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## Editorial Comment: Keeneland Conference Plenary Sessions: Carol Moehrle

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## **Keywords**

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The advent of accreditation of health departments, local, state, territorial and tribal, is eminent. After a number of years of gestation, beginning with the Exploring Accreditation Report<sup>1</sup> through the establishment of the Public Health Accreditation Board, it has been a long and arduous process, but we will see the accreditation of our first cohort of health departments in the fall of 2012. The chronology and direction of PHAB are well articulated in the session from Carol Moehrle, current Chair of the PHAB Board of Directors, in this issue of *Frontiers*. This work has tremendous implications for the discipline of public health and various public health constituents. For the researcher, there are implications that PHAB brings to the table ranging from the value of accreditation in the performance and outcomes associated with accreditation the availability of data to examine the performance of health departments.<sup>2</sup> For practice, the accreditation of health departments also are a watershed to demonstrate practitioners ability to meet a national set of standards that should assure the communities they serve of their capacity and the funders of their accountability and provide a platform for continued improvement of the public health services that our public health practice colleagues provide.<sup>3</sup>

Those of us on the PHAB Board are pleased and excited by the interest and understanding of accreditation that we have seen. This is apparent in a number of items; the number of health departments that indicated an interest in proceeding with the accreditation process in the next two year, the number of health departments in the accreditation process itself, which has exceeded our expectations and the number of hits that the PHAB website tutorials have experienced, all attest to the interest in our practice community in accreditation.

The potential for the use of accreditation is substantial. The ability, for example, of accreditation to assure federal funders that their categorical funds will be managed well, with quality improvement in their programs and a level of excellence, likely could usher in an era of less paper work required by those federal programs. It is a sure indication to boards of health that their health department is functioning optimally and that they are assured of the quality of the services, clinical and population, that their health department provides. It also, like the National Public Health Performance Standards Program, provides an opportunity for the community and our partners in the public health system to understand what public health is, what the health department does and how they contribute to the public health system and their role in improving the public's health.

So, look with anticipation for PHAB's annual meeting in the fall to see the initial cohort of accredited departments, they are the harbinger of a new era in public health, a continued manifestation of the renaissance that is occurring, even in the face of funding erosion, in public health. It will be a time for celebration by all of us that are in the discipline.

## References

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