

COMPREHENSIVE HEALTH PLANNING AND CONSUMER FOOD PROTECTION

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Program planning is essential to the effective conduct of any program such as environmental health and consumer protection. Planning is the process of surveying and analyzing both the present and anticipated problems associated with the program in question, and then developing a method or course of action for, in this case, consumer food protection.

- 1) Planning starts with a decision -- determination of what goal you wish to achieve.
- 2) Planning determines what steps, or objectives, must be met to reach the goal.
- 3) Planning plots a course of action aimed at reaching the goal through attainment of objectives.
- 4) Planning provides alternative courses of action that may be utilized if factors affecting goal attainment change.
- 5) Planning provides a basis for setting priorities, of rating needs that must have resources applied to meeting them.
- 6) Planning is on-going, dynamic, and goal rather than organization oriented.

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Planning, then, provides a means for identifying problems, determining resources available and needed, and plotting strategy necessary to overcome deficiencies in the present situation.

In comprehensive health planning, under Federal P.L. 89-749 (Partnership for Health Act), proper consumer protection planning input is absolutely essential to future funding, programming, and organization and delivery of services.

The goal of health planning in relation to consumer food protection is, basically, to assure the highest level of health attainable for every person. However, the word "health" in this context is intended to have the broadest meaning possible. Many of us would have preferred that this actually be spelled out by including "safety, comfort, and well-being" along with the word "health". However, the legislative intent is clear and it is certainly impossible to plan or administer a program of consumer food protection without considering the total program rather than just a narrow set of health involvements.

The objectives of a health planning program such as consumer food protection are (1) to increase the capacity for continuing comprehensive planning, and (2) to re-direct the focus of grant programs, to revitalize state and local consumer food protection efforts, and to focus on the organization and delivery of these services.

The expected results from planning for consumer food protection are (1) a foundation for rational and efficient use of our resources, and (2) the allocation of resources according to state or local needs in order to bring about more efficient and effective use of the funds.

Some of the immediate ramifications of proper planning for consumer food protection are:

- (1) For the first time there is available federal funding for such planning.
- (2) For the first time there is a single state agency which has the designated responsibility to develop a health plan which considers every resident of the state and every aspect of the total health program, including those involved in consumer food protection.
- (3) For the first time there is created a mechanism to solicit, encourage, promote, and facilitate cooperation and coordination between diverse agencies involved in consumer food protection and agencies that provide related services.
- (4) For the first time the consumer of consumer food protection services has a voice in expressing his preferences and priorities.
- (5) For the first time there is an agency designated the responsibility of defining consumer food protection goals for each state and for setting priorities for the objectives to reach those goals.
- (6) For the first time state public health authorities are permitted the freedom and given the responsibility to determine their own state priorities for the allocation of Public Health Service funds, based on the needs as assessed in the individual states.

- (7) For the first time there is a designated single state agency which is empowered to review PHS project grant requests in the state and which can insure on the one hand there is no unnecessary duplication, and on the other hand any project grant that is supported will further the state consumer food protection goals as delineated in the Comprehensive State Health Planning.

I think it is interesting to note that, at the federal level, the logical and necessary organizational relationship between Consumer Protection and Environmental Health Services has been effected by creating the Consumer Protection and Environmental Health Service; this step has been long overdue and, for the first time, gives the necessary visibility and program emphasis to the total program of consumer protection and environmental health. The effort at the federal level is to be a broad-based effort so as to prevent further unnecessary and costly fragmentation of effort with the resultant confusion and duplication of services. A number of states are in the process of asserting a similar organizational relationship by planing Environmental Health and Consumer Protection Services on a broader basis and higher organizational level. As you know, the Food and Drug Administration has now been merged with the other environmental health activities of the U. S. Public Health Service and many of the consumer protection related activities of the former Public Health Service have been transferred into the merged version of the Food and Drug Administration.

Along with environmental health, consumer food protection services are basic governmental services and are rightfully

expected and demanded by the average taxpayer. The typical citizen may not fully understand all of the technical aspects of consumer food protection, but he does demand controls over sanitation, adulteration, wholesomeness, labeling, weights and measures, fraud, advertising, and packaging. He expects these matters to be properly handled, he expects his government to provide these services, and he is usually willing to pay for such services if a reasonable amount of good public relations are included in the administration of the programs.

Many important and basic consumer food protection services at the federal, state, and local level are not currently administered by an agency having a prime mission of public health and consumer food protection. A few such programs are administered by agencies basically having an allegiance to a special interest group, a special trade, or an industry group rather than to the general public. It is highly important that all consumer food protection activities be administered within one consumer-oriented organization in order to:

- (1) Deliver quality service and protection to the public.
- (2) Promote uniformity of effort and standards.
- (3) Prevent duplication of effort, budget, and facilities.
- (4) Allow for proper balance of program effort, budget, and priorities.
- (5) Balance difficult or controversial decisions in favor of the public.

Fragmentation and duplication of consumer food protection programs have occurred and will continue to occur unless:

- (1) They are based on public service and consumer protection.

- (2) They are properly staffed by knowledgeable professionals.
- (3) They have goals and objectives involving health, safety, comfort, and well-being of the public.
- (4) They are administered in conjunction with related problems of water supply, liquid waste disposal, solid waste disposal, insect and rodent control, air pollution control, and in industrial hygiene.
- (5) They are so organized as to insure program visibility, status, prestige, efficiency, and ease of inter-agency communication.
- (6) Responsibility for supporting and administering a consumer food protection program is fully accepted and understood by the designated agency.

It is patently ridiculous and wasteful to have a food processing plant which is supervised, controlled, or regulated by diverse agencies, each having its own specialized interest in any one of a number of factors, including water supply, liquid waste disposal, solid waste disposal, sanitation, employee health, air pollution, vector control, labelling, weights and measures, wholesomeness, adulteration, etc. Common sense and proper use of public funds dictate that these environmental health and consumer food protection factors are inter-related and should be administered by a single consumer protection-oriented agency.

Those interested in consumer food protection have, for the most part, not been taking advantage of provisions of the Partnership for Health Act relating to planning, program development, or demonstrations. There have been few, if any, grant applications submitted for federal funding under the provisions of Section 314-e

of P.L. 89-749. The same statement could be made for other programs of consumer protection and environmental health. Another problem exists in that the Federal Act is presently being administered at the federal level, within the Health Services and Mental Health Administration. This organization is on the same organizational level as the Consumer Protection and Environmental Health Services, so it cannot really be expected that the Health Services and Mental Health Administration will be eager to dispense their funds for the benefit of a competing organizational unit. It is highly necessary that the administration of P.L. 89-749 be elevated into the Assistant Secretary's Office, or that there be a separate act for Consumer Protection and Environmental Health Planning, or that the Act be amended so as to guarantee that a percentage of the funding will be utilized for consumer protection and environmental health services and planning.

With a late start, a number of states are finally making some headway into injecting consumer protection and environmental health into the Comprehensive Health Planning Program. This is being accomplished through diverse service patterns in different states, and the effort here in Colorado is commendable. The planning efforts in the State of Oklahoma have been particularly interesting to date. Oklahoma has already ranked various health-related problems so as to establish priorities. It is interesting to note that the problems of consumer protection and fragmentation of health programs among state agencies were both listed among the top ten problems. This would seem to indicate that consumers as well as providers of service are vitally concerned.

A number of valuable publications have been produced which may help in giving insight or providing guidelines for the problem of consumer protection. Among these are the Guide to Environmental Health Planning (USPHS), Environmental Factors in Health Planning (APHA), and Strategy To a Livable Environment (better known as the Linton Report).

Some of us are slightly concerned that the head-long rush into comprehensive health planning may have tended to cause people to forget that planning is a technique or method and is not a final goal or an end unto itself. Planning is a vital means to an end. There are many planning efforts other than those associated with the implementation of P.L. 89-749. However, proper consumer food protection input into this planning mechanism should result in proper balanced funding; improved programming; and decreased fragmentation of program; and decreased duplication of effort, facilities, budget, and personnel.