

# Food, Pools and Lodging Program Evaluation Workgroup Notes

Thursday, October 27 9:00-3:30, Jidana Room

City of Minnetonka, 14600 Minnetonka Boulevard, Minnetonka MN 55345 [MAP](#)

## Welcome & introductions

Present: Kim Carlton, Michelle Messer, Lisa Gyswyt, Kirsten Knopff, Mike Melius, Jason Newby, Sharon Smith, Jason Kloss, Caleb Johnson, Denise Schumacher, Angie Cyr, Karen Swenson

## EHCIB meeting update:

- Feedback was generally positive, but there is still a sense of apprehension from some individuals about transparency.
- FDA standards will continue to be voluntary for MDH-delegated programs; they will not be required.
- There is a strong commitment to developing the evaluation process in partnership. There is also a strong commitment to having a transparent process that emphasizes continuous improvement.
- The workgroup is moving towards the concept of “verification” rather than “evaluation.”
- The evaluation process and tools will clearly define the minimum items a program “must have” in order to fulfill its duties as a delegated program. The implementation of the process, as well as procedures to make improvements still needs to be developed, and agreed upon. The workgroup wants this process to be clear and transparent and include set criteria, a timeline, and information about what happens if the item is not met.

## Constituent outreach assignments

The group discussed making a concerted effort to reach out to the delegated agencies that they represented. Jason N, Kris and Lisa are sharing the duties of reaching out to metro agencies and St. Cloud, and Mike and Jason K are sharing duties of reaching out to non-metro agencies. The list of delegated agencies was reviewed.

## Review Standard 2 draft evaluation documents and rubric

The group walked through the draft assessment tools. There was extensive discussion about the criteria and corrective action for each element. The tools have been updated to reflect the discussion.

An introduction or cover page(s) will be required in order to explain the standards, the scoring, the correction plans, and consequences for failing to correct items.

The assessment models will be developed as a continuous improvement model. The cycle was sketched out a couple of different ways.

## Template development

Throughout the day, ideas for templates that could/should be created were shared. These include:

- Job Description Questionnaire
- Training record
- Action / Improvement Plan
- Training plan
- Staff transition plan, including typical fees for interim services

## Scoring system

- Required items within each standard will be scored as “meets/does not meet” or “yes/no”. There will not be a cumulative score or scoring matrix.
- Each required item, if not met, will be eligible for a correction plan.
- Items that are not met after a correction plan is in place will be subject to further actions.

## Evaluation frequency

- It is too early in the process to start discussing frequency or the rollout of the evaluation.

## Parking lot

Several issues that arose during the discussion need to be considered:

- The workgroup needs a commitment from both state agencies (MDH & MDA) that they are going to use the process that is being developed. If the agencies are going to diverge, it doesn't make sense to continue creating this evaluation system in this manner.
  - This was a recurring theme, especially as it relates to the ongoing MDA delegation agreement discussions, and MDH-MDA alignment activities
- The current proposed model of assessing one standard at a time may not be the most economical approach, since some of the standards have overlapping requirements and are inter-related.
- An introduction to the standards will need to be included. This will:
  - Include instructions for doing a self-assessment, and taking appropriate action when deficiencies are identified – **before** the state agency verification audit takes place
  - Clarify that after a verification audit, if corrective actions are taken within the prescribed window of "correction" time, these items will be marked as being met.
  - Define what "insufficient" staffing and "unexpected" circumstances are
  - Explain that taking corrective action or implementing an improvement plan for one standard may also affect other standards
- There are likely existing staffing agreements between parties that don't have MDH's written approval (example: Brown-Nicollet's contracts with Watonwan and Cottonwood counties), although they've been in place for years and have been working well. How will these be addressed?
- Can staffing transition plans for emergency situations include temporary hiring of retired sanitarians who have let their RS/REHS lapse?
- Consistent terminology needs to be used throughout (assessment / element / item / Board / agency)
- What are the elements that will lead to termination if not corrected? Standard 2 may not have any.

## Action Items

- Workgroup members will request template examples (listed above) from constituents to use in developing the assessment tools/templates
- Kris Keller and Kirsten Knopff will clean up / type up the continuous improvement models that were sketched out on the board.
- Kim will clean up the spreadsheets with notes from the discussion.
- Kim will report to the EHCIB on November 9, 2016.

## Next meeting

Friday, December 9, 2016. Location: Brooklyn Park