THE FOOD SERVICE INDUSTRY AND ITS RELATION TO THE CONTROL OF FOODBORNE ILLNESS

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Some viewpoints that I have acquired over the past 40 years in the food service business may prove of value to this group and the restaurant industry, and to our mutual interest, the public.

During my initial eight years, starting in 1921, as a cafeteria employee and supervisor, concern was that things be clean, which, of course, meant look clean. Of the next four years as manager, little of value is remembered of inspector visits or advice received. Cleanliness was largely a matter of the owner’s personal consciousness. Drying of tableware was universally effected by toweling, since dish washing facilities seldom found water hot enough for self-drying.

Refrigeration during those earlier days was accomplished through the iceman, who filled the overhead bunkers of ice boxes with ice, producing storage temperatures from perhaps 60 degrees, at best, and on up as the ice melted away.

As President and General Manager of our company, beginning in 1933, I passed through 20 years of varying experiences with state and local health departments. This involved contacts within our establishments and at association meetings of local, state and national level. I saw great advancement in official and operator understanding of hazards and how to cope with them.

During these years, growing public awarenesses and demands for local action often found officials of varying qualifications in positions of responsibility. They did the best they could through combining limited criteria with personal hunches for determining problem areas and effective corrective measures.

Conflicts within and between communities became increasingly obvious. Unfortunately, differences of opinion between operators and officials combined to spread doubts among operators and their personnel upon regulations, even those deserving of full justification.

We have seen confidence and understanding among food service operators, upon whom end results to the public must eventually depend, deteriorate. Often the effect has been frustration for both public health officials and food service operators.

Thus, until ten years ago, my personal understanding of the relationship between restaurants and the control of foodborne illness developed under these confusing circumstances, the latter years of which involved the operation of twelve establishments in seven cities, over three states.

Restaurant association contacts soon confirmed that my personal frustration in knowing what was right was being voiced by operators generally over the country. As Chairman of the National Restaurant Association’s first public health committee, appoint-

References


2President, Bishop—Stoddard Cafeteria Company and formerly Chairman of the Public Health Committee of the National Restaurant Association.
ed for the singular purpose of probing for opportunities at the national level of improving the uniformity of and confidence in sanitation regulations applying to restaurants, I began my past ten years experience. Working with the National Sanitation Foundation during that period, as industry's co-chairman of the National Food and Beverage Council and with U. S. Public Health Service as an industry representative on its Advisory Committee, has provided an opportunity to associate with many officials from all over the country and with educators in this field.

I have, in fact, felt at times more like a health officer than an operator, having actually spent far more conference hours during the past ten years with public health groups than with those of the food service industry. Combine these close associations with industry and official groups with 40 years of working in and operating seven to twelve establishments, and we find acquired an understanding of problems and weaknesses of both groups.

It seems, therefore, most advantageous to speak of, and on behalf of, the great mass of people within the Food Service Industry, where understanding means the real difference between control in fact, and control substantially in theory and wishful thinking.

The principal handicap under which operators view the relationship of their establishments to foodborne illness and its control, is that of much frustrating confusion.

That confusion should exist and these questions be asked today, there perhaps should be no small measure of sympathetic understanding exchanged among all of us. For where do we find so many people of such limited qualifications, under so many varying conditions, trying to do something about so many vaguely identified hazards, the evidence of which cannot be seen, tasted, smelled, felt, or heard?

Regarding Compliments Due

There is no confusion regarding the tremendous contribution made throughout the years by health officers over the country to the development of sanitation standards. This applies to those within our local areas up to their centers of association guidance, such as the International Association of Milk and Food Sanitarians — to the leadership of the U. S. Public Health Service — to the National Sanitation Foundation, and other supporting research and educational institutions. There can be no doubt regarding the great wealth of pertinent knowledge possessed throughout this highly professional group. Of our local sanitarians, we in my own company say continuously to ourselves, "Thank heaven for health officers." A well organized and conscientiously run health department is indispensable to the development of understanding and satisfactory standards within our twelve establishments.

There is no doubt about the accomplishments of progressive restaurant operators throughout our land, with their native instinct of wanting to be right, and of taking pride in being progressive. Many have sought and adopted standards not only up to, but well beyond, normal sanitation and food safety requirements. With courage and a will to succeed, they have paid the bill for equipping and operating American public eating houses with the highest standards of sanitation and food protection the world over.

Tribute must also be paid to the restaurant equipment manufacturers and suppliers who, with keen inventiveness, have kept pace with demands, and at times gone ahead to help make these recent years of development possible.

Finally, there are the American food merchants who have combined technological developments to place constantly increasing varieties of American foods at their safest within our American restaurants, thus providing operators and their patrons a full measure of confidence in their safety.

Good Promoted by National Restaurant Association

Through its newly formed Public Health Committee, the National Restaurant Association, in the fall of 1952, questioned the National Sanitation Foundation on the possibility of getting all nationally organized groups of health officials to sit down with food service groups for the purpose of developing a new ordinance and code combining the best judgment of all concerned. This would insure a document deserving of countrywide support and adoption. Favorable reactions brought together at the National Sanitation Foundation a large, representative group of official and industry people, involving many meetings over a period of three years. This action created the National Food and Beverage Council.

The initiative for creating a new regulatory pattern was taken up by the U. S. Public Health Service as a revision of their 1943 Recommended Ordinance and Code Regulating Eating and Drinking Establishments. Two National Restaurant Association representatives served on the 16-man Advisory Committee appointed to assist in developing the new document, which was published recently.

The resulting new manual is a splendid document in many ways. The National Restaurant Association members of the Committee take satisfaction in having contributed generously to the better understanding and direction of purpose embodied in it.

The National Restaurant Association believes a major step was accomplished towards its first goal of a modernized regulatory pattern deserving of
countrywide support and adoption as a means of improving consistency and understanding.

The continuing program of National Restaurant Association's activities in this field, as recommended by its Public Health Committee and endorsed by the Association's directors, calls for the exercise of leadership among the restaurant people in this field. Under the capable, energetic guidance of Mr. William Clements of Denver, Colorado, the present Chairman of this committee, this group is pursuing many projects including:

1. Working with state and local associations in their promotion of increased activity in their field, and interest in the use of the new Public Health Service Manual.

2. The best methods for reaching out to the industry in promoting increased interest, understanding and effective action are being sought. The National Restaurant Association believes that improvement of lasting results yet needed can be accomplished only by working through top management.

3. There is not to be found one complete text on this subject written especially for operators in language they and their people can understand. It is believed that such a text would represent a valuable asset in the promotion of good standards of food safety and sanitation. The development of such a text by sections is to be undertaken.

4. National Restaurant Association cooperation with public health leadership of national significance, as has occurred in the past, is being extended with continuing interest. This involves:
   a. The National Sanitation Foundation, that has had the personal and annual financial support of the National Restaurant Association since 1948.
   b. Cooperation with the Food Research Institute at the University of Chicago, headed by Dr. G. M. Dack. This organization has received substantial financial support from the National Restaurant Association annually for the past eight years with a very special interest in better knowledge being obtained for our industry on the control of food-borne illness.
   c. Cooperation with the U. S. Public Health Service, which has been a source of great satisfaction to our Association leadership. With uniformity of regulations being a prime interest, its work in this regard is fully compatible with National Restaurant Association's plea for countrywide consistency.
   d. With technical knowledge of this subject being well-known within our educational institutions, we take note that the National Restaurant Association in sponsoring the first restaurant graduate course at the University of Chicago in 1947, a course now provided in 21 schools over the country, is responsible for sponsoring enlightenment among new graduate entries into the food service field.

The restaurant industry is on the move with an earnest desire to contribute effectively to the elimination of confusion and the promotion of understanding in this field. Much of what eventually is to be accomplished will be determined by the acceptance and guidance given to this activity by the combined leadership.

**Suggested Official Actions**

The following steps are considered of primary importance:

1. Campaign for a serious fresh approach to improving operator understanding through the elimination of inconsistencies. A wide range of variations is involved that create highly detrimental individual operator reactions, all the way from doubt and distrust to complete disbelief in his prime source of technical information, his local health department.

2. To simply identify the scope of our reference, inconsistencies are cited as occurring within the following relationships:
   a. One officer today, and the same officer tomorrow.
   b. One officer and his successor.
   c. One establishment and others within the same community.
   d. One community and its neighbor.
   e. One state to another.
   f. Inconsistencies with the facts themselves, as well understood by the operator.

No single factor can contribute more to industry understanding and responsiveness than complete confidence of operators in their local health department. With inconsistencies, however, representing the one greatest destroyer of confidence, it would seem completely worthy of any effort required among health officer groups to campaign country wide for consistency wherever such may serve improved industry-health officer relationships in their mutual desires for doing what is right.

2. Take serious account of what actually should be practiced when officials express agreement with the so-called education approach vs. police methods. We quickly refer to our understanding that one is definitely not a complete substitute for the other.

Testifying to the increasing trend of confidence in this approach is the awareness that in the 1943 edition of the USPHS Recommended Ordinance and Code, but two lines were devoted to the educational approach as a passing remark, while pages are used to laud its merits in the new 1962 manual.

Undoubtedly, the simple reliance upon legally enforced directives is a convenient fast-acting process, and one requiring a minimum of knowledge and communicating ability. Yet, the local health department has a choice between continuous fence building or the more permanent results of a cooperative, understanding and enlightened food service industry. A
drive within health officer leadership for identifying what constitutes a true educational approach as a pattern to be promoted on a country wide basis would seem to possess great promise of honest-to-goodness value.

3. Sponsor the adoption of publicity programs of local to national level that are clearly and unmistakably directed to the accomplishment of practical standards of true and understandable public value. The perfectly natural desire found in most of us to seek personal satisfaction and recognition, keeps us constantly on the alert for new means of getting out in front. We believe the trend of some projects today deserves re-evaluation on this basis, the concern being that official effort and demands upon industry resources may occur disproportionate to any assessable public good.

For example, I believe there is ample justification for adopting the position that the right of decision to have a classy showplace kitchen should remain the prerogative of the man who has to pay the bill and make the extra investment pay out. Leadership, guided by a policy of adopting for official enforcement the very highest standards procurable — especially when fostered under such measurements as nicer, smoother, easier, better or surer — can find that leadership easily riding past real measurable benefits to the public.

There must be no confusion about the distinction that must be made between architects, designers and builders, functioning in the luxury of approving the finest, without concern for cost, and the great mass of individual restaurant operators who, in risking their personal life's savings, must necessarily weigh cautiously the value to be gained in economic return and public protection from every dollar spent.

Unless there is to be an official expectation of an ever widening gap between written regulations and what is generally enforced in a community, there must be a renewed dedication of our country's public health groups to the cause of meaningful, effective, and enforceable minimum standards. It must follow that if the current rush of interest toward luxury standards is permitted to continue, incorporated in regulations and enforced uniformly upon the country's restaurants, large numbers will be forced out of business.

The word "practical" must certainly have an understandably acceptable place in describing standards for public safety. There is great need for countrywide agreement on practical standards of food protection and sanitation. This was, we believe, the purpose of the new USPHS Manual.

4. The opportunity for the removal of a misunderstanding that exists, not only with industry but, perhaps of greater importance, with the public — we refer to the ABC Placarding System.

Though represented to the public as a measure of safety, it is in fact not that at all. Among operators who understand the problem of obtaining true and unbiased appraisal, this enforcement device represents an inexcusable element of operator distrust and justified antagonism.

The directors of the National Restaurant Association, understanding this ABC Placarding System, have over many years continued to protect its use. It is included, therefore, in this list of obstacles to the cause of understanding.

It is suggested that this system be placed under close scrutiny and the justification for its remaining on the American scene evaluated. We are confident that your strong support for the National Restaurant Association's position will be forthcoming.

5. Understanding can be served in many other ways. Industry, health officials and the public can stand to gain from joint efforts to obtain facts yet unknown or through qualified officers and industry representatives putting themselves to the task of reaching needed conclusions. For example, the real identity of foods termed "Potentially Hazardous" in the new Manual (previously described as "Readily Perishable") has not as yet been determined for any practical application. Yet the new manual applies two quite important control measures on the foods so described. The so-called sneeze-guard might well deserve re-evaluation of its real purpose and good. Identification of respiratory infections or other illnesses that can or cannot be transferred by ingestion could give needed clarification of the value of certain existing control measures, or the need for additional ones.

6. Last, there is the factor of regulation obsolescence. Regulations exist in the local ordinance and code, or in the habit of health officer thinking, long after the actual reason for their adoption has disappeared. As with the acceptance of the new Public Health Service Manual, change generally cannot be expected to take place without a forceful selling job being planned and executed by the total responsible leadership. Printed materials must be brought up to date.

Let's remember that Moses worked on these problems 3,412 years ago; yet today there remains incomplete knowledge, oral misapplication of available knowledge, and need for greater confidence in many procedures.

We who share a great responsibility to the public and who, in our years, are given the great advantage of modern technology, should in haste get our heads together. We should be identifying the gaps in knowledge where guessing and assumption continue to fill in for facts, and the gaps in the transmittal and use of that knowledge by those through whom this public trust is finally executed.