



Appropriations Reporting Requirement

**Local Health Department Conformance
With Food Service Sanitation Regulatory
Minimum Program Requirements**

March 2005 – March 2006

**Michigan Department of Agriculture
Food and Dairy Division
March 2006**

Appropriations Reporting Requirement

Local Health Department Conformance With Food Service Sanitation Regulatory Minimum Program Requirements

March 2005 – March 2006

I. INTRODUCTION

PURPOSE

In accordance with Public Act 353 of 2004, the Michigan Department of Agriculture (MDA) is directed to report on local health department conformance with Minimum Program Requirements (MPRs). Section 401(1) of Public Act 148 of 2005 states:

“The department shall monitor restaurant inspection and licensing functions carried out by local health departments to ensure uniform application and enforcement of minimum program requirements. On or before April 1, 2006, the department shall report to the senate and house appropriations subcommittees on agriculture, the senate and house fiscal agencies, and the state budget director on local health department conformance with minimum program requirements.”

II. FOOD SERVICE SANITATION PROGRAM SUMMARY

Food safety in Michigan’s restaurants is the result of a partnership between MDA and Michigan’s 45 independent local health departments. MDA primarily establishes statewide program policy and direction, provides consultation and training services to local health department sanitarians, and evaluates local health department performance in conjunction with the Michigan Local Public Health Accreditation Program. Each local health department is evaluated every three years. The Accreditation Program helps to assure accountability for the \$8,201,348.00 appropriated by the state to local health to conduct the food service sanitation program.

Local government, through the collection of fees and taxes contributed \$18,505,955.00 for a total statewide budget of \$26,707,303.00. In return, local health department sanitarians conducted 96,967 inspections of 46,356 licensed food service establishments, investigated 4,420 complaints, and reviewed 2,049 plans for new construction. In addition, local health departments provide training and consultation services to the food service industry and are food safety leaders at the local level. Local health departments currently report having a combined

inspection staff of 180 FTE's. The Food and Drug Administration recommends a minimum of 204 FTE's and the recommended statewide level is 287 FTE's.

III. MICHIGAN LOCAL PUBLIC HEALTH ACCREDITATION PROGRAM ACCREDITATION QUALITY IMPROVEMENT PROCESS

The Michigan Departments of Community Health (MDCH), Agriculture (MDA), and Environmental Quality (MDEQ) and Michigan's 45 local health departments are committed to providing strong, effective local health programs and services for Michigan citizens.

Because an efficient, valuable, and credible accreditation process is fundamental to effecting that commitment, in December 2002, the Michigan Local Public Health Accreditation Commission recommended that the Michigan Departments of Community Health, Agriculture, and Environmental Quality pause the review of local health department programs and commence a structured process for accreditation quality improvement.

In March 2003, the Accreditation Quality Improvement Process (AQIP) Workgroup was organized and convened in collaboration with the Michigan Association for Local Public Health and the Michigan Public Health Institute.

In June 2003, 161 local public health professionals and 19 state agency reviewers responded to a 60-question survey developed by the Workgroup. The survey was designed to identify opportunities for accreditation process improvement.

In December 2003, the AQIP Workgroup finalized its deliberations with the release of a 28-page AQIP Survey Executive Summary/Analysis and a 23-page report containing 44 recommendations for Accreditation process improvement.

The Michigan Local Public Health Accreditation Commission accepted the AQIP reports at its January 2004 meeting and recommended state agency review and implementation. The three state agencies reviewed the AQIP reports in their entirety and commenced accreditation quality improvement activity.

Currently, all 44 accreditation improvement recommendations have been or are in the process of being addressed by the appropriate state agency. In 2005 the Michigan Accreditation Program received one of five, \$150,000 grants from the Robert Wood Johnson Foundation to further improve accreditation and to share it's efforts nationally. This work is ongoing.

IV. Local Health Department Accreditation Summary

Local health department food service sanitation program evaluations resumed on February 6, 2004. Upon conclusion of the AQIP process, there are now six (6) Minimum Program Requirements with 21 program indicators. An accredited local health department maintains accreditation status throughout the time period allowed for corrective action. The following is a summary of the findings:

Local Health Departments Evaluated in 2005*

Local Health Department	Date of Evaluation	Indicators "Met" out of 21 Possible	Corrective Plan of Action Due Date	MDA Follow-up Review Deadline	Follow-Up Result
Ingham	2/21/05	16	4/21/05	5/21/06	All Met 1/25/06
Calhoun	3/7/05	20	5/7/05	6/7/06	All Met 10/20/05
Central Michigan	3/21/05	19	5/21/05	6/21/06	Review Pending
Macomb	4/11/05	21	6/11/05	7/11/06	Not Applicable
Lenawee	5/2/05	20	7/2/05	8/2/06	All Met 11/17/05
Ionia	5/16/05	20	7/16/05	8/16/06	Review Pending
Livingston	6/6/05	19	8/6/05	9/6/06	All Met 12/17/05
Midland	6/20/05	19	8/20/05	9/20/06	Review Pending
Monroe	7/11/05	20	9/11/05	10/11/06	Review Pending
Oakland	7/25/05	21	9/25/05	10/25/06	Not Applicable
Wayne	8/8/05	18	10/8/05	11/8/06	Review Pending

*Note: All of Michigan's 45 local health departments are currently accredited.

The second, three year accreditation review cycle ended with the 2005 reviews. When the program was paused for a year in 2003, MDA worked with local health departments and completed a significant standards revision. The information below summarizes the 32 departments evaluated after the pause.

February 2, 2004 - August 12, 2005, (Cycle 2, Years 2 & 3)

General Statistics

Average Number of Indicators Met (21 total):	17.6
Highest Number of Indicators Met	21
Lowest Number of Indicators Met	11
Average Number of Important Factors Met (6 total)	2.4
Highest Number of Important Factors Met	5
Lowest Number of Important Factors Met	1
Average Met with Conditions per Department	1.8
Average Number Special Recognitions* (21 possible)	11.9
Highest Number of Special Recognitions	18
Lowest Number Special Recognitions	3
Best Practices (offered by local health to MDA)	6

*given for 90+% indicator compliance and/or when an indicator that was Not Met in Cycle 1 is now Met

Trends in Compliance Over Time

Review Periods	Indicators Met	
	Range	Average
10 Reviews from February - June, 2004	11-20	16
10 Reviews from July - November 2004	13-21	17
12 Reviews from December, 2004 – August 2005	16-21	19.3

Top 10 Most Successful Indicators

Indicator	% Met
4.3 – New Construction (field)	100
2.2 – Inspection Frequency	97
2.3 – Vending Machine Locations	97
2.5 – Temporary Food Service Establishment Inspections	97
5.1 – Technical Training	97
5.3 – Specialty Food Service Inspection Skills	97
5.2 - Fixed Food Service Inspection Skills	94
2.1 – Pre-Opening Inspections	91
4.1 – Enforcement Policy	91
4.5 – Variances	91

Top Problem Indicators

Indicator	% Met
2.8 - Inspections Result in Food Code Compliant Establishments (field)*	34
6.2 - Foodborne Illness Investigation Procedures	50
1.1 – Plan Review	72
2.4 – Follow-Up Inspections	75
2.6 - Inspection Procedures	75
4.2 – Unauthorized Construction	75

*31% that passed did so with a Met with Conditions

Important Factor Review

Important Factors	% Met
Important Factor I – Educational Outreach	100
Important Factor II – HACCP Program	3
Important Factor III – Continuing Education for Regulatory Staff	84
Important Factor IV – Program Support	22
Important Factor V – Industry and Community Relations	19
Important Factor VI – Quality Assurance Program	9

V. SUMMARY

Local tax dollars and license fees account for approximately 69% of the total amount of money spent at the local level on the state's food service sanitation program. The state appropriation to local health has been in decline since 2002. The impact to the regulatory program has been softened by increased local tax support and industry fees. Local health departments generate relatively high numbers of regulatory activities aimed at reducing foodborne illness. The Accreditation Quality Improvement Process has been successful and is near completion. Overall, local health departments are meeting the majority of the minimum program requirements. Corrective plans of action are being submitted as necessary and are being implemented in a timely manner. To date, all local health departments are accredited, although staffing is a concern.