



Appropriations Reporting Requirement

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

March 2007 – March 2008

Michigan Department of Agriculture
Food and Dairy Division
March 2008

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INTRODUCTION

PURPOSE

In accordance with Public Act 128 of 2007, the Michigan Department of Agriculture (MDA) is directed to report on local health department conformance with Minimum Program Requirements (MPRs). Section 401(1) of this Act 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, 2008, 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.”

FOOD SERVICE 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 \$8,359,820.00 appropriated by the state to local health to conduct the food service sanitation program.

Local government, through the collection of fees and taxes contributed \$20,046,877.00, for a total statewide budget of \$28,392,490.00. In return, 303 local health department sanitarians conducted 94,086 inspections of 48,482 licensed food service establishments, investigated 5,010 complaints, and approved 1,770 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 191 FTEs. The Food and Drug Administration recommends a statewide staff range of 204 to 287 FTEs.

MICHIGAN LOCAL PUBLIC HEALTH ACCREDITATION PROGRAM ACCREDITATION QUALITY IMPROVEMENT PROCESS

The Michigan Local Public Health Accreditation Program is a mature, organized, and institutionalized accreditation program for Michigan's 45 local public health departments (LHDs). The program reviews LHDs on their ability to meet a set of standards that have been developed jointly by state and local public health professionals. The program's mission and goals are listed below.

The mission of this program is to assure and enhance the quality of local public health in Michigan by identifying and promoting the implementation of public health standards for local public health departments. The program evaluates and accredits LHDs on their ability to meet these standards.

The program's approach is to utilize continuous quality improvement methodology. Its goals are to assist in continuous quality improvement; assure a uniform set of standards that define public health; assure a process by which the state can ensure local level capacity to address core functions; and provide a mechanism for accountability.

Michigan has a rich accreditation history and is proud of its accomplishments. The program partners have demonstrated a strong commitment to accreditation of LHDs. Through accreditation, Michigan strives to be a national leader in improving public health programs and services.

Michigan was recently awarded a Robert Wood Johnson grant: "Lead States in Public Health Accreditation and Quality Improvement, A Multi-State Learning Collaborative". This three year grant is the third consecutive grant awarded to Michigan to improve its accreditation program, and work with other states in developing a national accreditation system.

LOCAL HEALTH DEPARTMENT ACCREDITATION SUMMARY

Local health department food service program evaluations, Cycle 3, Year 2, began on February 5, 2007. There are now twenty (20) Minimum Program Requirements with six (6) Important Factors (a continuous Quality Improvement component of the accreditation process). 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 2007 *

Local Health Department	Date of Evaluation	Number of Indicators "Met" out of 20 Possible	Corrective Plan of Action Due Date	MDA Follow-up Review Deadline	Follow-Up Result
DHD #4	2/5/07	19	4/8/07	2/9/08	All Met 12/5/07
St. Clair County HD	2/26/07	20	N/A	N/A	N/A
Bay County HD	3/12/07	17	5/15/07	3/16/08	All Met 2/27/08
Mid-Michigan DHD	3/22/07	20	N/A	N/A	N/A
Detroit HD	4/16/07	17	6/20/07	4/19/08	Review Pending
DHD #2	4/23/07	20	N/A	N/A	N/A
Barry-Eaton DHD	5/7/07	20	N/A	N/A	N/A
Northwest DHD	5/21/07	19	7/25/07	5/25/08	Review Pending
LMAS	6/4/07	19	8/8/07	6/8/08	Review Pending
Shiawassee County HD	6/18/07	19	8/22/07	6/22/08	Review Pending
DHD #10	7/9/07	20	N/A	N/A	N/A
Washtenaw County HD	7/23/07	20	N/A	N/A	N/A
Western U.P. DHD	8/6/07	20	N/A	N/A	N/A
Kent County HD	8/20/07	20	N/A	N/A	N/A
Berrien County HD	9/10/07	20	N/A	N/A	N/A
Benzie/Leelanau County HD	9/24/07	17	11/28/07	9/28/08	Review Pending
Dickenson-Iron DHD	10/8/07	18	12/26/07	10/12/08	Review Pending
Jackson County HD	10/29/07	20	N/A	N/A	N/A
Allegan County HD	11/5/07	18	1/9/08	11/9/08	Review Pending
Saginaw County HD	11/26/07	20	N/A	N/A	N/A
Genesee County HD	12/10/07	20	N/A	N/A	N/A

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

General Statistics

Average Number of Indicators Met (20 total):	19.1
Highest Number of Indicators Met	20
Lowest Number of Indicators Met	17
Average Number of Important Factors Met (6 total)	3.6
Highest Number of Important Factors Met	6
Lowest Number of Important Factors Met	2
Average Met with Conditions per Department	1.3
Average Number Special Recognitions* (20 possible)	11
Highest Number of Special Recognitions	18
Lowest Number Special Recognitions	8

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

Top 10 Most Successful Indicators

Indicator	% Met
2 - Pre-opening Inspections	100
4 - Vending	100
5 - Temporary Food Service Establishment Inspections	100
9 - Records	100
12 - New Construction – Field	100
15 -Complaints	100
16- Technical Training	100
17 - Fixed Food Service Inspection Skills	100
18 - Specialty Food Service Inspection Skills	100
19- Foodborne Illness Response	100

Top Problem Indicators

Indicator	% Met
1- Plan Review	81
8 - Inspections Result In Food Code Compliant Establishments (field)*	86

*55% that passed did so with a Met with Conditions.

Important Factors*

Important Factors	% Met
Important Factor I – Educational Outreach	100
Important Factor II – Follow-up Inspections	95
Important Factor III – Continuing Education for Regulatory Staff	86
Important Factor IV – Program Support	38
Important Factor V – Industry and Community Relations	24
Important Factor VI – Quality Assurance Program	19

* Important Factors are optional – not required

SUMMARY

Local tax dollars and license fees account for approximately 71% of the total amount of money spent at the local level on the state's food service program. The state appropriation to local health has been in decline since 2002. Increased local taxes and industry fees have softened the impact. Local health departments generate relatively high numbers of regulatory activities aimed at reducing foodborne illness. 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 timely. To date, all local health departments are either accredited or accredited with commendation. The Risk Factor Reduction Initiative will complement the Local Public Health Accreditation Program by helping to make government more accountable. Adequate staffing at the local level is a concern.