

Program Report Card: Food Safety Program--Department of Consumer Protection

Quality of Life Result:

The goal is to establish a risk based food safety program by employing a uniform basis for measuring and improving the performance of packaged food from production to retail sale. The adoption and implementation of the FDA Program Standards will help direct regulatory activities at reducing the risk factors contributing to food borne illness. As a result, **the safety and security of Connecticut's food supply will improve.**

Contribution to Result:

Target and reduce the CDC identified risk factors that have an impact on food borne disease
Promote the adoption of good practices by both DCP and the industry by working towards a less adversarial process through uniformity, outreach and training
Reduce subjectivity in inspection through training and uniform practices

Partners: USDA, FDA, CT DPH, CT Agriculture & Industry

How much did we do?

Performance Measure 1:

Initiate a self assessment/baseline measurement of the CDC identified risk factors and laws and regulations. The top 5 identified risk factors are:

- **Approved Food Source and/or Record Keeping**
- **Poor Personnel Hygiene** (Personal Cleanliness, Keeping sick people away from food)
- **Contaminated Equipment/Preventing Contamination** (Minimize cross contamination, e.g., raw from cooked)
- **Inadequate Cooking and proper time and temperature for food holding** (Promoting adequate cook and holding times particularly for critical foods such as ground beef - E. coli and eggs – Salmonella

- **Foreign Substances** (Preventing food from being adulterated by toxic substances, e.g., pesticides, non-food approved cleansers and other toxic materials.

Story behind the baseline:

According to the CDC on Dec. 15, 2010 an estimated 48 million illnesses, 128,000 hospitalizations, and 3,000 deaths each year may be associated with microorganisms in food. Hospitalizations due to foodborne illnesses are estimated to cost over \$3 billion each year. The FDA estimates the cost of lost productivity is at between \$20 billion and \$40 billion each year. In addition to acute illness, some microorganisms can cause delayed or chronic illness. Food borne chemical contaminants may cause chronic rather than acute problems, and

specific estimates of their impact on health and the economy are not available.

The majority of those illnesses are attributable to CDC identified risk factors.

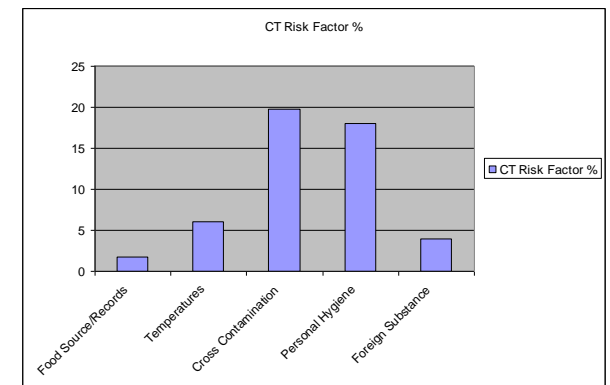


Figure 1 CT Risk Factor Baseline

Proposed actions to turn the curve:

Develop a comprehensive baseline of data from existing databases to assist in monitoring and targeting risk factors and risk factor reduction for food borne disease noted in inspections of Connecticut based food processors.

2012-2013 Accomplishments: completed baseline of laws and regulations and made proposed modification of those laws in line with US FDA

Presently working on risk-based database within DCP's licensing software

Performance Measure 2:

Outreach in the form of workshops presented or task force membership on relevant food safety topics.

Story behind the baseline:

The adversarial element of an inspection program can be counter-productive to initiating and promoting good practices within the regulated industry. Inspections are a "Snap Shot" of the establishment the timing of which does not always coincide with critical procedures that should be observed.

Inspections are also finite. The length of time devoted to an inspection is not sufficient to fully observe and document a practice. Therefore internalized practices are desirable to promote self promotion within the industry of acceptable practices.

Interaction with consumers and industry are critical and will be accomplished by supporting or actively participating in meetings such as task force, workshops or advisory committees. Topics at such outreach efforts may include food defense, investigation strategies and regulatory requirements. Representative from industry, consumers, academia as well as our State and local partners are to be invited.

Proposed actions to turn the curve:

Increase participation and sponsorship in workshops, educational sessions and outreach (from 1 in 2009 to 2 or more in 2010) to industry and consumers. Documentation of those meetings and course evaluations will be collected and analyzed to work towards future workshop improvements.

2012-2013 Accomplishments: Successful application for grant funding; planning to hold a Process

Authority Course, tentatively scheduled for November 2013.

Performance Measure 3:

Design and develop a standardized Report Card for each DCP Food Safety Inspector as a tool in tracking their training, professional growth and expertise. Areas of expertise include:

- Prevailing statutes, regulations,
- Public Health Principles
- Food Defense Awareness
- Communication Skills
- Microbiology
- Epidemiology
- Basics of HACCP
- Basic Labeling
- Control of Allergens
- Sampling Techniques and prep

Story behind the baseline:

A key limitation in any inspection program is subjectivity, both on the part of the inspector and on the operator of the establishment e.g., the act of the inspection itself changes normal operational procedures. Uniform and consistent training of the inspector will seek to mitigate subjectivity. The operator will thus be encouraged to prep for the inspection rather than the inspector.

Proposed actions to turn the curve:

2012-2013 Accomplishments:

Completed the initial training identified above. Continue to work to develop and utilize a new Standardized Food Inspector Report Card as a tool to improve knowledge and uniformity.