

MET, NOT MET, AND MET WITH CONDITIONS

Three designations may be utilized by reviewers in evaluating indicators of the minimum program requirements (MPRs) for a given section:

- **Met**
- **Not Met**
- **Met with Conditions**

MET Designations

Indicators that are marked “Met” meet all of the necessary requirements as described in the guidance document.

NOT MET Designations

Indicators that are marked as “Not Met” do not fully meet all of the requirements as described in the guidance document. Local health departments (LHDs) that do not fully meet all requirements for specific indicator must develop and submit a corrective plan of action (CPA) specifying actions to be developed and implemented in order to achieve the requirements for this indicator.

Once the CPA is reviewed, the local health department will be notified if the plan of action is:

- Not accepted and will need to be resubmitted,
- Accepted, no further action required,
- Accepted with further action required. The type of action required will be dependent on the section, state agency involved, and will be communicated to that LHD. (A follow up review by the state agency may be conducted to verify implementation of the plan.)

MET with CONDITIONS Designations

Each program has the option of awarding a “Met with Conditions” designation for an indicator reviewed during the accreditation process. This designation serves as an alternative to giving a “Not Met” when a minor, non-critical deviation is discovered in a review that does not warrant the preparation of a formal CPA. An explanation for the decision to mark an indicator “Met with Conditions” will be included under the heading “Met with Conditions” on the accreditation report.

The follow-up for each indicator given a “Met with Conditions” will occur at the next cycle review. If the indicator remains unmet by the next cycle review, it will be marked “Not Met”. However, at reviewer discretion, a met with conditions may be given on consecutive reviews when:

- An MPR/indicator has multiple elements
- The originally cited issue (s) has been corrected, and
- A different issue now results in a met with conditions rating

Due to the variation among the sections, state agencies conducting the reviews, and varying program requirements, it is the responsibility of each program to clearly describe in their guidance document the criteria that will be used for designating an indicator “Met with Conditions”.

PROGRAM SPECIFIC LANGUAGE SUBMITTED FROM EACH PROGRAM FOR REVIEW:

BREAST AND CERVICAL CANCER CONTROL PROGRAM

Several indicators under individual Minimum Program Requirements are linked as part of the overall program evaluation, but due to the complexity of these indicators, they are evaluated separately. Ongoing quality monitoring of these indicators occur on a yearly basis and are officially reviewed every three years as part of the accreditation process. Agencies that do not meet indicator requirements (as outlined in the guidance document) but demonstrate development and/or implementation of a process/procedure to meet the indicator requirements will be marked "MET with CONDITIONS." The BCCCP reviewer will state the rationale for designating this indicator "Met with CONDITIONS" in the accreditation report. Any further action that is required will occur outside the Accreditation process and in conjunction with recurring quality improvement and program monitoring activities conducted by the state BCCCP program.

FAMILY PLANNING PROGRAM

All of the indicators under the individual Minimum Program Requirements in the Family Planning accreditation tool are linked to program requirements as they appear in the Federal Title X Program Requirements (42 CFR Part 59, Subpart A). Indicators must be met in order for the program to be in compliance with the federal program requirements. This is also true of the Minimum Program Requirements which are derived directly from the federal requirements of the program. Family Planning Program reviewers do not have a option of using a "Met with Conditions" designation which would not assure correction of the failed requirement until the next review cycles (or an additional three years). Title X Guidelines require that programs are reviewed each three years for compliance with the guidelines.

FOOD SERVICE PROGRAM:

A met with conditions may be granted if the department overall meets the minimum program requirements, but occasionally minor deviations or clerical problems might indicate that the requirement is not met. Based on the requirements specified in the guidance document, a met with conditions may be given with the understanding that this MPR will be required to be met at the next scheduled evaluation. Failure to meet this indicator would result in a not met.

GENERAL COMMUNICABLE DISEASE CONTROL

A designation of "Met with Conditions" for an indicator within the General Communicable Disease Control Section will be used at the discretion of the reviewer onsite and based upon importance of the deviation. When multiple components are needed to fulfill an indicator and the deviation is determined to be a non-critical issue by the reviewer (i.e., will not effect daily operations, investigations, or reporting of the LHD), the indicator will be marked as Met with Conditions and recommendations for improvement will be offered. Corrections to the indicator will need to be made before the next cycle to avoid being marked "Not Met".

HEARING & VISION

A designation of "Met with Conditions" for an indicator within the Hearing and Vision Screening Programs may be used at the discretion of the reviewer in cases where minor deviations that can be immediately addressed exist. This will be discussed at the exit interview and the Local Health Department agrees that a change in their current protocol may be changed immediately to reflect the written indicator. The change in protocol will be confirmed at the next accreditation on-site review.

HIV/AIDS PREVENTION & INTERVENTION

A designation of "Met with Conditions" for an indicator within Section XII will be used at the discretion of the reviewer in cases where minor deviations are found. When the deviation is determined to be a non-critical issue by the reviewer, the indicator will be marked as "Met with Conditions." Recommendations for improvement will be suggested, and improvement must be demonstrated within three months of the

site visit. If the issue concerns written policy, a revision must be submitted to the reviewer for approval within this timeframe. Failure to meet these indicators will result in a “not met” rating.

IMMUNIZATIONS

A designation of “Met with Conditions” for an indicator within the Immunization Section may be used at the discretion of a joint consensus between the technical manager and the reviewer in cases where minor deviations exist. All of the indicators under the individual Minimum Program Requirements in the Immunization accreditation tool are associated with program requirements outlined in the Omnibus Reconciliation Act of 1993, section 1928 and Part IV- Immunizations, Sec. 13631, as well as requirements in the 2007 Vaccines for Children (VFC) Operations Guide; Immunization Program Operations Manual (IPOM, 2008-2012), Chapter 1-11, and Michigan’s Resource Book for VFC Providers.

Indicators must be met in order for the program to be in compliance with the state and federal program requirements. Because some indicators require that report submissions are documented on designated dates, it is difficult to base compliance on a 90 consecutive days timeframe. In those cases, a Met with Conditions mark would apply until the next date for compliance arrives. At this point the LHD is expected to submit timely reports, or the indicator will result in a Not Met.

LABORATORY

Section II - Clinical Laboratories, Indicators 1-3 which are reviewed by the Bureau of Laboratories does not use the “met with conditions” indicator. The indicators we use are based on federal regulations and must be implemented at the time of the onsite review or a “not met” is exercised until appropriate corrective action is demonstrated by documentation of steps taken to remedy the situation.

LOCAL HEALTH DEPARTMENT POWERS & DUTIES

A designation of “Met with Conditions” for an indicator within the Local Health Department Powers and Duties Section (Section I) may be used at the discretion of the reviewer in cases where minor deviations exist. Any indicator marked “Met with Conditions” will be addressed during the Exit Conference and in the On-Site Review Report. Recommendations for improvement will be offered and must be implemented before the next accreditation cycle to prevent the subsequent designation of “Not Met.”

ON-SITE WASTEWATER TREATMENT MANAGEMENT

The appropriateness and basis for granting of “met with conditions” will be communicated for each indicator in the guidance document. Where a “met with conditions” rating is awarded, the specific conditions required to be met at the next scheduled evaluation will be clearly communicated in the accreditation report. Where specific conditions have not been satisfied at the time of the next review a “not met” rating will result.

SEXUALLY TRANSMITTED DISEASE

A designation of “Met with Conditions” for an indicator within the Sexually Transmitted Disease Program will be used at the discretion of the reviewer onsite and based upon importance of the deviation. When multiple components are needed to fulfill an indicator and the deviation is determined to be a non-critical issue by the reviewer (i.e., will not effect daily operations, investigations, or reporting of the LHD), the indicator will be marked as Met with Conditions, recommendations for improvement will be offered, and improvement must be demonstrated within one year of the written report. Failure to meet this indicator will result in a “Not Met.”

Procedure for Conducting Accreditation Re-evaluations of LHDs

Purpose

To determine if a local health department has met the minimum program requirements (MPRs) that were found to be “Not Met” during the initial accreditation evaluation.

Background

The Michigan Local Public Health Accreditation Program requires a local health department (LHD) to request a re-evaluation for all MPR's that were found to be “Not Met” between 90 days of the corrective plan of action (CPA) approval date, and one year of the accreditation evaluation. Failure to request a re-evaluation within one year will result in “Not Accredited” status.

Policy/Procedure

- The re-evaluation will assess only those MPR's found to be “Not Met” during the initial evaluation.
- The re-evaluation will encompass the time period beginning with the implementation of the CPA.

Evaluation

The evaluation will review the following:

- The deficiencies found in the original evaluation
- The CPA
- The action taken to resolve the deficiencies
- Results of the action

How to Judge Compliance

Met- The program indicator meets the definition of “Met” in the MPR Indicator Guide used during the original evaluation

Met with Conditions- Substantial progress has been made. Continued implementation of the CPA will reasonably result in compliance.

Not Met- Not in compliance with any reasonable expectations of being in compliance in the near future.

Exit Interview

An exit interview will be conducted with the appropriate management staff if applicable.

Notification

Results of the evaluation will be placed on the Michigan Public Health Institute (MPHI) website for review by the local health department.