



HAI/AR and Accreditation Crosswalk Toolkit

HAI/AR and health department staff can use the HAI/AR and Accreditation Crosswalk Toolkit to understand connections between HAI/AR program activities and [Version 2022 PHAB Standards and Measures](#).¹

PHAB Domain	PHAB Standard	HAI/AR Program Activities	Context in Accreditation	Opportunities for HAI/AR Programs to Connect Activities with Accreditation
<p>Domain 1: Assess and monitor population health status, factors that influence health, and community needs and assets.</p>	<p>Standard 1.1: Participate in or lead a shared process resulting in a comprehensive community health assessment (CHA).</p>	<p>Working with public health, healthcare, and community partners to:</p> <ul style="list-style-type: none"> • Detect, control, and prevent HAI/AR (including COVID-19) infections and outbreaks. • Promote appropriate antibiotic use. • Assess healthcare facilities' infection prevention and control (IPC) policies and practices. 	<p>A comprehensive CHA created through a shared and community-driven process provides useful information about the health of the community.</p>	<p>Incorporate HAI/AR partnerships and data within the CHA process, such as:</p> <ul style="list-style-type: none"> • COVID-19, HAI, and AR infection data across healthcare and long-term care settings. • Antibiotic prescribing and use data from different providers and healthcare settings. • Infection Control Assessment and Response (ICAR) data from healthcare facilities and long-term care settings.

¹ The HAI/AR Accreditation Crosswalk is a supplemental tool and not intended to provide all definitive linkages between PHAB standards and HAI/AR program activities. Completion of the examples provided does not guarantee conformity to PHAB documentation requirements.

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<p>Domain 1: Assess and monitor population health status, factors that influence health, and community needs and assets.</p>	<p>Standard 1.2: Collect and share data that provides information on conditions of public health importance and on the health status of the population.</p>	<p>Using and sharing HAI/AR and antibiotic use data from various sources including:</p> <ul style="list-style-type: none"> • The National Healthcare Safety Network (NHSN) • Healthcare worker and long-term care resident vaccinations • Healthcare outbreaks • Antibiotic use and resistance • Medication safety 	<p>Health departments need information from many sources, including other organizations, to provide a complete picture of the population's health and compare it across populations and time.</p>	<p>Provide examples of:</p> <ul style="list-style-type: none"> • HAI/AR data systems • State-based disease reporting or outbreak tracking systems • Data sharing (e.g., via HAI/AR prevention coalitions or advisory groups) • Electronic data exchange • Data use agreements • Use of data standards
<p>Domain 1: Assess and monitor population health status, factors that influence health, and community needs and assets.</p>	<p>Standard 1.3: Analyze public health data, share findings, and use results to improve population health.</p>	<p>Using setting-specific and demographic HAI/AR data (quantitative and/or qualitative) to target prevention efforts.</p> <p>Improving antibiotic and medical device use.</p> <p>Informing public health practice.</p> <p>Advancing programs and policies.</p>	<p>Health departments should use all available data to guide the development and assessment of public health policies, procedures, programs, and interventions. Health departments should distribute data analysis results.</p>	<p>Analyze data from many sources and share reports or other resources with public health partners, providers, and the public to facilitate public health improvement activities. For example:</p> <ul style="list-style-type: none"> • Analyze and share available HAI/AR, antibiotic prescribing, or vaccination data from healthcare settings (e.g., state or national NHSN reports, IQVIA data) to focus prevention interventions. • Evaluate findings from assessments (e.g., ICAR or Infection Control Facility Assessments (ICFAs)) that can help improve quality of practice and care in healthcare facilities, long-term care settings, and across communities.

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<p>Domain 2: Investigate, diagnose, and address health problems and hazards affecting the population.</p>	<p>Standard 2.1: Anticipate, prevent, and mitigate health threats through surveillance and investigation of health problems and environmental hazards.</p>	<p>Working with healthcare and long-term care settings to detect, investigate, and respond to new or emerging HAI/AR outbreaks or threats.</p> <p>Reporting from regional, state, and clinical laboratories in a timely manner.</p> <p>Improving the use of surveillance data to identify and prevent HAI/AR outbreaks.</p> <p>Targeting prevention and containment efforts in healthcare settings.</p>	<p>Health departments have systems, processes, and protocols to conduct surveillance of conditions and timely investigations.</p> <p>Health departments ensure 24/7 access to resources from surveillance sites for rapid detection, investigation, containment, and mitigation of health problems.</p>	<p>Contribute towards anticipating, preventing, and mitigating health threats through surveillance and investigation. For example:</p> <ul style="list-style-type: none"> • Use data from surveillance systems (e.g., NHSN, National Notifiable Diseases Surveillance System (NNDSS), AR information exchanges, AR Lab Network, (point prevalence surveys) to track conditions such as reportable diseases or HAIs and detect and control outbreaks across healthcare settings. • Develop and implement protocols or procedures to address HAI/AR threats, such as acting within one business day of receiving an AR Lab Network alert. • Maintain regular communication with hospitals to receive reports on AR, AU, and patient safety indicators.

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<p>Domain 2: Investigate, diagnose, and address health problems and hazards affecting the population.</p>	<p>Standard 2.2: Prepare for and respond to emergencies.²</p>	<p>Responding to and investigating reports of HAI outbreaks and new or emerging AR threats across healthcare and long-term care settings.</p> <p>Building relationships and communicating with affected facilities.</p> <p>Working with other programs in state and local public health (e.g., emergency preparedness, mycotics, respiratory diseases, viral pathogens).</p> <p>Working with providers and healthcare partner organizations.</p>	<p>Health departments maintain a public health emergency operations plan (EOP), a continuity of operations plan (COOP), and mechanisms for engaging staff in surge scenarios and communicating with the public during emergencies. Health departments engage in efforts to improve preparedness and response through exercises and after-action reports (AARs).</p>	<p>Be involved in developing, testing, and implementing the EOP where it addresses HAI/AR detection and response and other healthcare infection control and patient safety issues (e.g., processes that address the requirements of higher-risk populations like rural healthcare facilities or remote long term care settings during an emergency).</p> <p>HAI/AR programs may have examples such as protocols that demonstrate 24/7 emergency communication with response partners, like local and regional emergency preparedness committees.</p>

²Health departments that are currently recognized as Project Public Health Ready (PPHR), a criteria-based training and recognition program of the Centers for Disease Control and Prevention (CDC) and National Association of County & City Health Officials (NACCHO) are exempt from submitting documentation to demonstrate conformity with Standard 2.2 requirements. Rather than submitting documentation for Standard 2.2, PPHR recognized health departments may choose to submit their “Letter of Recognition” or a screenshot from the NACCHO website demonstrating current PPHR recognition. Evidence must include a date and demonstrate recognition has not expired at the time documentation is submitted to PHAB.

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<p>Domain 3: Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.</p>	<p>Standard 3.1: Provide information on public health issues and public health functions through multiple methods to a variety of audiences.</p>	<p>Developing communications materials tailored to patients, families, and the public on HAI/AR prevention and infection control practices, AR, appropriate antibiotic use, hand hygiene, injection safety, sepsis prevention, and other aspects of infection control and quality improvement in healthcare.</p>	<p>Health departments offer essential information to the public on what public health is, what they do, and why it matters. They need an accessible website, print materials, social media, and other methods and formats for effective public health communication to reach a wide audience.</p>	<p>Continuously strive to provide timely, clear, and actionable information, especially pertaining to responses or outbreaks, and to provide data when available. For example:</p> <ul style="list-style-type: none"> • Using the health department’s branding on communication materials to ensure public recognition. • Coordinating and disseminating information through use of the Public Information Officer/Media Relations function of the health department, as appropriate. • Using communication strategies to tailor messaging to audiences appropriately, like translating messages into languages spoken in the community. • Disseminating information through multiple communication channels, such as the health department website and social media.
<p>Domain 3: Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.</p>	<p>Standard 3.2: Use health communication strategies to support prevention, health, and well-being.</p>	<p>Developing communications campaigns and strategies to promote CDC’s infection prevention and control and antibiotic use guidance across healthcare and in the community.</p>	<p>Health departments use health education and promotion to disseminate knowledge, promote healthy behaviors, and affect behavior change. Health departments use evidence-based or promising practices to design and implement communication strategies which foster actions to promote health.</p>	<p>Incorporate HAI/AR education into health department communication strategies to support health and well-being (e.g., using CDC Project Firstline resources to develop health messages around evidence-based practices).</p> <p>Health departments must provide program specific examples to meet this standard; the HAI/AR program may provide an appropriate example.</p>

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<p>Domain 4: Strengthen, support, and mobilize communities and partnerships to improve health.</p>	<p>Standard 4.1: Engage with the public health system and the community in promoting health through collaborative processes.</p>	<p>Collaborating with public health and healthcare partners, long-term care settings and associations, hospitals, academic hospitals, and others to educate and implement HAI/AR prevention and outbreak response activities.</p>	<p>Health departments collaborate with community members and other members of the public health system to foster a sense of shared responsibility and increase the effectiveness of health improvement activities.</p>	<p>Include engagement with community members or participation in community health coalitions as examples.</p>
<p>Domain 5: Create, champion, and implement policies, plans, and laws that impact health.</p>	<p>Standard 5.1: Serve as a primary and expert resource for establishing and maintaining health policies and laws.</p>	<p>Serving as an expert resource to assess policy needs and barriers for HAI/AR reporting, response, and prevention in their jurisdictions. HAI/AR Programs engage with their state or local legislative liaisons, patient safety or advocacy groups, professional organizations, federal agencies, and other partners to inform and educate relevant stakeholders about HAI/AR policy needs.</p>	<p>Health departments maintain awareness of policies and laws under consideration in their jurisdiction and their impact on public health. Health departments should engage with policy makers to ensure they consider current public health information in setting and revising policies and laws.</p>	<p>Provide issue briefs, memos, or talking points on emerging HAI/AR threats, needs for reporting changes, or other IPC or HAI/AR issues to inform policy makers and policy development.</p> <p>HAI/AR Programs and the HAI/AR Advisory Group can contribute to the development and review of public policies to address HAI/AR and IPC needs.</p>

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<p>Domain 5: Create, champion, and implement policies, plans, and laws that impact health.</p>	<p>Standard 5.2: Develop and implement community health improvement strategies collaboratively.</p>	<p>Connecting to and collaborating with other public health agencies, healthcare facilities, healthcare organizations, state and local partners, healthcare quality improvement partners, and many others to share information, training, and data, as well as identify prevention and health improvement strategies that will best serve their communities.</p>	<p>Health departments must show evidence of a collaboratively developed and comprehensive community health improvement plan (CHIP). Health departments must also demonstrate how they incorporate health equity into programs and how it is addressing factors that contribute to specific populations' higher health risks and poorer health outcomes.</p>	<ul style="list-style-type: none"> • Provide HAI/AR data or infection control and prevention approaches, tools, or promising practices for collaborative review when determining strategies to include in a community health improvement plan. • Implement relevant components of the community health improvement plan activity or strategy if they include HAI/AR priorities in the adopted state/community health improvement plan. • HAI/AR program activities can be examples of addressing the needs of specific populations with higher health risks, such as persons in long-term care or dialysis settings.

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<p>Domain 6: Utilize legal and regulatory actions designed to improve and protect the public’s health.</p>	<p>Standard 6.1: Promote compliance with public health laws.</p>	<p>Complying with federal, state, and local policies related to HAI/AR reporting, including state survey requirements. Programs exercise their public health authority by promoting adherence to these policies and requirements. They work to educate and collaborate with facilities and partners to ensure proper reporting, and promote healthcare quality, including rapid identification of outbreaks, infection control breaches, and emerging AR threats.</p>	<p>Health departments must ensure staff are trained on laws to promote and protect health and respond to complaints related to public health regulations. If the health department has enforcement authority, they must also demonstrate protocols for inspections of regulated entities and enforcement actions.</p>	<p>Point to procedures, protocols or collaborations related to compliance or enforcement actions, such as:</p> <ul style="list-style-type: none"> • Working with state surveyors, healthcare accreditors and other compliance and regulatory partners to ensure mutual understanding of roles and alignment of quality and compliance efforts. • Educating facilities about HAI/AR and IPC policies and reporting requirements. • Developing and promoting procedures and protocols for adherence to HAI/AR disease or outbreak reporting requirements.

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<p>Domain 7: Contribute to an effective system that enables equitable access to the individual services and care needed to be healthy.</p>	<p>Standard 7.1: Engage with partners in the health care system to assess and improve health service availability.</p>	<p>Keeping an updated inventory of all the healthcare facilities or businesses in their jurisdiction where medical procedures are conducted or healthcare is delivered (e.g., outpatient clinics, long-term care settings, assisted living, group homes, etc.) to understand where healthcare is being delivered. HAI/AR programs can develop connections with the regulatory or oversight entity for those facilities or businesses to help address issues related to infection prevention or quality of care that may arise.</p>	<p>Health departments collaborate with a variety of partners in health delivery systems, as part of their role as a health strategist, to identify and address gaps and barriers in access to health services.</p>	<p>Support health department efforts by:</p> <ul style="list-style-type: none"> • Building partnerships with healthcare system partners to assess and discuss quality of health service, HAI/AR disparities, or adverse events. • Engaging with healthcare system partners to identify populations experiencing barriers to quality healthcare. • Engaging with licensing, certification, or medical boards that oversee healthcare quality and services to discuss strategies to improve the availability of quality healthcare services.

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<p>Domain 7: Contribute to an effective system that enables equitable access to the individual services and care needed to be healthy.</p>	<p>Standard 7.2: Connect the population to services that support the whole person.</p>	<p>While this standard is not program-specific, all health department programs, including HAI/AR, can support the needs of their community and assist people in finding quality healthcare and social services.</p>	<p>Health departments work to identify barriers and gaps in services. They can develop and implement strategies to address those gaps and mobilize community assets to promote access to support the well-being of the whole person (E.g., behavioral health, social services, health care, long-term care, transportation, and other needs)</p>	<p>Contribute to an overall health department strategy of connecting people to services, such as:</p> <ul style="list-style-type: none"> • Offering resources such as CMS’s Care Compare webpage when community members ask for quality ratings of healthcare facilities, such as long-term care settings or hospitals. • Establishing a referral system within the health department to guide inquiring community members to the program that best meets their needs (e.g., referring community members asking for help with behavioral health or social services to the appropriate health department program or to local behavioral health facilities or social services). • Developing strategies with health department emergency services partners to ensure systems of care at alternate locations if healthcare facilities experience service disruptions in an emergency.

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<p>Domain 8: Build and support a diverse and skilled public health workforce.</p>	<p>Standard 8.1: Encourage the development and recruitment of qualified public health workers.</p>	<p>Working with public health, healthcare facilities, and partners to recruit, incentivize, and support staff with appropriate experience and expertise in IPC and HAI/AR, antibiotic use, laboratory methods, and data analytics.</p>	<p>To meet staffing needs, health departments must work with partners to identify and develop public health professionals and encourage qualified individuals to enter the field. Recruitment and hiring should aim to build a workforce with the knowledge, skills, and demographics to meet the needs of the community served by the health department.</p>	<p>Contribute to the health department’s overall strategy for development and recruitment of public health workers by:</p> <ul style="list-style-type: none"> • Developing HAI/AR recruitment and retention strategies and staffing pipelines for epidemiology, outbreak response, infection prevention, data analysis, and laboratory through professional networks like APIC, CSTE, APHL, ASM or by connecting with other clinical partners. Programs can develop these strategies with the health department's Human Resources office. • Engaging with academic institutions, including local community colleges (e.g., Project Firstline Community College Collaborative), for recruitment and promotion of careers in the public health field related to HAI/AR (E.g., offering internship or practicum opportunities; developing curricula that support HAI/AR or IPC programs).

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<p>Domain 8: Build and support a diverse and skilled public health workforce.</p>	<p>Standard 8.2: Build a competent public health workforce and leadership that practices cultural humility.</p>	<p>Aiming to ensure a diverse, competent workforce with appropriate IPC and HAI/AR expertise; providing relevant training and experiences to develop knowledge, expertise, and leadership in infection control, HAI/AR outbreak response, AR laboratory testing, use of available data systems (e.g., NHSN), and antimicrobial stewardship to support the needs of the healthcare facilities and systems they serve with societal and cultural awareness.</p>	<p>Health departments must provide a workforce development plan that includes an assessment, an understanding of current capacity and gaps, and action strategies. The health department must also identify training opportunities including those to address equity, diversity, inclusion, or cultural humility.</p>	<p>While the health department’s Human Resources staff will likely provide documentation, HAI/AR Programs can contribute to a health department’s workforce development needs by:</p> <ul style="list-style-type: none"> • Providing input to a health department-wide workforce development plan by providing data from state and local HAI/AR programs’ workforce needs assessments and responsive hiring strategies for providing culturally appropriate, tailored training for students or early career professionals in IPC, HAI/AR, and appropriate antibiotic use across all healthcare settings. • Providing professional and career development opportunities for HAI/AR program staff (E.g., participating in APIC infection control certification, IDSA LEAP Fellowship, or the CDC-Project Firstline-supported Community of Practice).

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<p>Domain 9: Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.</p>	<p>Standard 9.1: Build and foster a culture of quality.</p>	<p>Developing and implementing quality improvement initiatives that align with overall health department efforts. Jurisdictions conduct a variety of performance improvement and program improvement activities (e.g., coordination with relevant internal health department programs, such as infectious diseases, preparedness, and immunization programs). HAI/AR Programs develop process and impact evaluations and work towards ongoing quality improvement efforts.</p>	<p>Health departments must have a department-wide performance management system, a process for assessing customer satisfaction, a quality improvement plan, and implementation of quality improvement projects.</p>	<ul style="list-style-type: none"> • Promote an overall culture of quality through engaging and supporting staff in HAI/AR Program improvement and performance management, including participation in health department-wide performance management systems. • Implement quality improvement projects or collaborate on projects with the health department aimed at addressing population health (or non-direct, individual care).

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<p>Domain 9: Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.</p>	<p>Standard 9.2: Use and contribute to developing research, evidence, practice-based insights, and other forms of information for decision making.</p>	<p>Using CDC HAI/AR infection detection and prevention guidelines or evidence-based science to implement and evaluate epidemiologic public health practice and prevention and control strategies; improve programs, policies, and practices; and drive public health action.</p>	<p>Health departments must identify and use applicable research and practice-based information for program development and implementation; conduct or support evaluations of programs, processes, or interventions; foster research and innovation; and communicate research findings.</p>	<p>Provide examples of activities that improve understanding of HAI/AR and healthcare infection control and that support the health department’s overall identification and use of research, evidence, and practice-based insights for program development. For example:</p> <ul style="list-style-type: none"> • Incorporating research or practice-based information into HAI/AR program improvements. • Partner with local healthcare organizations, facilities, or academic partners (Universities, colleges, etc.) to publish findings on HAI/AR or infection prevention.
<p>Domain 10: Build and maintain a strong organizational infrastructure for public health.</p>	<p>Standard 10.1: Employ strategic planning skills.</p>	<p>Health department programs and staff, including HAI/AR staff, engaging in the strategic planning process to connect their work to the broader strategic efforts.</p>	<p>A health department strategic plan defines the organization’s roles, goals, objectives, and priorities for a specific period. There may be program-specific strategic plans that complement and enhance an overall HD strategic plan.</p>	<p>Develop goals, objectives, and strategies that improve HAI/AR program activities for inclusion in a health department-wide strategic plan or a HAI/AR Program strategic plan.</p>

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<p>Domain 10: Build and maintain a strong organizational infrastructure for public health.</p>	<p>Standard 10.2: Manage financial, information management, and human resources effectively.</p>	<p>While this standard is not program-specific, all health department programs, including HAI/AR, will use and depend on these functions and be aware and engaged.</p>	<p>Health departments must have the capacity to manage human resources effectively, keep policies current, maintain appropriate and secure information technology, and monitor financial resources prudently.</p>	<p>Follow their health department’s information security policies to ensure shared information is secure and protected.</p> <p>Demonstrate accountability to funding organizations by submitting reports to funders (e.g., financial reports for CDC’s Epidemiology Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative Agreement, funding reporting agreements, etc.).</p>
<p>Domain 10: Build and maintain a strong organizational infrastructure for public health.</p>	<p>Standard 10.3: Foster accountability and transparency within the organizational infrastructure to support ethical practice, decision-making, and governance.</p>	<p>While this standard is not program-specific, all health department programs, including HAI/AR, should be aware and engaged.</p>	<p>Health departments must strive to uphold an organizational culture that encourages ethical integrity, equal dignity, and respect in interactions with fellow employees, members of the public, and recipients of the organization's public health programs and services.</p>	<p>Share updates and priority issues with governing entities and advisory boards such as boards of health and the HAI/AR Multidisciplinary Advisory Group (E.g., presenting HAI/AR surveillance and outbreak data in healthcare facilities).</p> <p>Resolve or prevent ethical issues by adhering to ethical principles for patient notification during outbreak investigations.</p>