Capacity Assessment Key Findings

TOBACCO USE PREVENTION

In the fall of 2022, the Office of Local and Regional Health conducted a Capacity Assessment of local health departments in Massachusetts to evaluate local public health's current ability to provide basic public health services based on their available resources, including staffing levels, funding, and training. The first-ever Massachusetts Local Public Health Performance Standards. which defined basic levels of services and workforce credentials and training, framed the assessment. As part of this assessment, a qualitative review of documentation submitted by municipalities was conducted, focusing on various subject areas to evaluate the implementation of crucial public health services.

The Tobacco Use Prevention documents included 2018, 2019, and 2021 inspection reports and associated follow-up for two tobacco establishments.





MISSING EXPLANATIONS FOR NON-COMPLIANCE

Inspection reports occasionally indicated that a tobacco retailer failed to meet the required criteria. However, these criteria were rarely documented or explained in detail.

 Clearly communicating violations and areas for improvement is crucial for the retailers' knowledge and ensuring that these issues are addressed when conducting a reinspection.



CLEAR COMMUNICATION AND DOCUMENTATION OF FOLLOW-UP

There needs to be clear communication between the inspector, retailer, and the Board of Health when following up on violations from a tobacco establishment inspection.

- Include a letter to the retailer outlining what violations were found, timeline for correction, and action steps as needed including details of Board of Health hearing.
- Follow up with the retailer informing them of enforcement actions taken by the Board of Health (i.e., suspension).
- All reinspections should also be sufficiently documented to ensure violations have been corrected rather than persist from year to year.



OPPORTUNITY FOR ADDITIONAL TECHNICAL TRAINING

There is the potential for improvement of inspectors' technical skills to enhance the thoroughness and quality of inspections.

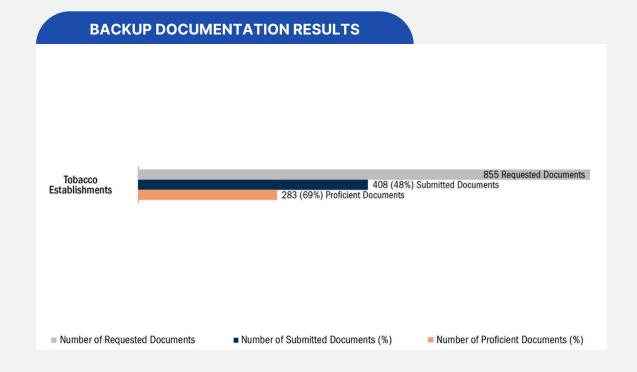
- Includes ensuring clear and consistent documentation as well as conducting thorough inspections.
- Includes providing ongoing training sessions to keep inspectors updated on changes or updates in regulations, ensuring that they remain well-informed about the latest compliance requirements.

Effective Tobacco Use Prevention documentation involves standardized forms that are thoroughly completed. These forms should include clear, written reports and be aligned appropriately with communication to the Board of Health. It's important that the documentation distinguishes between age-compliant checks and comprehensive enforcement inspections, and that relevant enforcement letters are uploaded as part of this documentation process.

Tobacco Use Prevention Qualitative Findings

The tables below outline the reasons each type of Tobacco Use Prevention document did not meet the proficiency standard. The most frequently selected determinations are bolded in red and ordered by frequency from greatest to least.

The figure to the right presents the percentage of submitted documents and their proficiency for the Tobacco Use Prevention category. The most significant issue for the Tobacco Use Prevention category overall was that follow-up actions were not completed or documented.



TOBACCO ESTABLISHMENT 2018/19/21 DOCUMENTS

EVALUATION CRITERIA

Follow-up action not completed or documented

Violations identified without documented follow-up action

Reinspection not completed or documented

Form insufficient or not approved

Critical fields not completed (e.g., signature)

Follow-up enforcement action does not follow those laid out in 105 CMR 665 (only for 2019 and 2021)