Environmental Health Continuous Improvement Board (EHCIB)

ELECTRONIC INSPECTION SYSTEM SUBGROUP | APRIL 13, 2018 | MEETING SUMMARY

Issue Statement:

MDH will be switching from using Rapid Inspection (RI) to a new e-licensing enterprise system and at this time, local partners are unable to use the new system.

Subgroup Role:

This subgroup is charged with evaluating potential short-term solutions to address changes in RI use and support by MDH.

Subgroup meeting attendees:

Sarah Berry, Le-Sueur-Waseca; Jesse Harmon, Brown-Nicollet; Kris Lee and Susanne, Countryside; Tony Georgeson, P4H; John Tracy, Stearns County; Jason Kloss, SWHHS; Steven Diaz, MDH EH; Facilitators: Megan Drake-Pereyra and Beth Gyllstrom, MDH PHP

Solution	Description	Estimated Costs	Pros	Cons
RI Upgrade	 MDH modifies existing RI software to incorporate changes as a result of updates of the food code expected to take place January 1, 2019. Could provide support for 3-5 years to LPH Creates a bridge to alternative platforms for local delegated programs and MDH 	 No cost to local delegated programs RI software available to locals for free after MDH moves to enterprise e-Licensing platform 	 Gives local agencies an opportunity to explore other options, more time for this Program local agencies are familiar with, so training is not needed No cost No minimum commitment 	 No tech or IT assistance Maintaining separate databases for licensing and inspection RI is not very stable, it would continue to be unstable, uses old coding language
PH-DOC	 Some programs already use PH- DOC for public health overall. iPad app works well and possibility that it could be 	Cost to use PH-DOC for environmental services is approx. \$160/hr to set up a separate connection. Estimated time is 30-40	 For those that have it, centralized data collection For those that have it, making inspection part of it is fairly low-cost, especially if a group does it 	• Agencies without PHdoc currently would incur a high cost to get it; expensive to acquire PHdoc itself (annual

Potential Short-Term Solutions

Solution	Description	Estimated Costs	Pros	Cons
	 shared more broadly with local programs Each local program would be responsible for modifying the app to accommodate their own information (e.g., logos, addresses, staff, etc.) Cost for modifying app likely less if a group of agencies are willing to work together to create a set-up process within the settings. 	hrs. This equals approx. \$4800- \$6400.	 App is responsive and set up like a check-list, do not have to search for orders, rather go through categories Does billing and licensing Support and developers are in Waite Park, MN (locally-based support) 	 cost to have PHdoc is around \$20k) Platform built on is antiquated (PHdoc itself, old client server model) Have to use ipad to do inspections Training and implementation time (onboarding to use new system) If you don't have hardware to host PHdoc, another agency would have to host for you (there is a cost for this) Budgets are already set for this year, will have to get approval from county board to purchase
Tech Tronix EH Manager	 Uses a shared cloud database and has support for Mac, Windows and iPhone/iPad devices Costs assume at least 8-10 programs purchase this product 	 First year start-up costs: \$7,388(1-5 users) or \$7,926 for 6-13 users Subsequent years: \$900/user + \$1388 in Amazon Web services and Filemaker server license for 1-5 users; \$900/user + \$1928 in Amazon Web services and Filemaker server license for 6-13 users. 	 Cloud-based system with single database, no need for IT support from agency since Amazon hosts product on its server Supported on a variety of devices and systems Easy to use, not a lot of training needed Affordable All pieces of EH program built into it (licensing, inspections, plan review, enforcement, etc.) Built on a stable platform Lots of support for it (common language among developers) User-customizable Easy to extract data from (for both MDH reporting and raw data Excel file) Using a lot of technologies to make the experience fast (bar code scanning, etc.) Everything is encrypted Built by someone who knows what EH staff do 	 Not ready yet (in-production); more of a long-term solution; 50-60% ready Budgets are already set for this year, will have to get approval from county board to purchase

Solution	Description	Estimated Costs	Pros	Cons
			 Can dictate comments Takes payment via paypal (can possibly tie into bank too, depends on bank) 	
Others?	•	•	•	•

Additional notes

- PH-doc users would prefer the food code to be delayed in order to use this as a solution
 - Generic estimate of cost to come (in a week or two)
 - Approximately 10-12 programs have PH-doc now
 - o Olmsted and Horizon use app currently, Stearns has tested it out
 - o Agencies without PH-doc can obtain it, but it is costly
 - John Tracy (Stearns County) did a mock inspection with PH-doc: it's a slightly different approach, it had a small learning curve, once learned it is kind of like rapid report and easy to use
- RI Support for 3-5 years: means RI is extended and food code/rules changes are included
 - o Buys people time
 - Mid-June 2018: new standard orders completed; MNIT assured MDH EH that this is enough time to program it into RI by early 2019
 - There is a cost to MDH to update RI; this funding cannot be used to help local agencies fund a different solution because MDH also needs RI as a safety net in case the other e-licensing doesn't work out
- Hospitality fee
 - Is it possible to use this to help support the long-term solution?
 - It is used to support things that everyone uses, MDH would need commitment that everyone would use the new longterm solution or be on board with support for it
- EH Manager
 - o Inspection module is being tested right now
- Most solutions seem to be "long-term", something that people want to consider and think about before investing in...
 - o RI seems to be the main "short-term" solution available
 - If assurance that it is free, ready by 1/1/19, and have locals will have access to it: this subgroup agrees that this is the best short-term solution
 - Only other true short-term solutions are: 1) use RI as exists without modifications to new food code, 2) go back to using carbon copy.

Other Considerations

How do these software systems support continuous QI efforts and performance management? Can these software solutions generate the needed data for program evaluation?

- If EH programs are using a shared data solution, it is much easier to maintain the data and communicate between different members of organizations; one data set for everything
- Without a shared data solution, programs would need a well-defined list/parameters so the system could be set up to extract the data easily
- There is a need for consistency across EH programs, to have similar data elements
- Ideally the system chosen for the long-term should be able to query down to the individual data fields, so local programs could extract data when they want and need it, including for continuous quality improvement and performance management; so, there needs to be flexibility in data extraction
- Performance feedback: the agency/user should know where they are at any given time as far as inspection frequency, etc.

Long-term solution considerations

- There has been support for RI (without additional financial support from local programs); this is a significant change in the future for local programs who have chosen to continue using RI
- Local agencies using new the MDH system is not an option for phase 1 (2 year contract); phase 1 is meant to get all MDH licensing programs onboard; after this phase many other things can be on the table, such as FPLS delegated agencies and other delegated agencies for other MDH programs using the new system
- Delegation agreements MDH assures that required data standards will not be heavily enforced as data systems changes are happening; delegation agreements will eventually have to be updated as things change, local input will occur if delegation agreements are updated; local ordinances will also need time to be updated; l.e. MDH will not terminate delegation agreements due to gaps in data system updates
- USA food safety (MDA uses this system) this could be another possible long-term solution consideration; it has been modified for the MN food code and will probably be updated since MDA currently uses it

Environmental Health Continuous Improvement Board Minnesota Department of Health Center for Public Health Practice P.O. Box 64975 St. Paul, MN 55164-0975 (651) 201-3880