## **QA Requirements**

FY19-20 Food Protection & Facilities Agreement Addenda





# What Does Your QA Policy Look Like?



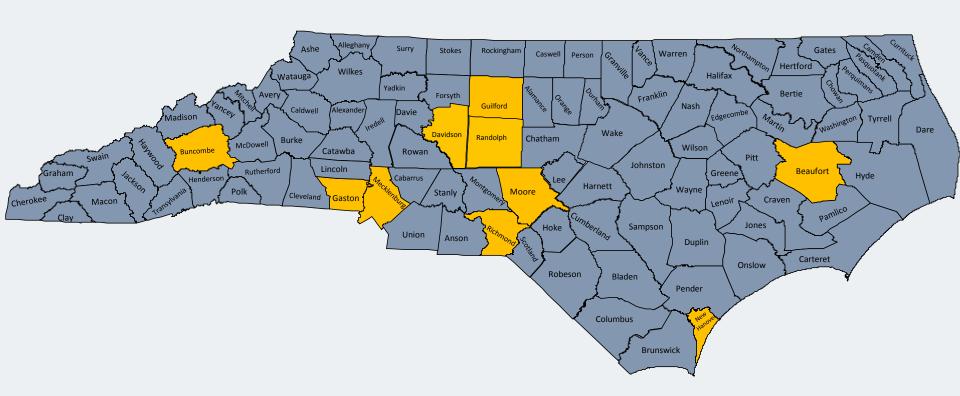
## Past QA Requirements

- Quality Assurance (QA) has been a part of the Agreement Addendum for several years
- State of North Carolina only required a local health department to have a QA policy and follow it
- Verification was a statement from local FLI programs that they met their QA policy





#### Pilot Counties for QA Project







## New Statewide QA Policy

- What will the new policy require?
  - Creation and use of a prioritization policy
  - Specific details on field assessments of REHS
  - Regional Staff involvement
  - Documentation of field assessments and file review
  - Evaluation of staffing levels and needs





## **Prioritization Policy**

• Each county/district will be responsible to have a policy in place that prioritizes workload when there are insufficient resources to complete all mandated inspections per 15A NCAC .0213.

• The State has developed a template that may be used





## **Prioritization Policy**

- The policy must ensure:
  - Higher-risk establishments such as HSPs, establishments with specialized food processes, and establishments that are low-performing are prioritized over less-risky establishments
  - Risk Category IV establishments are inspected at a higher inspection compliance rate than Risk Category III, II, or I establishments (goal = to miss no more than 1 inspection per FY).
  - Risk factor violations documented on previous inspections, length of time since completion of last inspection and frequency of complaints from the public are taken into consideration when prioritizing the workload





#### **QA Field Assessments**

- Each county/district will be required to complete at least **2** QA Field Assessments per FY per REHS working in the FLI program
- If the county/district has 2 or less REHS, the Regional will complete the QA Field Assessments known as <u>Regional Review</u>
- If the county/district has 3 or more REHS, the county/district has the option to either have <u>Leader Review</u> or <u>Peer Review</u>.





#### Leader Review vs. Peer Review

- <u>Leader Review</u> the county/district will have at least 1 designated leader. The Regional will complete QA Field Assessments with each leader. The leader(s) will complete QA Field Assessments of the REHS in the FLI program.
- <u>Peer Review</u> the county/district may choose to allow <u>1 of the 2</u> required QA Field Assessments to be completed among peers within a program. The second QA Field Assessment must be completed by a designated QA leader (supervisor or designee). The designated QA leader will be evaluated by the Regional per the Leader Review instructions.





#### Documentation of QA Assessments

- Field Assessment Form provided by the State
  - Filled out by the assessor
- 53 items
  - Items do not directly correspond with the NC Food Establishment Inspection Form
  - Example:
    - #1 on Inspection Form is not #1 on the QA assessment (#11)
- Inspection Form items are shown in the header of each QA assessment item
  - Some items include multiple inspection form items





### QA Assessment Marking Instructions

- Marking Instructions for the Field Assessment
  - Read & understand the instructions prior to use (IN, OUT, N/A)
  - Based on Annex 5 of the Food Code Conducting Risk-Based Inspections
- Certain risk factors that are marked N/O on the inspection form may be marked as N/A on the QA Assessment.





#### File Review Requirements

- With each QA Field Assessment a corresponding review of the establishment's file shall be completed.
- In addition to those 2 file reviews, 1 randomly selected establishment file will be reviewed per REHS in the FLI program
- Total of <u>3 files reviewed per REHS per FY</u>



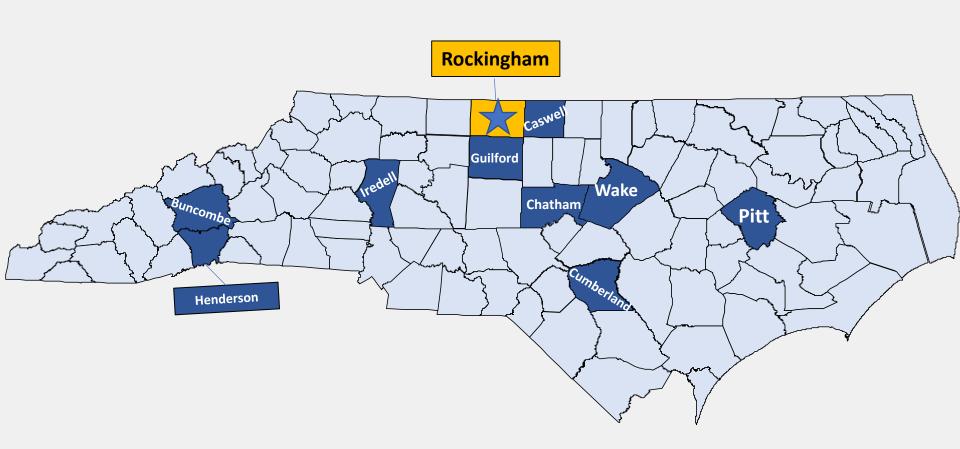


## Staffing Levels

- Identify adequate staffing levels
- Focus on quality inspections vs. inspection compliance rates
- Some counties are achieving 100% inspection compliance and are not performing at a high quality level
- Some counties that are not achieving 100% compliance and are not short-staffed









## Overview of QA Requirements

- Implementation of a prioritization policy
- 2 QA Field Assessments per REHS per FY
- 3 File Reviews per REHS per FY
- QA activities will begin July 1, 2019 (FY 19-20)
- County/district supervisors will be contacted by regional staff prior to July 2019 to make sure everyone is prepared for the change
- Staffing Levels will be assessed timeline not defined yet



## Questions?

