# Environmental Health Continuous Improvement Board Meeting Summary

Thursday, September 6, 2018 9:00 a.m. – 1:30 p.m. Minnesota Counties Intergovernmental Trust, St. Paul, MN | Vidyo (remote option)

## **Members Present and Absent:**

Name	Organization	Present	Absent
Dawn Beck (co-chair)	Olmsted County	Х	
Amanda Buell	Hennepin County	Х	
Daniel Disrud	Anoka County	Х	
Ruth Greenslade	Goodhue County	Х	
Bill Groskreutz	Faribault County Commissioner	Х	
Tom Hogan (co-chair)	Minnesota Department of Health	X (remote)	
Kristine Lee	Countryside Public Health	X (remote)	
Jeff Luedeman	Minnesota Department of Agriculture	Х	
Sarah Reese	Polk County	X (remote)	
John Tracy	Stearns County		Х
John Weinand	City of Minnetonka	Х	

## **Other Meeting Participants:**

Kim Carlton, Angie Cyr, Steven Diaz, Denise Schumacher (remote), and Sophia Walsh (remote), Minnesota Department of Health, Environmental Health Division; Kirsten Knopff, Minnesota Department of Agriculture; Ryan Krick, City of Minneapolis; Kari Oldfield, Local Public Health Association (LPHA, remote)

## **Facilitators:**

Megan Drake-Pereyra, Beth Gyllstrom, and Chelsie Huntley, Minnesota Department of Health, Center for Public Health Practice (PHP)

## **Welcome and Introductions**

The Environmental Health Continuous Improvement Board's (EHCIB) co-chairs, Dawn Beck, Olmsted County, and Tom Hogan, MDH EH, welcomed everyone to the September meeting.

Ms. Beck reviewed the meeting agenda and objectives.

#### Meeting Objectives:

- 1. Discuss and make decisions about FPLS statewide performance measure data collection (2018 data, 2019 collection).
- 2. Update the EHCIB charter (membership and accountability).
- 3. Review any EPH framework updates.

Ms. Beck continued by asking meeting participants to introduce themselves. She acknowledged both EHCIB members and other meeting participants and invited everyone to fully participate in the meeting.

## **FPLS Statewide Performance Measures**

<u>Food, pools, and lodging services (FPLS) statewide performance measures</u> (<u>http://www.health.state.mn.us/divs/eh/local/cib/#performance</u>) will be collected again in spring 2019 (2018 data). Meeting participants reviewed the <u>FPLS statewide performance measures collected in</u> 2017 (2016 data) (<u>http://www.health.state.mn.us/divs/eh/local/cib/2017/sttewdperfmeas.pdf</u>) and the next steps agreed upon at the <u>January 2018 EHCIB meeting</u>

(http://www.health.state.mn.us/divs/eh/local/cib/2018/jansummary.pdf). They also recapped the purpose of the FPLS statewide performance measures (FPLS PMs): a) to provide a statewide picture of FPLS in MN and b) to help drive statewide improvement efforts.

Meeting participants revisited and discussed the implications of:

- Reporting by program/agency rather than by county/city
- Keeping the staff qualifications data collected the same or changing it to a staff-toestablishment ratio
- Allowing on-time inspections data to be reported by either a random sample or total, or by total only
- Only collecting staff qualifications and on-time inspections, but doing a "deeper dive" to determine what else should be collected in the future

Reporting by county/city helps non-delegated agencies. The FPLS structure does not fit perfectly into the community health board (CHB) structure. County/city is the lowest common denominator that allows MDH PHP staff to combine county/city information and report it out to CHBs. However, it was challenging for FPLS programs to report staff qualifications in this way. FPLS inspection duties are split among inspectors; and inspectors are not necessarily assigned to counties/cities. This resulted in duplicative data reported for the staff qualifications. On-time inspections, however, was easier to report by county/city because establishments have a clear location. Based on this, meeting participants felt the best option for the 2019 FPLS PMs would be to instruct agencies/jurisdictions to report their

staff qualifications data by agency/jurisdiction and to report on-time inspections by county. MDH, MDA, and local FPLS programs would all follow these same guidelines for reporting.

Because the staff-to-establishment ratio is more complex than it seems, meeting participants recommended keeping the staff qualifications the same in 2019. This means FPLS programs will report their total number of inspectors, number of inspectors who are registered sanitarians in Minnesota (REHS), number of inspectors qualified to sit for the REHS exam within two years of hire, and number of inspectors who are standardized in food inspections.

In 2017, most FPLS programs reported on-time inspections using their total inspections rather than using a random sample. Based on the data reported in 2017, using the random sample method yielded less variation compared to using total inspections. Meeting participants wondered if those who used the random sample method last time have the ability to report by total or if they would simply forgo reporting this information if required to report by total only. After this discussion, meeting participants were uncertain what to do. MDH PHP staff will try to gather more information from those who used the random sample method in 2017 and, based on this, make a recommendation to the EHCIB at its November meeting.

Lastly, meeting participants discussed the idea of doing a "deeper dive". In 2017, FPLS programs reported their engagement and outreach efforts and food violations cited during inspections. This information was meant to help paint a statewide picture of how FPLS knows it is making a difference and people are better off because of FPLS. The reporting challenges encountered by FPLS programs impacted the data quality and the information was not as helpful as hoped. Rather than collect this information again, a "deeper dive" would allow the EHCIB to step back and gather information from others across the state to better understand, collectively, how FPLS knows it is making a difference. Meeting participants proposed picking key elements of the food standards as a way to initiate discussions. They also want to include various stakeholders in meetings across the state (establishments, EH managers, non-EH people, etc.). MDH PHP will come up with discussion questions. At the November 2018 EHCIB meeting, MDH PHP staff will test the draft discussion questions with meeting participants.

Overall, the changes for the 2019 FPLS PM data collection (2018 data) include:

- Only staff qualifications and on-time inspections will be reported.
- Staff qualifications (number of inspectors standardized, etc.) will be reported by agency or jurisdiction. This means multi-jurisdiction FPLS programs will not have to separate staff qualifications information by county/city as they did in 2017. MDH and MDA will also report staff qualifications overall since staff cover multiple counties.
- On-time inspections will be reported the same as before, by county/city. MDH and MDA will provide their on-time inspections data by county/city as well.

 In order to better understand what measures to collect statewide, which demonstrate how FPLS knows it is making a difference in regards to reducing the risk of illness, focus groups will be conducted across the state with various stakeholders. The EHCIB will do a pilot test of the focus group questions at its upcoming meeting on November 1, 2018.

More information about the FPLS statewide performance measures is forthcoming.

## **Environmental Public Health Framework**

Chelsie Huntley, MDH PHP, provided a high-level overview on the strengthening public health in Minnesota work, which is a State Community Health Services Advisory Committee (SCHSAC) initiative. Ms. Beck and Mr. Hogan are both part of the current workgroup, as is Sarah Reese, Polk County. The workgroup is currently working on trying to clarify the role of local public health in MN. The work the EHCIB has done to develop an EPH framework will help inform the EH portion of the strengthening public health work.

Megan Drake-Pereyra, MDH PHP, shared that updates to the previously completed inventories will be ready for the November 2018 meeting. A new inventory, lodging, will also be ready. She shared that MDH EH staff were wondering what the EHCIB would like to see next: Radon? Another Healthy Homes topic area? She also asked what the EHCIB wants to do about public health nuisances.

Meeting participants suggested that the next big healthy homes topic area be indoor air. This encompasses radon and mold/moisture. Another issue local health departments deal with frequently is hoarding or clutter, which does not necessarily fall under public health nuisance. Meeting participants suggested that this does fall under healthy homes, but that local health departments would need to do the inventory on that topic.

Meeting participants felt they needed to think more about what to do about public health nuisances. Amanda Buell, Hennepin County, shared that they are working on a public health nuisance toolkit. There is a guidance document on the LPHA website, but it is 26 years old. Given this, meeting participants decided to wait and see what Hennepin County produces and then determine if local public health should do an inventory on public health nuisance.

## **EHCIB Charter**

Based on the discussion at its July 2018 meeting, the EHCIB continued to work on updating its <u>charter</u> (<u>http://www.health.state.mn.us/divs/eh/local/cib/charter.pdf</u>). Meeting participants discussed options for the EHCIB's membership structure and how to measure effectiveness.

Meeting participants received two different membership options to consider (<u>Appendix A</u>) and discussed the pros and cons of each option. Option A balances metro and non-metro and spells out the need for EH expertise better than option B. Option B is more flexible and could potentially bring in

more people since focusing on FPLS delegation may be limiting for some. Option B is easier to explain, but option A seems easier to attain. Meeting participants are unsure if regional representation is realistic, even though it is optimal. Meeting participants also felt strongly that there needs to be a minimum of three representatives from FPLS delegated agencies (preference is for more): one city, one metro, and one non-metro. Another option mentioned was to include other areas of EH (e.g. water, healthy homes, etc.) either in the membership structure or on the application. Other EH expertise needed would be based on the EHCIB's work plan. Overall, meeting participants felt a hybrid of the two options would be best. MDH PHP staff will bring a new membership structure plan to the EHCIB's November meeting, where a decision will be made. MDH PHP will also meet with LPHA to discuss membership changes and its impact on the upcoming application and recruitment time period.

Meeting participants also discussed how to measure the EHCIB's effectiveness. The EHCIB is accountable to many different stakeholders across Minnesota and different stakeholders care about different things concerning the EHCIB's work. Meeting participants were asked to brainstorm whom the EHCIB's stakeholders are, what matters to them, and ideas on how the EHCIB could demonstrate its effectiveness (Appendix B). Based on this brainstormed list, MDH PHP will bring back a list of options for measures of success for the EHCIB to consider. More to come on this at future EHCIB meetings.

### **Business Items**

### Member Updates

MDH EH staff shared the following:

- With an upcoming new administration, MDH is focusing on transition planning. The legislative session preparation will primarily tackle critical and essential services.
- There have been three hearings about the rules since the EHCIB last met in July.
  - Health risk limits for ground water contaminants, effective 09/04/2018, passed.
  - Radon rule, effective 01/01/2019, is pending. It establishes a licensing process for those who do radon mitigation and testing.
  - Food code, announced broadly on 09/04/2018, is progressing nicely. The effective date is 01/01/2019. MNIT is putting the new standard orders into Rapid Inspection now.
  - MDH is excited to continue to become more efficient and effective at the rules process.
     They plan to continue to stay ahead of it rather than wait as long as they did in the past.
- MDH's new license and certification system hopes to begin testing soon. The first program to pilot it will be the FPLS REHS program. The asbestos program is next. It will test all system capabilities. If successful, onboarding will begin for other programs. There is no firm timeline.
- The MDH EH program plans to facilitate discussions with local agencies that use Rapid Inspection in order to discuss what is next. The hope is to bring the discussion back to the EHCIB sometime in late 2019. More on this to come.

### Word on the Street There were no updates.

### **Constituent Engagement**

Ms. Beck and Mr. Hogan will provide an update to SCHSAC at its October 2018 meeting.

Communicating with constituents continues to be a challenge, especially with non-delegated agencies. However, non-delegated agencies are now receiving regular updates and beginning to provide feedback. Meeting participants wondered how we could get better at getting the information to the right people. It is hard to keep up lists – Is there a better way? Something like PartnerLink, or similar platform that emergency preparedness uses, could be an option.

Further discussion on this will occur at a future EHCIB meeting.

### FPLS Program Evaluation Workgroup Update

Kim Carlton, MDH EH, shared an update about the FPLS Program Evaluation Workgroup. The workgroup met two weeks ago and feels it is at a good spot. They have developed a draft package of scoring criteria and rubric for each food standard. MDH FPLS staff are putting the final touches on the documents, including a list of potential edits to the delegation agreement. They will put together a red line version and summary version of the changes to the delegation agreement.

There are two, 30-minute phone calls scheduled: October 1, noon, and October 2, 11 a.m.. Ms. Beck, Mr. Hogan, and Jason Kloss, SWHHS, will lead the calls. Invitations will go out to EH managers and lead staff. The calls will provide an update and snapshot of what is coming.

The workgroup plans to have all the details complete and ready to share at the January 2019 EHCIB meeting.

### Approve July 2018 Meeting Summary

John Weinand, City of Minnetonka, made a motion to approve the <u>July 2018 meeting summary</u> (<u>http://www.health.state.mn.us/divs/eh/local/cib/2018/julsummary.pdf</u>) and Dan Disrud, Anoka County, seconded the motion. No additional changes were made.

## **Take-home Points, Action Items, and Adjournment**

Meeting participants agreed on the following take-home points and action items.

#### Take-home points:

• The Environmental Health Continuous Improvement Board (EHCIB) welcomes all members and guests to participate in its meetings. A remote participation option is now available for all EHCIB meetings. A link to join remotely is included with each meeting agenda and all that is required is

an internet connection via a smartphone, tablet, or computer. Consider joining the next meeting on Thursday, November 1, 2018, 9:00 a.m. – 1:30 p.m. More details and the agenda will be posted on the EHCIB website

(http://www.health.state.mn.us/divs/eh/local/cib/#materials) at least one week prior to the meeting.

- <u>Food, pools, and lodging services (FPLS) statewide performance measures</u> (<u>http://www.health.state.mn.us/divs/eh/local/cib/#performance</u>) will be reported again in spring 2019 (2018 data). Changes from 2017 reporting (2016 data) include:
  - Only staff qualifications and on-time inspections will be reported.
  - Staff qualifications (number of inspectors standardized, etc.) will be reported by agency or jurisdiction. This means multi-jurisdiction FPLS programs will not have to separate staff qualifications information by county as they did in 2017. MDH and MDA will also report staff qualifications overall since staff cover multiple counties.
  - On-time inspections will be reported the same as before, by county. MDH and MDA will provide their on-time inspections data by county as well.
  - In order to better understand what measures to collect statewide, which demonstrate how FPLS knows it is making a difference in regard to reducing the risk of illness, focus groups will be conducted across the state with various stakeholders. The EHCIB will do a pilot test of the focus group questions at its upcoming meeting on November 1, 2018.
     More information about the FPLS statewide performance measures is forthcoming.
- The Environmental Health Continuous Improvement Board (EHCIB) discussed options for its membership structure and how it measures its effectiveness:
  - As the EHCIB expands its focus into other environmental health topic areas, more participation is needed from a broader set of stakeholders. The EHCIB would like to see membership that represents the breadth of environmental health topics as well as the different regions in Minnesota. A decision on membership structure will be made at the November 1, 2018 EHCIB meeting.
  - The EHCIB is accountable to many different stakeholders across Minnesota. In order to demonstrate its effectiveness to these stakeholders, the EHCIB will develop measures of success that will be regularly communicated to its stakeholders. More to come on this at future EHCIB meetings.
- The food, pools, and lodging services (FPLS) program evaluation process is changing. Now is the time to participate in the development of the new process. Two statewide conference calls

provide an opportunity to learn more about the new process. They are scheduled for Monday, October 1, 2018, 12:00-12:30 p.m. and Tuesday, October 2, 2018, 11:00-11:30 a.m. Environmental Health managers and lead staff – watch your email for more information.

 The Environmental Health Continuous Improvement Board (EHCIB) continues with its effort to develop a public health framework for the protection against environmental health hazards (EH) area of public health responsibility. At upcoming meetings, the EHCIB will revisit the framework's purpose, update completed drafts (e.g. food, water, lead, climate), and add drafts of new topics (such as lodging and radon).

### Action Items

- MDH PHP staff will work with MDH EH staff to update or create draft inventories of other EH topics for the EPH framework.
- MDH PHP staff will work on options for the EHCIB's membership structure and measures of success for review and approval at an upcoming EHCIB meeting.
- MDH PHP staff will schedule the EHCIB's 2019 meetings.
- MDH PHP staff will begin work on the FPLS statewide performance measures.

The next EHCIB meeting is Thursday, November 1, 2018 at MCIT in St. Paul, MN (free parking is available). A remote option is offered using Vidyo, which can be accessed via computers, tablets, mobile devices.

# **Appendix A: EHCIB Membership Structure Options**

EHCIB's current membership structure (11 members):

- Delegated FPLS programs (6): 2 metro CHBs, 3 non-metro CHBs, and one city (non-CHB)
- Non-delegated FPLS CHBs (2)
- MDH (1)
- MDA (1)
- SCHSAC (1, have been looking for another)
- 2 year terms
- LPHA administers an application process to fill vacant, CHB spots

### <u>New membership structure aspirations:</u>

- More faces at the table
- Members who represent other areas of EH, outside of FPLS
- Better representation from non-delegated jurisdictions

• Other state agency involvement

Region:	NW	NE	WC	С	SW	SC	SE	Metro
FPLS						1		
Delegation*	2					1		
CHBs**	2 2				1			
SCHSAC	1 (or a split 2)							
MDH	1							
Other State	Ad bas							
Agencies	Ad-hoc							

#### EHCIB new membership structure option A:

\* Members responsible for communicating and getting input/feedback from delegated FPLS programs in regions they represent (metro = metro programs, others = greater MN programs)

\*\* Members responsible for communicating and getting input/feedback from non-delegated CHBs in regions they represent (metro = metro, NW/NE/WC/C = CHS administrators/PH directors in regions, etc)

#### EHCIB new membership structure option B:

Region:	NW	NE	ŴC	С	SW	SC	SE	Metro
FPLS	•	1 member from each region						
Delegation*	•	<ul> <li>Minimum of 3 FPLS delegated</li> </ul>						
Non-delegated	•	<ul> <li>Minimum of 3 FPLS non-delegated</li> </ul>						
CHBs*	<ul> <li>2 from either FPLS delegated or non-delegated</li> </ul>							
SCHSAC		1 (or a split 2)						
MDH	1							
Other State	Ad-hoc							
Agencies								

\*Members responsible for communicating and getting input/feedback from CHBs/FPLS programs within region they represent.

# **Appendix B: EHCIB Effectiveness**

Who has a stake in EHCIB effectiveness and what matters to them? Constituents (delegated, non-delegated, cities, LPHA, SCHSAC)

- State-local partnership
- Current issues
- Early notification, timely communication
- Take home points (understandable)
- Progress towards goals/action

Former EHCIB members (including Founders)

- Continued progress/existence
- Seamless transition
- Broad representation
- Proactive vs reactive action by the EHCIB
- Openness to new challenges/issues

#### **Current EHCIB Members**

- Full engagement/participation in meetings
- Availability of remote participation option (e.g. Vidyo)/ease of participation
- More constituent feedback
- Seamless transition, when leave EHCIB, feel it is left in good hands
- Time well spent (meet goals/make progress)

#### LPHA

- Works strengthens local work in EH
- Improved communication
- Improved knowledge
- EH recognized as part of PH
- Strong partnerships

#### SCHSAC

- Strengthen EH across Minnesota
- Improve EH accountability

#### EH Staff (those doing the work)

- Getting information (filters through managers/directors)
- Positive impact on their work
- Efficiency (makes job easier) and consistency (between agencies)
- Focus on EH priorities

#### Citizens of MN

- Expect consistency (no gaps)
- Assurance safe and sanitary food services (they don't want to worry about it)
- Access to EH services
- Complaints/concerns addressed
- Safety
- Information/consistent resource
- Ability to have a business

#### PH Agencies (local health departments)

- EH work easier/better

- Not more burdensome
- Protocols and communications meet national standards (e.g. PHAB standards)
  - o Meet min set of standards across MN
- Local flexibility when needed
- Better/good outcomes

#### MDH

- Proactively address issues rather than reactively issues are brought to the table
- Alignment

How could the EHCIB measure its effectiveness?

- State-local partnership is stronger/better
  - Ask via a survey
  - Meeting attendance
  - o Challenges: frequency decreased, addressed quickly
  - Representation of membership (do some feel underrepresented?)
  - o Issues brought here get addressed at larger scale (e.g. RI, mobile tool)
  - Open communication and opportunities to participate
- Timely/valuable communication
  - Response rates to requests for input
  - List serve data (open rates, clicks rates, etc.)
  - Number of complaints
  - EH work easy, less burdensome, consistent
    - EH staff retention/turnover
    - Number of complaints
    - Resource-sharing (from MDH to local agencies, and between local agencies)
    - Results of FPLS delegated program evaluation
    - Completion of EHCIB work plan goals (i.e. EPH Framework)
- Engagement
  - Attendance (members and guests)
  - Number of applicants
- # of issues handled proactively unsure how to best measure this
- Better integration of PH role in EH
  - Many local agencies still do not have EH on their radar. Getting it on their radar would be the ultimate measure of better understanding of EH. There are possible examples from the 2017 required LPH activities survey.