

Melanie Glaus has thrived in the past 12 years as director of the Mississippi County Health Department in Missouri, in part because she is receptive to change. Her commitment to public health shows as she and her staff improve health for this agricultural community of 14,000. Melanie is walking the talk of meeting public health standards and getting ready to prove her department's excellence. Mississippi County has signed on to be one of the first health departments to go through Missouri's new Voluntary Accreditation program.

Missouri Turning Point Nothing to Lose, Everything to Gain

Accreditation is a hot topic in public health. As a nation, we are debating the costs and benefits, logistics and feasibility of implementing a national accreditation program. Fear is a factor, as health departments wonder how accreditation will affect funding and staffing.

Although national accreditation is in debate, in 2000, the Missouri Turning Point partnership decided to move forward and create their own accreditation system to improve public health and ensure quality. The coalition of local and state public health, private entities, and academia knew that an independent party's stamp of quality and a sense of professional legitimacy would reap benefits for public health as they continue to work with diverse partners, the public, and political leaders. As they developed the system, they sought feedback along the way from every level of the health

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system. Most importantly, an independent 501(c)3, the Missouri Institute for Community Health (MICH), was created to administer accreditation. All along the way the process was kept 100% transparent to the public. As contentious issues arose, subcommittees were developed to come up with solutions. And they did. For example, academic partners and the state health department responded to concerns about making workforce credentials required by

developing training programs so it is possible for the workforce to get the needed training. Resources such as distance-learning programs and short courses were developed alongside the standards.

After pilot testing and refining, the system was ready to be rolled out. In September 2003, Melanie attended a meeting of Missouri local health departments, devoted entirely to reviewing the accreditation manual and answering questions about the process of applying for accreditation. Melanie was motivated to get her department accredited because the lack of formal accreditation had been an obstacle to arranging for nursing student rotations. Walking into the room, Melanie was confident that her department was performing the core functions of assessment, assurance, and policy development. She also knew that they were providing the Ten Essential Services to their community. Still, a tinge of fear remained as she wondered if requiring explicit qualifications for her nurses would make them even harder to hire. In rural areas nurses with bachelor's degrees are hard to find.

As she went through the day and discovered that the workforce requirements were reasonable and that training opportunities to help meet the standards were available, she relaxed. Over the course of the day Melanie could feel the tension seeping out of the room. Melanie and many of her colleagues came to the realization that accreditation would offer benefits, and that at this time, they had nothing to lose, and everything to gain. This voluntary accreditation system was of their own making and served their needs. Fear has been replaced by optimism as Missourians take ownership and responsibility for meeting the standards of public health.

At a Glance: *Missouri*



Missouri Institute for Community Health

Aim of Missouri Turning Point

In Missouri, the Turning Point Partnership created the Missouri Institute for Community Health (MICH), an independent 501(c)3 to facilitate planning and decision making among health care providers, the private sector, community colleges, universities, health and human service associations, and state and local government. Missouri Turning Point aims to improve the ability of its public health workforce to address priority health issues and be prepared for public health emergencies thereby improving the health and safety of all Missourians.

Missouri's Public Health Challenges

In recent years Missouri has fallen in the United Health Foundation's State Health Rankings from its place as the 26th healthiest state to the 32nd healthiest in overall key health indicators. Missourians are experiencing a significant increase in the number of deaths due to heart disease, cancer, and infectious disease. Combined with increases in smoking, children living in poverty, and a general lack of health insurance, the health of Missourians is in danger. A shortage of governmental resources has devastated the public health system and its capacity to respond to emerging threats.

Missouri's local public health departments vary in the level of service they provide and how closely they perform the core functions and essential services. Departments lacking accreditation from a designated neutral body sometimes experience a barrier to establishing credibility when working in coalitions with partners from accredited organizations.

Missouri Turning Point's Contribution to Improving Public Health

Missouri Institute for Community Health has:

- Developed and implemented a voluntary accreditation system for local public health departments. MICH promotes the benefits of voluntary accreditation: public recognition, enhancement of potential for increased local support and grant funding, a climate for ongoing self-study, and identification of areas of best practice or where improvement is needed.
- Encouraged and supported county-wide health assessment, planning, and prioritization of community health problems.
- Developed, with partners, ways to increase the skills and capacity of the public health workforce.
- Fostered the use of standards of practice in the performance of essential public health activities.

For More Information

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