

Food Service Advisory Committee (FSAC) Meeting Minutes

March 9th, 2015

Members Present: Jeff Franzoia (Chair), Chris Heuchert & Susan Melero

Members Excused: Barb Eveland, Jon Sutten (Vice-Chair) & Aleli Hernando-Fisher

Staff Present: Bill Emminger, Scott Kruger & Elizabeth Whitlock (recorder)

I. Call to Order - The meeting was called to order at 2:15 pm by Chair Franzoia.

- **II. Citizen Comments** Introductions were made.
- III. Approval of the Agenda The March 2015 agenda was presented for approval.
 MOTION was made to approve the March 2015 agenda as written; motion seconded, all in favor, so approved.
- IV. Approval of the Minutes The November 2014 minutes were presented for approval.
 MOTION was made to approve the November 2014 minutes as written; motion seconded, all in favor, so approved.
- V. Recruitment for Permits Clerk Status Report Bill Emminger, Environmental Health Division Manager, Benton County Health Services (BCHS)
 - Update on Permits Clerk Assistant position in Environmental Health is as follows: there were 90 applicants and the position was filled by Megan Watts.

VI. Food and Drug Administration (FDA) Voluntary Program Standards Assessment

- Initial review was one year ago.
- Grant for \$2,500 was received.
- Standards 8 and 9 need to be reviewed, all others have been reviewed and assessed.
- Standards on food temperature and no bare hand contact with food to be served, need to be a state level decision.
- Follow-up plan on non-compliant and compliant data on violations.

Handout: FDA Program Standards Summaries

Training Pieces: The Nine Standards are comparing well with regulations of the FDA food code and the Oregon Food Code.

- Training of new employees
- Risk base inspection
- Uniform inspection program
- Foodborne illness and food defense preparedness and response

Note: There has been great communication between departments involved in this process. An example would include the norovirus outbreak at a local restaurant in Corvallis, OR in February 2015. Thus far there has been an estimated 3,523 norovirus outbreaks in the state of Oregon for the year 2015.

- Compliance and enforcement
- Industry and community relations
- Program support and resources
- Program assessment

Suggestions for Improving the Quality Process - FSAC members

- Create sub-committee
- Involve the food advisory committee in the process
- FDA suggested non-regulatory inspections be supervised by someone not involved with the restaurant.

Causes and Suggestions for Fail to Comply and Foodborne Illness Outbreaks

Causes:

- 1. Language barriers can cause there to not be an understanding of rules and regulations when working in a food service establishment.
- 2. Lack of management control

Suggestions:

- Make sure the restaurant provides policy procedures, foodborne illness outbreak
 procedures, plan of action procedures, risk control plans and damage control plans to their
 employees in ways they can understand them.
- 2. In cases of an illness outbreak, you can suggest a temporary closure of food facility until proper procedures can be done to break that chain of contact. This was done in the case of a norovirus outbreak at one of the local restaurants. The owners closed the restaurant and did a thorough cleaning, disinfecting, and elimination of possibly contaminated food. They reopened later that evening, notifying Benton County Environmental Health of their reopening.

VII. Next Meeting

May 11th, 2015 • Benton County Sunset Building • Sunset Meeting Room

VIII. Adjourn

Meeting Adjourned at 3:12 pm



Food Service Advisory Committee

(FSAC) Meeting Minutes

June 15th, 2015

Members Present: Barb Eveland, Jon Sutten (Vice-Chair), Aleli Hernando-Fisher, Jeff Franzoia (Chair),

Chris Heuchert & Susan Melero

Guests Present: Susan Tripp

Staff Present: Bill Emminger & JonnaVe Stokes (recorder)

I. Call to Order

The meeting was called to order at 2:04 pm by Chair Franzoia.

II. Introductions and Citizen Comments

III. Approval of the Agenda

The June 2015 agenda was presented for approval.

MOTION was made to approve the June 2015 agenda as written; motion seconded, all in favor, so approved.

IV. Approval of the Minutes

The March 2015 minutes were presented for approval.

MOTION was made to approve the March 2015 minutes as written; motion seconded, all in favor, so approved.

V. Public Health Accreditation Board Orientation

- Several counties in Oregon have already become accredited.
- All health departments will be held accountable to meet basic minimum standards.
- Committee members viewed the District of Columbia's Department of Health video on the Public Health Accreditation Board (PHAB).

VI. Environmental Health Budget

Handout: Biennium Future Budget Estimates Detail 2015-2017

There are two budgets for the environmental health program.

- Land and water (D04A) covers restaurant inspections, pools, spas, onsite waste water, public water systems
- Solid waste program (D04D) -
- Central cost allocation is used for administration functions outside the health department
 legal, human resources.
- Support service allocation is used for administrative functions inside the health department Health Director, Deputy Director, Program Assistant.

How do these budget numbers compare with 2014? Fairly accurate.

VII. Fee Setting

Handout: 2015 Justification for Environmental Health Fees

- Benefits have decreased by 3%, mainly due to switching insurance carriers.
- Administrative programs include materials, supplies, and indirect costs (a 24% increase).

Where is the additional \$71,000 (24%) increase coming from?

Handout: Fiscal Year 2016 Indirect Cost Calculations

- Contains the language from the Oregon Administrative Rules that limit administrative costs to 15%. It also describes total expenses of the EH department.
- Under the <u>full cost recovery model</u>, county costs are 9% and health department costs are 22%.
- Under <u>partial cost recovery</u> model using county unrestricted funds county costs are: 9% and health department costs drop to 15%.
- Committee members voiced concerns regarding the 24% increase in administrative, program costs, travel expenses, cost allocation, and department remittance to the Oregon Health Authority and the Department of Environmental Quality.

*Committee members requested the budget projection and actual budget from 2014-2015, so they can compare it to the handouts they received today.

VIII. Next Meeting

- Next meeting will have a proposal for fees.
- To be held September 28th, 2015 in the Sunset meeting room of the Sunset Building.

IX. Adjournment

MOTION was made to adjourn the meeting; motion seconded, all in favor, so approved.

The meeting was adjourned at 3:59 pm, by Chair Franzoia.



Food Service Advisory Committee

(FSAC) Meeting Minutes September 28th, 2015

Members Present: Barb Eveland, Jon Sutten (Vice-Chair), Aleli Hernando-Fisher, Jeff Franzoia (Chair) &

Chris Heuchert

Members Present: Susan Melero Guests Present: Dathen Walker

Staff Present: Bill Emminger, Robert Baker, Scott Kruger, Charlie Fautin, Morry McClintock & JonnaVe

Stokes (recorder)

I. Call to Order

The meeting was called to order at 2:04 pm by Chair Franzoia.

II. Introductions and Citizen Comments

III. Approval of the Agenda

The September 2015 agenda was presented for approval.

MOTION was made to approve the September 2015 agenda as written; motion seconded, all in favor, so approved.

IV. Approval of the Minutes

The June 2015 minutes were presented for approval.

MOTION was made to approve the June 2015 minutes as written; motion seconded, all in favor, so approved.

- V. Public Health Accreditation Board Orientation Charlie Fautin, Deputy Director, Benton County Health Services (BCHS)
 - Historically public health never had a formal accreditation program for county, state or tribal health departments. Public health schools have, but not public health practices.
 - States did have oversight of public health programs, but most compliance has been tied to funding.
 - In 2009, a non-profit health foundation was formed to begin the accreditation process with health departments. The first eleven health departments were fully accredited in 2013.
 - There are 3,800 city and county health departments, 300 tribal and 54 state and territorial health departments. Seventy nine health departments are accredited to date.
 - In Oregon 8 health departments have been through the whole process, 4 are awaiting results, and 14 are working on accreditation in some way.
 - Accreditation decisions: health departments either become 1. fully accredited, 2. put on a workplan or 3. completely start over again.
 - Benton County's objective is to use the accreditation system as quality assurance standards to measure against and be accountable to the commissioners, community partners and the community.

- Accreditation is not a system that meets statutory requirements program by program, but is a health systems wide approach throughout the entire department.
- Clackamas, Crook, Deschutes and Marion Counties are fully accredited.
- Benton County Health Services (BCHS) has worked on this for four years. Staff
 uploaded around 500 documents to meet all the standards and measures. BCHS is
 currently waiting to schedule the final site visit (sometime in December or January)
 where the national Public Health Accreditation Board (PHAB) will look at the
 department broadly. PHAB site visitors will meet with the commissioners, community
 partners, health department staff, and advisory committee members.
- There were three perquisites before BCHS could apply for accreditation: a Community Health Assessment (CHA), (Community Health Improvement Plan (CHIP) and a Strategic Plan. These documents explain to PHAB that BCHS knows the community and are internally planning to improve the community's health.
- After accreditation, annual reports will be due for four years, then the health department must re-apply for accreditation status and submit new documentation, once again after the five year mark.

Committee members asked about funding this quality improvement project, if that would be sustainable, and if funds would continue to go to accreditation?

 BCHS has already been performing these quality improvement processes and practices, but it wasn't being documented very well.

Will it take another four years of gathering documents next time?

• Health department staff will start tracking documentation to submit to PHAB the day after they receive their accreditation status paperwork.

Some staff have been heavily involved as leads in each of the standards. The department plans to rotate staff for the next round of accreditation with a new set of staff and leads, so it will eventually be worked on department wide.

VI. Budget Presentation - Morry McClintock, Chief Financial Officer, BCHS

PowerPoint Handout: Environmental Health Budget 2015-2017

McClintock discussed the mission to serve our underserved population with blended services to achieve better health; reviewed services BCHS offers; discussed the regional partnerships with Linn and Lincoln County, and the Coordinated Care Organization (CCO) Inter-Community Health Network (IHN).

Budget Structure Overview

- 1. <u>Health department</u>: Environmental Health (EH); within EH there is land and water, solid waste, and emergency services.
- 2. <u>Health center</u> (primary care clinics) in Monroe, Lebanon and Corvallis; soon to be in Sweet Home and Alsea. Linn County invited Benton County to offer primary care in their county.

3. <u>Health management services</u>: (support group for the health department and the health center) Deputy Director, Financial Officer, Quality Improvement, Health Department Director, Levy, Oregon Health Plans.

The health department manages a \$62 million dollar budget that supports 174 full time equivalents and over 200 employees.

<u>General fund</u>: tax revenue support of \$5 million dollars is direct from county taxes. Since 2010, primary care has grown the most (by 40% in 2011 and over 100% growth currently). This provides services in: Public health, Environmental health, Developmental Diversity, some Mental health in the health department and some in the clinics, as well as health management services.

<u>Public health includes</u>: Communicable Diseases, Reproductive health, Maternal Child health, Women, Infants & Children, Immunizations, Healthy Communities, Environmental health, Emergency Preparedness, and Vital records.

The health department budget grew 36% percent between the 2013-2015 and 2015-2017 budgets, from \$16 million dollars to \$22 million dollars. The environmental health budget is the smallest piece of the health department budget and hasn't seen a lot of growth since 2011.

<u>Budgeted 2015-17 revenues</u>: 48% is budgeted to come in from charges for services, 18% from the county general fund, and 34% from grants.

<u>Budgeted Expenses</u>: 65% is budgeted to go to salaries and benefits, 4% to office space, 7% to county overhead, 16% department overhead, and 8% to materials and services.

<u>Countywide overhead</u>: Provide services to the entire county, such as: IT, County Counsel, Human Resources department, Accounting department, etc.

<u>Health management overhead</u>: Provide services to the health department before it goes to other county departments, such as: Accounting, Administration labor costs, Assistant support, Quality Improvement management, Compliance, Contracts, Chief Financial Officer, Billing, and Payroll.

<u>County funding contributions to environmental health</u> in 2011-2013 budget: \$354,000; in 2013-2015: \$378,000 and in 2015-2017: there is \$388,000 budgeted from the county who is supporting the health department overall less and less.

Land and Water revenues in 2014 were \$479,000, expenses \$687,000; EH was given county general fund support of \$207,000.

Land and Water revenues in 2015 were \$529,000, expenses \$680,000; EH was given county general fund support of \$151,000.

Trend: County overhead is increasing while department overhead is decreasing.

Questions regarding Benton County (BC) working in Linn County?

BC received a new federal grant to work in Linn County. BC tax residents do not pay for provider services in Linn County (LC). BC had received an original grant and has operated in Lebanon for over ten years now. These grants are only qualified in medically underserved areas.

The Sweet Home building is owned by LC and will charge BC \$1 a year to rent that space. BCHS will share space with LC mental health and some public health services; both counties will share front desk support.

Lebanon is a family practice clinic, the facility was donated in kind by Samaritan Health.

VII. Draft Environmental Health Fees - *Bill Emminger, Environmental Health Division Manager, BCHS*

Handout: Full recovery vs. Partial cost recovery

- Includes two scenarios of full cost recovery or partial cost recovery (limiting direct costs of licensing fees to 15%, as related to Oregon Administrative Rule 333-012).
- <u>Under full cost recovery fees</u>: administrative costs would increase by 31%, without the use of supplemented general fund money.
- <u>Under partial cost recovery fees</u>: administrative costs would increase by 15%, with the uses of supplemented general fund money.

Handout: 2015 Justification for Environmental Health (EH) Fees

- Emminger discussed how the hourly rate is used when calculating both the full cost and partial cost recovery models. The partial recovery dollar amount is being used to set the license fees.
- Benevolent organizations can only be charged a processing fee (25% of the normal full fee that includes the inspection.) The other 75% (which is the inspection portion of the fee) will be covered by some of the general fund monies.
- Pool and spa inspections and follow-up inspections have increased 32% between 2013 and 2014.
 - o Why is EH seeing this?
 - There was a change is pool and spa regulations in 2014 that added more explicit closure criteria around chemicals, damages and improper suction fittings.
- Given this rate of increase in pool and spas inspections, EH has moved re-inspection rate averages from 25%-40%.

Handout: Attachment A – Environmental Health Division 2015 Fee Schedule, effective Jan 1, 2016

Pages 1-3 include fees for the onsite program,

Page 4-5 includes restaurant fees with a proposal of a 5% increase of fees for 2016;

Page 7 includes tourist accommodations, recreational parks, bed and breakfasts & organizational camps;

Page 8 includes pools and spas showing an increase of 10-14% to cover the adjustment and re-inspection check rate.

MOTION was made to approve the 2016 Fee Schedule as written; motion seconded, all in favor, so approved.

ADDITIONAL Committee Discussion of Benevolent and Non-Benevolent Organizational Patterns

- Emminger discussed discounts that are offered to these organizations for paying licensing fees early and penalties for operating without a valid license.
- Emminger asked the committee for feedback on how to address vendors in Benton County that are not complying with licensing statutes, even when they are aware of the statutes for operation.
- Committee members suggested looking into what other counties currently do in their jurisdictions.
- They also suggested that penalties should be applied after so many events for vendors caught not-complying, when they have been educated and/or warned.
- EH may look into changing a policy or procedure next year and will have the committee review at that time for feedback.

Is EH the only one involved in food regulations at food events, aren't there required zoning requirements?

 This is something that could be looked into as well, to include all other agencies of jurisdiction in these matters.

VIII. Upcoming Meetings

- Next Food Manager's Training: October 27th, 2015 Sunset meeting room, Sunset Building.
- Next meeting: February 8th, 2016 Sunset meeting room, Sunset Building.

IX. Adjournment

MOTION was made to adjourn the meeting; motion seconded, all in favor, so approved. The meeting was adjourned at 4:09 pm, by Chair Franzoia.