The Kentucky Public Health Association (KPHA) supports voluntary accreditation of state and local health departments as a means to increase accountability, assure competency, and promote standardization and quality of services. It is estimated that a minimum of $200,000 for each of three years would be needed to plan and implement a Kentucky Accreditation Program.

As the field of public health moves forward in the 21st century, new challenges require greater effort for quality assurance and collaboration among public health agencies at the local, state and federal level. At all levels, public health agencies must not only be more efficient in operation, but also more effective in meeting the needs of their constituents. In a climate of competition for limited public resources, public health agencies must offer clear demonstrations of the value of investing public funds in their services.

Nationally, the “Exploring Accreditation Project” with representatives from leading public health organizations released a report in September 2006 detailing recommendations for establishment of a national, voluntary public health accreditation program. Among other elements of these recommendations, the report encouraged simultaneous development of state accreditation programs, as they provide “a laboratory for national programs and national standards.” The national program should recognize state programs with standards at or above those of the national program, and both should “continue to support and learn from each other.” (page 9)

Development of a voluntary state accreditation program was endorsed by public health administrators in Kentucky through a 2006 survey conducted by the Kentucky Health Department Association (KHDA). Over half (58%) expressed support for development of a Kentucky model, in recognition of the benefits of accreditation, and that a national program is still five or more years away.

There are multiple benefits to a state accreditation program:
1) Establish standards designed to fit the structure, mission, needs and resources of Kentucky’s public health system,
2) Establish indicators for measuring success in improving the health status,
3) Provide a structure for measuring accountability which can be used by all local health departments in Kentucky,
4) Promote certification of a qualified workforce,
5) Position Kentucky for a smooth transition when accreditation becomes fully implemented on a national level (target 2011).

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2 University of Kentucky, KPHLI Change Master Project, 2006-2007, page 123.