service suppliers. Their responsibilities as suppliers are to provide Reviewers with timely, accurate, and appropriate information to facilitate quality services.

One mechanism for supporting quality service is through all-reviewers/managers meetings. Through meetings, reviewers experience improved communication and receive timely information and support. LHD representatives are invited to all of these meetings and often attend and actively participate. Sharing their experiences with Site Visits, Exit Conferences, and Accreditation in general has been valuable in improving Accreditation processes and increasing customer satisfaction.

The Accreditation Program will continue to be a customer-oriented program. This will be demonstrated by utilizing comments from Reviewers; integrating feedback from LHDs; improving and enhancing communication through Reviewer updates; and maintaining and upgrading the Accreditation website and web-based technology.

5- Technical Assistance

LHDs are advised to contact Reviewers for Technical Assistance when program (section) specific questions arise. The contact should ensure that every Reviewer in that section is informed about incoming Technical Assistance questions and answers. Please keep MPHI up to date on who the Technical Assistance contact for your program should be.

6- Self-Assessment

LHDs receive the Accreditation Tool four months before their Site Visit. The interim period is known as the Self-Assessment period and serves as an internal review of the department's ability to meet requirements for the delivery of administrative capacity, local public health operations, and categorical grant-funded services. The Self-Assessment assists LHDs in identifying deficient areas and prepares the department for the Site Visit.



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There are several important pieces that need to be completed by the LHD and delivered to MPHI to officially complete the Self-Assessment phase. All materials will be submitted via the Web-based Reporting Module.

7- Pre-Materials

Site Visit Schedule

The LHD will create the schedule for the five-day review week while adhering to the Scheduling Guidelines provided in Appendix I of this Reviewer Users' Guide. Please note that if your program has any special scheduling needs, e.g., the program cannot conduct reviews on a certain day of the week, these needs must be communicated to MPHI to ensure integration into future updates of the scheduling guidance. If either a Reviewer or the LHD need to make changes to this schedule after it is submitted to MPHI, due to extenuating circumstances or unforeseen events, it is critical that either a reviewer or the LHD be contacted as soon as it is evident that a change to the schedule is needed. Either a Reviewer or the LHD will then coordinate the process to arrive at a revision that is mutually acceptable. Any modifications to this schedule must be approved by both the Reviewer and LHD prior to the week of the Site Visit. Please also notify MPHI of the changed schedule once an agreement is reached.

Upon receipt of the schedule from the LHD, MPHI staff will review for any inaccuracies or omissions. Reviewers will receive an e-mail when a LHD's pre-materials are ready to view.

Exit Conferences

LHDs are strongly encouraged to participate in Exit Conferences. They are an opportunity to share findings, strengthen local and State Reviewer partnership, answer final questions, and bring closure to the section reviewed.

LHDs are able to request Exit Conferences via the web module at the same time they input their Site Visit schedule. For each section, LHDs identify the LHD representatives who will be included in the Exit Conference (e.g., Health Officer, Program Director, etc.). All State agency programs should plan to conduct an Exit Conference for their program for each LHD. More about Exit Conferences may be found on page 8 of this Reviewer Users' Guide.

Contact Information

Each LHD will complete a form containing names and contact information for key personnel, including the Health Officer, Accreditation Coordinator, and Local Governing Entity. This document will be viewable on the Web-based Reporting Module.



8- Exit Conferences

Purpose of an Accreditation Exit Conference

Reviewers are expected to provide Accreditation Exit Conferences. An Exit Conference is primarily an opportunity for Reviewers to discuss findings with a LHD. The LHD should leave an Exit Conference understanding what they are doing well, where they need to improve, and supports available to address areas for improvement.

During the Exit Conference, LHDs will have another opportunity, in addition to the Site Visit, to ask questions and respond to Reviewer findings. An Exit Conference also provides a forum to close a Site Visit and thank the LHD for their participation.

Reviewer Preparation Prior to an Exit Conference

During the Site Visit, Reviewers and the LHD should establish an approximate time when the Exit Conference will occur. This will allow the LHD time to invite appropriate personnel to attend. If Reviewers observe existing and re-occurring problems, they may want to suggest that the Health Officer attends the Exit Conference.

Reviewers should prepare comments prior to the Exit Conference. Before convening the Exit Conference, take a few minutes to privately prepare your thoughts, summary notes, paperwork, and approach to be taken.

Reviewer Opening an Exit Conference

Reviewers are responsible for facilitation of Exit Conferences and should open with participant introductions, as needed. This time may be used to explain and clarify the overall purpose of the Exit Conference and what will be covered. You may consider asking the LHD about desired Exit Conference expectations and work jointly to meet both parties' needs.

Reviewer Conducting an Exit Conference

Reviewers should provide an overview of findings relevant to the Accreditation Site Visit Report and be prepared to answer specific LHD questions. Reviewers may also wish to explain that in some sections (possibly yours), findings made during the Site Visit are preliminary and subject to management approval.

Reviewer Closing an Exit Conference

The Reviewer may want to summarize Exit Conference discussion and answer any final LHD questions. Express appreciation for LHD assistance during the Site Visit and the opportunity to visit the agency.



9- The Site Visit Report

Within 30 days from the last day of the week-long site visit, notification of the Site Visit Report's completion and access instructions are sent to the LHD (the Health Officer and/or the Accreditation Coordinator). An email is sent to the LHD's local governing entity chairperson five days after it is sent to the LHD.

Cycle 8 Site Visit Report Sections include the following for each MPR/indicator:

1. Site Visit Summary
 - a. This should include a summary of key points of discussion, an overview of current program operations, and any high-level recommendations that the reviewer is proposing.
2. Areas of Strength
 - a. This section of the report highlights things that the LHD is doing well or could be strong opportunities in the future.
3. Needed Supports
 - a. This section of the report highlights LHD needs. Needs may be beyond the scope of a program to provide assistance; however, this is meant to document and acknowledge possible needed support or assistance. For example, it may be that a local governing entity would need to provide assistance with funding or a new ordinance.
4. Support to be Provided by the State Program
 - a. Could include: training, technical assistance, funding, resources, or other
5. Other Information
 - a. Anything else you or the LHD would like noted in the report can be included here.

10- Inquiry Policy

LHDs that disagree with the Site Visit findings may request an Inquiry. If the findings in question relate to Reviewer findings, the LHD is encouraged to first contact the Reviewer to seek a resolution before submitting in writing a request for an Inquiry. The first opportunity for this to occur is at the Exit Conference. However, the Inquiry may be submitted at any time during the three-year Accreditation cycle.

The purpose of the Inquiry is to convene the LHD and relevant state agency with a third party (Accreditation Commission Chair) to share information, discuss the issue and reach agreement.

If a mutually agreeable solution is not reached during this meeting, the Accreditation Commission Chair will render a decision in the form of a recommendation to the state agency with copies to the LHD. In all cases, final disposition is the responsibility of the state agency responsible for the program under question.

To begin the process, the LHD submits in writing a request for Inquiry with a short explanation that concisely describes what findings occurred and their reasons for taking exception to those findings. The request concludes with the LHD recommending an alternative finding. The request is submitted to the Chair of the Accreditation Commission, and in the case of an Inquiry for a Site Visit finding(s), copies are sent to the state agency that performed the Site Visit.

Within two weeks of receipt of the Inquiry request, the state agency that made the original findings



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will submit to the Accreditation Commission Chair a written summary of their rationale for the findings and their response to the LHD's alternative recommendation.

Two weeks from receipt of the state agency written summary, the Chair of the Accreditation Commission will convene a meeting (usually by Teams or Zoom) of the LHD and the state agency(s) involved, plus the MPHI Accreditation Coordinator and a representative from the lead state agency, MDHHS. Both the LHD and state agency(s) will present their positions to the Chair. If consensus cannot be reached by all parties during this meeting, within 5 business days the Chair will provide a recommendation and advise both the LHD and state agency(s). In all cases the decision to act upon the Accreditation Commission Chair's recommendation is up to the involved state agency(s).

Additional actions subsequent to the Inquiry shall be by and between the LHD and state agency(s) only.

11- Annual Reviewer and Manager Meeting

Each year, MPHI convenes all State Reviewers and Section Managers for the Annual Reviewer and Manager Meeting. At this meeting, State Agency staff and MPHI discuss emerging issues and trends, and Reviewers may be asked to present on a topic of interest to the group. If Reviewers identify a topic they would like discussed at this meeting, they should contact Jessie Jones at jjones@mphi.org or 517-324-8387.

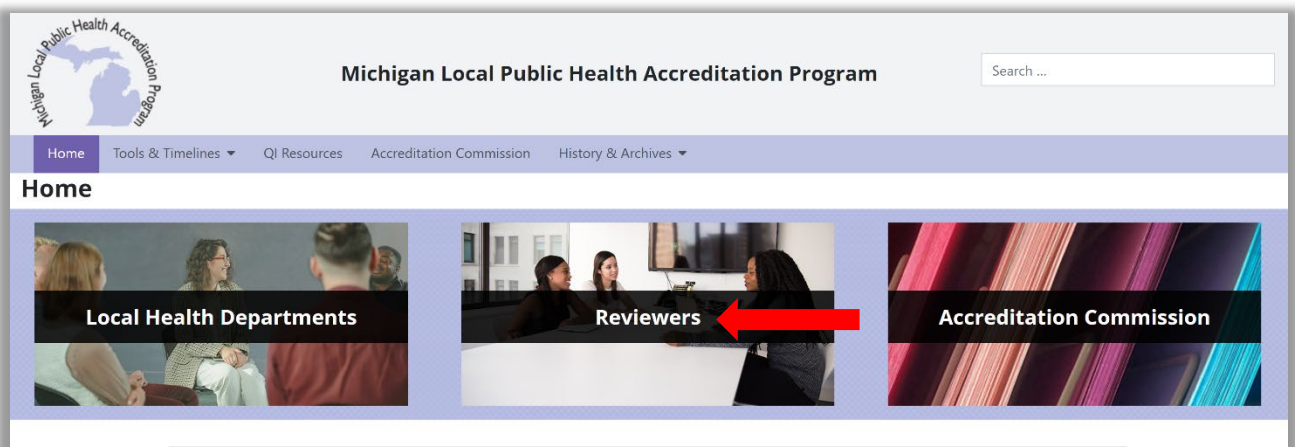
12- Navigating the Accreditation Web Module

The Accreditation Web Module is the online system for Accreditation Site Visit reporting, as well as scheduling Site Visits, Exit Conference requests, and providing key LHD contact information.

Accessing the Website

Open your Internet browser and follow this link by holding the Ctrl Key and clicking this underlined link: <https://accreditation.localhealth.net/> or by copying it into the address bar of the browser.

On the Home screen, click the "Reviewers" picture.





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You may want to create a bookmark for this website so that you can easily access it in the future without having to remember the text you would need to type in the address bar. Follow your browser's directions to add the website to your favorites.

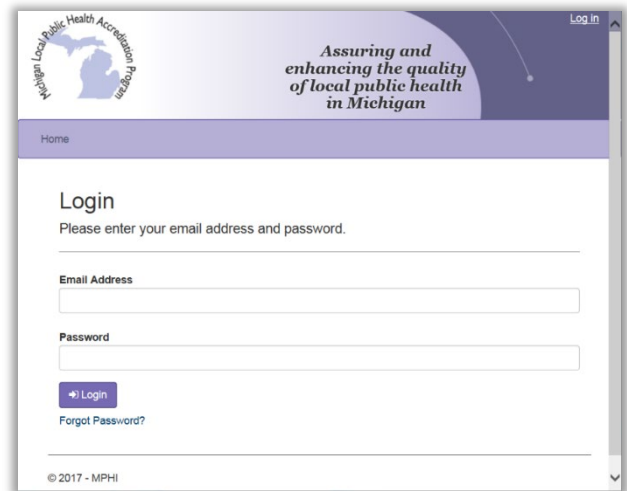
On the Reviewer Tools page, click the "Accreditation Web Module" link.



Logging in to the Accreditation Web Module

The first page of the Web-Module is a system login page. Your username will be sent to you by MPH staff, along with a link to set your password.

Should you forget your password, you can click the "forgot password" link on the sign-in page of the Web-Module to reset your password. If you have any issues logging into the Web-Module, please contact Jessica Nash at jnash@mphi.org.



Important!

Please refrain from using your browser's "Back" button to navigate within the Web Module. Because of the dynamic nature of web programming, the system does not function as ordinary websites do. Using the "Back" button at any time instead of using the navigational links provided within the module can cause multiple issues with reading or printing your reports. In short, **never use the "Back" button; always use the navigational links that are available throughout the module.**

Changing Your Password

Forgot Password

When a user has forgotten their account password, the user can reset it on the Forgot Password page. Users can access the Forgot Password page by selecting the “Forgot Password?” link on the Login page. A user can complete the Forgot Password process by following the steps listed below:

Step 1: Select the “Forgot Password?” link on the Login page

Step 2: Enter the email address associated with your account in the Email Address field

Step 3: Select the Email Link button to send yourself a reset password email

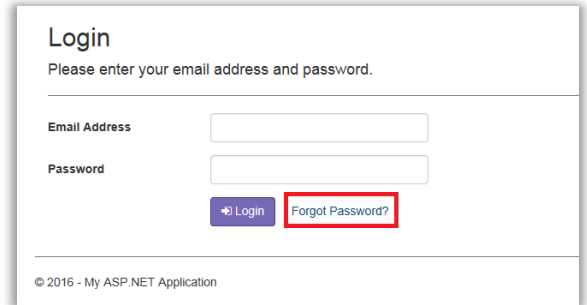
Step 4: Follow the URL provided in the email

Step 5: Enter your new password in both the New Password and Confirm New Password fields. The new password must be different than your current password, be a minimum of 8 characters, and include:

- An uppercase letter
- A lowercase letter
- A number
- A symbol

Step 6: Select the Set password button

Note: A user’s password will expire every 120 days. Upon login, a user with an expired password will be prompted to create a new one.



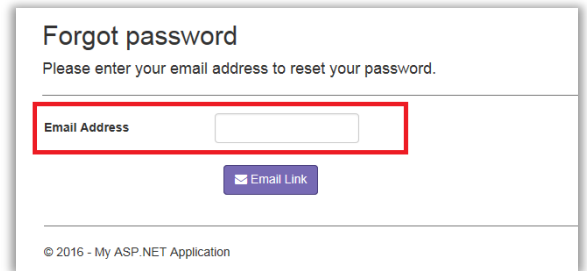
Login
Please enter your email address and password.

Email Address

Password

[Login](#) [Forgot Password?](#)

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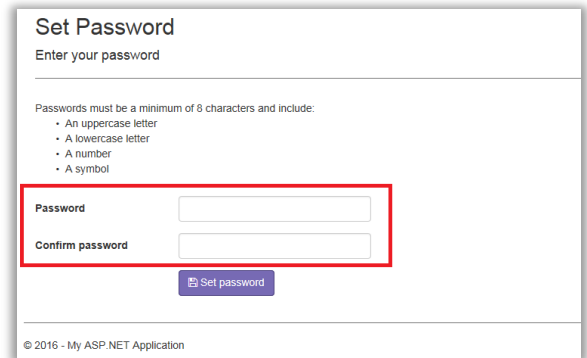


Forgot password
Please enter your email address to reset your password.

Email Address

[Email Link](#)

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Set Password
Enter your password

Passwords must be a minimum of 8 characters and include:

- An uppercase letter
- A lowercase letter
- A number
- A symbol

Password

Confirm password

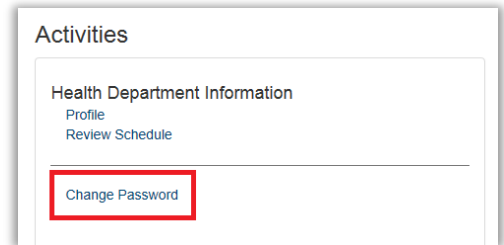
[Set password](#)

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Change Password

When a user would like to change their account password, the user can do so on the Change Password page by following the steps listed below:

Step 1: Select the Change Password link on the Home page



Activities

Health Department Information

[Profile](#)

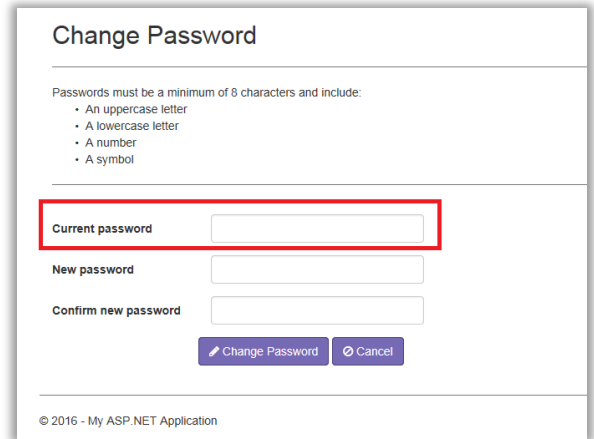
[Review Schedule](#)

[Change Password](#)

Step 2: Enter your current password in the Current Password field

Step 3: Enter your new password in both the New Password and Confirm New Password fields. The new password must be different than your current password, be a minimum of 8 characters, and include:

- An uppercase letter
- A lowercase letter
- A number
- A symbol



Change Password

Passwords must be a minimum of 8 characters and include:

- An uppercase letter
- A lowercase letter
- A number
- A symbol

Current password

New password

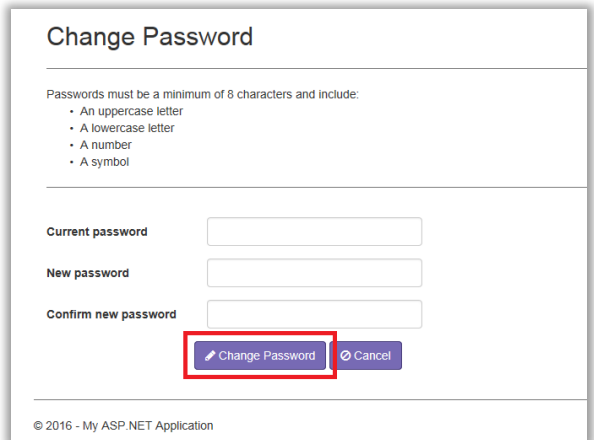
Confirm new password

[Change Password](#) [Cancel](#)

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Step 4: Select the Change Password button

Note: A user's password will expire every 120 days. Upon login, a user with an expired password will be prompted to create a new one.



Change Password

Passwords must be a minimum of 8 characters and include:

- An uppercase letter
- A lowercase letter
- A number
- A symbol

Current password

New password

Confirm new password

[Change Password](#) [Cancel](#)

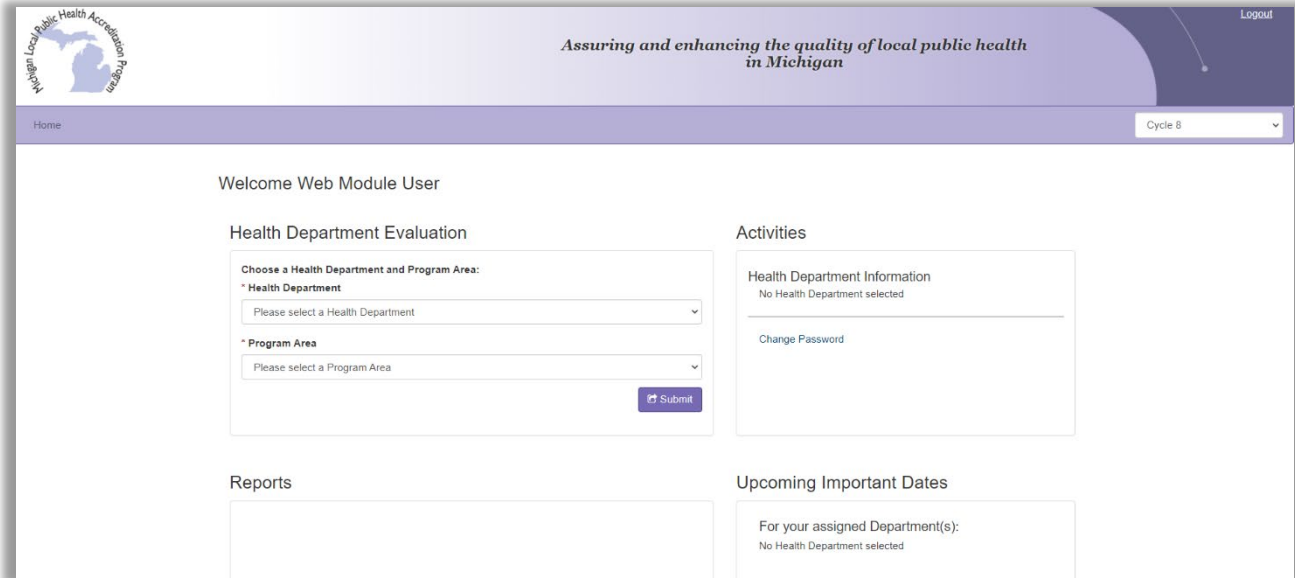
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Reviewer Home Page

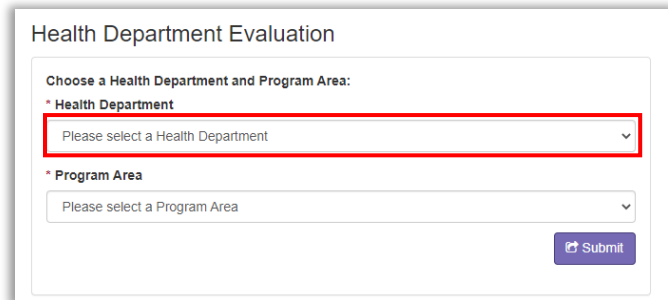
Upon login, you will be taken to your Reviewer home page. On the left side of the page, you will see a list of upcoming important dates and reminders as well as access links for pre-materials.



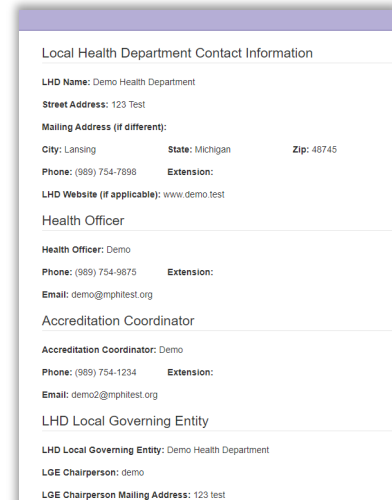
Pre-Materials

To access pre-materials, you will need to first choose an LHD from the dropdown box.

If you wish to view the selected LHD's contact information, click on the "Profile" link located under the "Health Department Information" header on the right side of the Reviewer home page.



When clicking on this link, you will be taken to the LHD's Contact Information page. On this page, you will find contact information for the Health Officer, Accreditation Coordinator, and Local Governing Entity, as well as the Site Review Week and Final Report Date.





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Click on the “Review Schedule” link on the right side of the home page to access the LHD’s review schedule. You will be taken to a page that looks like this:

Michigan Local Public Health Accreditation
Local Health Department On-Site Review Schedule

Demo Health Department
On-site Review Week of: 6/15/2024
Reports: [On-site Review Schedule Report](#)
[Complete Pre-materials Report](#)

Please place a check mark in this box if your LHD will be participating in the optional Quality Improvement Supplement (QIS)

Program Area	Scheduled	Actions			
Powers and Duties	Monday AM, Monday PM	Edit Add LHD staff Add exit attendee			
	LHD Staff Name	Title	Email Address	Phone Number	Actions
	John Smith	Health Officer	jsmith@dchd.org	(123) 456-7990	Remove
Food Service	Tuesday AM, Tuesday PM, Wednesday AM, Wednesday PM	Edit Add LHD staff Add exit attendee			
	LHD Staff Name	Title	Email Address	Phone Number	Actions
	Ashley Franks	Environmental Health Director	afranks@dchd.org	(123) 456-7890	Remove

The table in the center of the page lists the timeslots for each program, the Reviewers scheduled, and the LHD staff that will be attending the Site Visit. The Site Visit Schedule page will also indicate whether the LHD wishes to have an Exit Conference with your program.

If you wish to access the LHD’s pre-materials all at once, including schedule, Exit Conference requests, and contact information, once you are in the review schedule screen, click on “Complete Pre-materials Report.” If you wish to access a PDF of the schedule only, click on “On-Site Review Schedule Report.”

Michigan Local Public Health Accreditation
Local Health Department On-Site Review Schedule

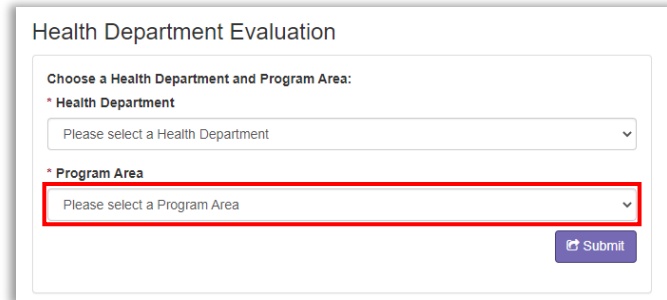
Demo Health Department
On-site Review Week of: 6/15/2024
Reports: [On-site Review Schedule Report](#)
[Complete Pre-materials Report](#)

←

←

13- Data Entry

Once you have chosen an LHD, the Program Area selection menu will default to your designated program area. If you review more than one program area, you may choose between your designated program areas by utilizing the dropdown box. Click the "Submit" button to move into draft entry.



Health Department Evaluation

Choose a Health Department and Program Area:

* Health Department
Please select a Health Department

* Program Area
Please select a Program Area

Submit

Draft Report Entry

Once you click the "Submit" button after choosing a LHD and Program Area, you will be taken to the MPR Screen.



Assuring and enhancing the quality of local public health in Michigan

Home / Powers and Duties

Demo Health Department
Powers and Duties

Draft Entry Complete
Clicking here will submit your draft to MPH.

Edits Complete, Publish Indicator Data
Clicking here will submit your final approval to MPH. No further edits may be made after submission.

You can upload files to share with program reviewers in this area.
Do not upload any files that contain protected health information or any other information protected under HIPAA.

Program Area Documents

Show 10 entries Search:

Document Name	Actions
No data available in table	

Showing 0 to 0 of 0 entries Previous Next

Minimum Program Requirement #1

A local health department shall continually and diligently endeavor to prevent disease, prolong life, and promote the public health through organized programs, including prevention and control of environmental health hazards; prevention and control of diseases, prevention and control of health problems of particularly vulnerable population groups; development of health care facilities and health services delivery systems; and regulation of health care facilities and health services delivery systems to the extent provided by law.

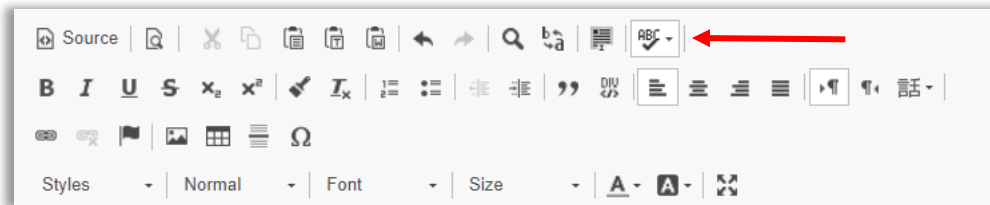
When you click on an MPR, you are then taken to a list of indicators within the MPR. Notice that on the navigation trail on the top of the page, there is an option for "Next requirement." Clicking here will take you to the next MPR.

At the end of the navigation trail, you have the option to go directly to the next indicator. Please note: you will still need to click **“Save”** before going to the next indicator. Simply clicking on “Next indicator” will not save your data.

When you have completed all indicators within an MPR, click on the name of your section within the navigation trail to return to the list of MPRs.

Spell Check

Once you enter text into a field, you will have the ability to spell check that text. Click on the button on the top right-hand corner of the field that has the letters ABC and a checkmark on it.



When the spell check tool comes across a word that is spelled incorrectly, you will be given a list of words from which to choose. If the word you are seeking is on that list, simply click on the word. If the word is not in the list, you will need to re-type the word. If spell check does not recognize a word you have used, like an abbreviation or terminology specific to your program area, click on “Ignore” to move past the word.

You are encouraged to either print out your draft or check it on the screen, because spell check will only search for words which are spelled incorrectly. It will not distinguish if the wrong word is used (e.g., to, too, and two.)

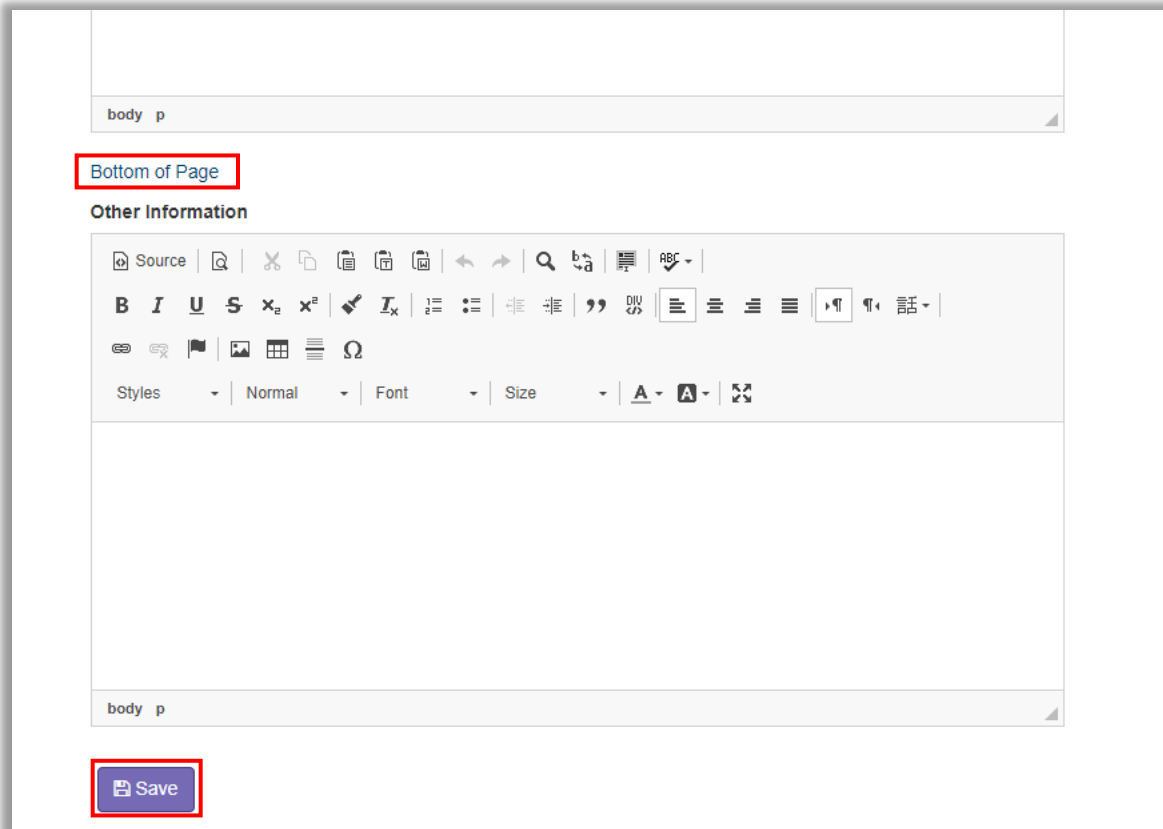
Accessing and Copying Data from a Previous Report

If you wish to copy text from a previously submitted report, you must open the report in a completely new instance of your web browser. **Do not** use the “File → New Window” or “File → New Tab” menu items, nor any other shortcuts to open a new window or tab. Instead, return to your desktop or Start menu and re-open another instance of your web browser.

Data from previous cycles (Cycles 3, 4, 5, and 6) can be found by clicking on the “View Previous Cycle Reports” hyperlink on the right side of the home page.

Saving Data

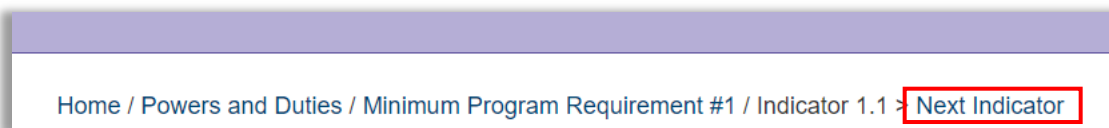
After you have completed text entry, you can click on the “Bottom of Page” link located under each text box to move to the bottom of the page and access the Save button. At the top of the Indicator screen, there are several links to navigate back to the MPR Screen or Main Menu.



Important! ***You must click “Save” before navigating away from the Indicator Screen. You must use this button to save any changes to your data.*** A website does not perform like a database, which automatically saves data as you move from question to question.

No changes to a page will be saved if there is even a single error message returned after the “Save” button is used. The website cannot submit the correct answers while holding back the incorrect one. It is an all or none process. Therefore, if you receive an error message, you must address all the issues in the message and click the “Save” button again to resave your data.

Navigating Away from the Indicator Data Entry Screen



To go to the next indicator within an MPR, simply click on the “Next indicator” link within the navigation trail. If there are no indicators left within an MPR, you will not receive the “Next indicator” link as an option. Again, you **must** click “Save” before going to the next indicator. **Simply clicking on “Next indicator” will not save your data.**



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Clicking on the MPR number on the navigation trail (in this screenshot, “Minimum Program Requirement #2”) will take you back to the list of indicators for that MPR. From there, you can choose a new indicator from the list or click on “Next requirement” to move to the next MPR.




Home / Immunization / **Minimum Program Requirement #2** / Indicator 2.2 > Next Indicator

Clicking on the name of your program (in the screenshot below, “Children’s Special Health Care Services (CSHCS)”) will take you back to the MPR Screen, where you have a couple of options.



Home / **Children's Special Health Care Services (CSHCS)** / Minimum Program Requirement #3 / Indicator 3.2 > Next Indicator

1. You can click on another MPR to view its indicators and/or complete data entry.
2. If you have finished all data entry for the LHD, you may click on the “Data Entry Complete” checkbox at the top of the page. Doing so will send an e-mail to MPH staff confirming that your draft entry is complete and ready for edits.



Michigan Local Public Health Accreditation Program
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Logout

Home / Children's Special Health Care Services (CSHCS)

Demo Health Department
Children's Special Health Care Services (CSHCS)

Draft Entry Complete
Clicking here will submit your draft to MPH!

Edits Complete, Publish Indicator Data
Clicking here will submit your final approval to MPH! No further edits may be made after submission.

Please note that if all indicators for your section are not completed, you will not have the ability to submit your draft to MPH. The selection will remain gray and unavailable. To quickly reference which indicators have been completed, please access the Section Summary on the Reviewer home page.

Clicking on the “Home” link will return you to the Reviewer home page, where you can log out, view reports, or work on another LHD’s data entry.



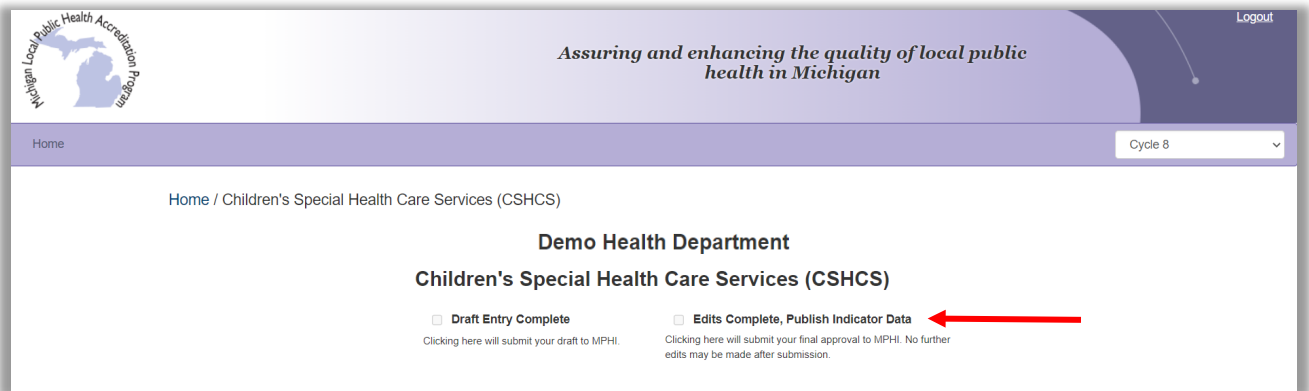
14- Reports

Final and Draft Reports

Once you complete your data entry and click the “Draft Entry Complete” option, an e-mail will automatically be generated and sent to MPH staff informing them that your draft is ready for editing. When MPH staff finishes editing your report, you will be notified via email if MPH has questions that need to be addressed before the next step of the process. Following MPH’s review, a team member from the Local Health Services Division at MDHHS will review the Site Visit Report as a whole to identify any discrepancies that need to be addressed. Once this review is complete, MPH staff will notify you via email that your report is ready to be published. Each section’s manager has account access to publish reports.

As in the previous Cycles, following MPH’s review of your report, you have three business days to confirm that your edited report is ready for publication. To make any final edits, log in to the system and choose the LHD and program area. Then click on “Sectional Status Report.” This will generate a PDF file which incorporates all changes made by MPH staff. After reviewing this document for any changes, you may log in and make any necessary edits. **Please note: No substantive edits should be made at this point in the process. If substantive changes to your report are necessary after they have notified you to publish your program’s report, please contact MPH to let them know. The report will need to be reviewed a second time.**

To publish a report, the program’s assigned Manager will need to go in and click on “Edits Complete, Publish Indicator Data.” MPH staff will be notified that the report has been approved for publication.



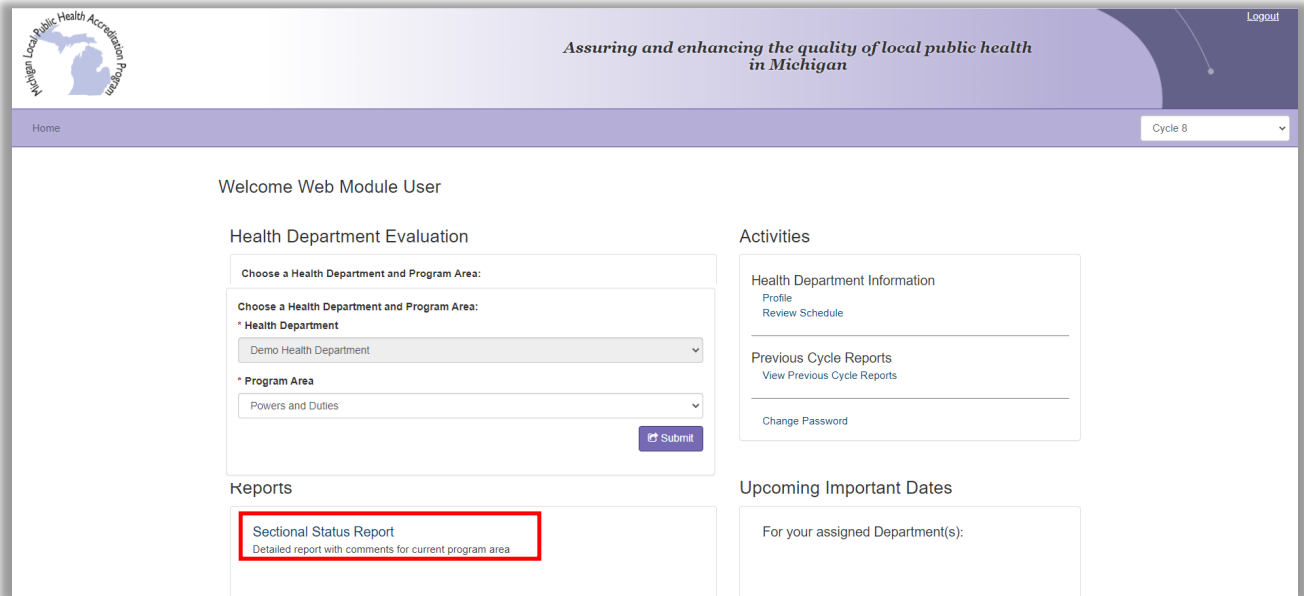
Important! After clicking the “Edits Complete, Publish Indicator Data” button, you may not make any changes to your report. MPH staff members have administrative access, so if you need to make a change to your report after submitting the final version, please contact Jessica Nash at jnash@mphi.org.

Printing Reports

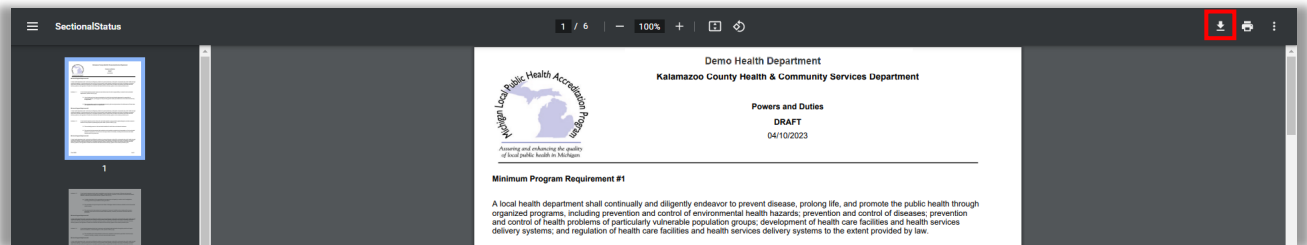
From the main menu, you may also print out a draft of your report. To do so, click on the “Sectional Status Report” link. This will generate a printable PDF of your report, which you may print out and proofread. You may generate and print a copy of your report at any time during data entry and after the draft and final reports have been submitted.



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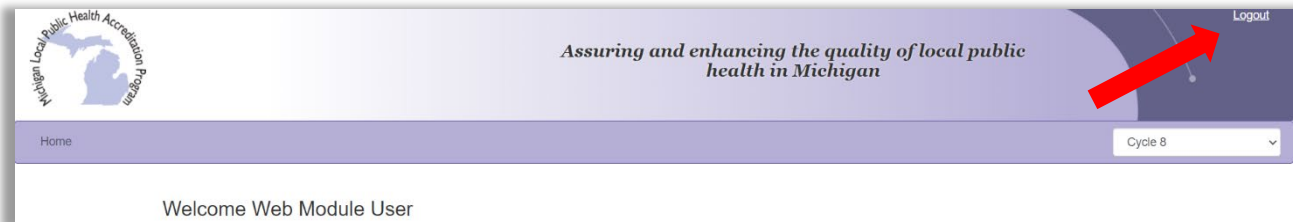


To print a PDF file, click on the “Print” button on the upper left side of the screen. This will open a print dialog box where you can choose your printer and printer options. Your version of Acrobat Reader may vary.



Exiting the Accreditation Web-Module

Important! A “Log Out” hyperlink is located at the top of the main local health department home page. Please use this hyperlink to exit the Accreditation Web Module before closing your Internet browser to ensure you are fully logged out of the system. When you simply close your Internet browser, the website cannot detect this type of exit and thinks that you are still logged into the Web Module.





Appendix I: Scheduling Guidance

1. Section I (Local Health Department Powers and Duties) is a one-day site visit, typically scheduled on Mondays. The optional Quality Improvement Supplement (QIS) will occur remotely.
2. Section II (Food Service Sanitation Program) will be a one to five day in-person site visit. Reviewer(s) will contact the LHD before the scheduled site visit to verify the exact start day and time and estimated number of days needed for the site visit.
3. Section III (General Communicable Disease) site visit will take place remotely. The LHD will be responsible for indicating a day and time for the reviewers to contact the health department to discuss their review of your materials. The Reviewer will verify the day and time selected prior to conducting the Exit Conference.
4. Section IV (Hearing) is a single half-day site visit. LHDs should schedule separately from Vision, if possible, and avoid scheduling the site visit on Fridays.
5. Section V (Immunization) will be a one-day site visit at the main LHD clinic (no visits to off-site clinics) on a day when the IAP Coordinator and Immunization Clerk are available for interaction with the Reviewer.
6. Section VI (Onsite Wastewater Treatment Management) requests a minimum of two (2) days for the site visit of a single county health department. District health departments typically require additional days. Consultation with the Reviewer is suggested for confirmation of the actual number of days that are needed to complete the site visit.
7. Section VII (HIV/STI) requests one day for the site visit of a county health department. If the Reviewer and health department agree on a remote site visit, at the Reviewer's discretion, only a half-day is needed. Please avoid scheduling this site visit on a Friday.
8. Section VIII (Vision) is a single half-day site visit. LHDs should contact the Reviewer to arrange for scheduling of the site visit prior to completing the Site Visit Schedule in the Cycle 8 Web Module.
9. Section IX (Family Planning Program) will schedule a half-day TA visit during the site visit period as a follow up to the Title X Comprehensive Site Review or as a preparation TA visit for agencies that have not yet had their Title X Review. For agencies that are scheduled in the same month as the Michigan Local Public Health Review, Reviewers will schedule a two-day site visit and request that agencies schedule a family planning clinic on the first day of the visit. Agencies should schedule a full clinic with a variety of visit types, especially initial, annual, and adolescent visits.
10. Section XI (Children's Special Health Care Services) is a one-day site visit. Please avoid scheduling on the fourth Thursday of the month.



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SECTION	TIME REQUIRED
Section I – Local Health Department Powers and Duties and optional Quality Improvement Supplement (if applicable)	1 day
Section II – Food Service Sanitation Program	1-5 days
Section III - General Communicable Disease Control	½ day (remote)
Section IV – Hearing	½ day
Section V – Immunization	1 day
Section VI – Onsite Wastewater Treatment Management	2 days
Section VII – HIV/AIDs and STI	1 day (½ day if remote)
Section VIII – Vision	½ day
Section IX – Family Planning	1/2 days for TA (2 days when combined with Title X review)
Section X – Women, Infant, and Children (WIC)	N/A – no on-site visit required
Section XI – Children’s Special Health Care Services (CSHCS)	1 day



Appendix II: Accreditation Site Visit Evaluation

Complete this survey online at: <https://chc.mphi.org/surveys/?s=CM7MDWXAAEF934WK>

Local Health Department: _____

Date: _____

Section Evaluated: _____

Sections include: **I**=Local Health Department Powers and Duties, **II**=Food Service Sanitation, **III**=General Communicable Disease Control, **IV**=Hearing, **V**=Immunization, **VI**=On-Site Sewage Treatment Management, **VII**= HIV/AIDS and Sexually Transmitted Disease, **VIII**=Vision, **IX**=Family Planning, **X**=Women, Infants, and Children Administration, and **XI**=Children's Special Health Care Services

Number of Accreditation Reviewers at the Site Visit: _____

Number of LHD staff participating in this evaluation: _____

Directions: Circle the number that corresponds to your response, using the following scale: 1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree NA = Does not apply or leave blank if you prefer not to answer	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
1. Technical assistance was offered to LHD prior to the Site Visit.	1	2	3	4	5	NA
2. Technical assistance offered prior to the Site Visit met the needs of the LHD.	1	2	3	4	5	NA
3. Reviewer(s) conduct was professional throughout the visit.	1	2	3	4	5	NA
4. The reviewer(s) maintained a needs assessment focus during the site visit.	1	2	3	4	5	NA
5. The reviewer(s) worked with the LHD to identify needed supports.	1	2	3	4	5	NA
6. The reviewer(s) discussed current LHD capacity in alignment with MPRs/Indicators.	1	2	3	4	5	NA
7. The reviewer(s) provided information about available capacity building assistance opportunities as necessary.	1	2	3	4	5	NA
8. The reviewer(s) maintained a quality improvement focus during the site visit.	1	2	3	4	5	NA
9. The reviewer(s) provided quality improvement recommendations as necessary.	1	2	3	4	5	NA
10. Recommendations provided by the reviewer(s) are actionable.	1	2	3	4	5	NA
11. The reviewer(s) were knowledgeable on the subject of their section.	1	2	3	4	5	NA
12. The reviewer(s) listened carefully to LHD responses to questions.	1	2	3	4	5	NA
13. The reviewer(s) worked with the LHD to identify program strengths.	1	2	3	4	5	NA
14. The reviewer(s) worked with the LHD to identify program challenges.	1	2	3	4	5	NA
15. The written Site Visit Report made use of the "Areas of Strength" category.	1	2	3	4	5	NA
16. The written Site Visit Report made use of the "Needed Supports" category.	1	2	3	4	5	NA
17. The Site Visit Report provided for this section is very helpful to use to improve the quality of this program.	1	2	3	4	5	NA
18. Overall, the reviewer(s) did an excellent job.	1	2	3	4	5	NA
19. The Cycle 8 Accreditation Site Visit process has assisted the LHD in assessing local needs and preparing for the next Accreditation Cycle.	1	2	3	4	5	NA
20. Our LHD knows who to reach out to for further assistance for this program.	1	2	3	4	5	NA



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1. List the strong points of the site visit:

2. List areas of the site visit in need of improvement:

3. Any additional comments, concerns, or suggestions.

4. Who may we contact for additional information?

Note: if you would like to be contacted about your responses, please include name and telephone number below.

Survey Respondent Name: _____

Telephone: (____) _____