Evaluation of State Foodservice Sanitation Programs

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ABSTRACT

Outlined are procedures for evaluating foodservice sanitation programs with State Foodservice Sanitation Rating Officers certified by the Food and Drug Administration. Modifications are outlined to provide more continuity between the sanitary status of the establishments within the jurisdiction being evaluated and enforcement program being carried out by the regulatory agency. A greater degree of program uniformity is needed as the present trend of interjurisdictional movement of prepared foods for direct service to the consumer continues and increases. The increasing number of chain foodservice establishments also increases the need for standardized and certified foodservice programs and personnel.

In Kentucky the Foodservice Establishment, Retail Food Market and Vending Inspection and Enforcement Programs are carried out through district or county health departments. Therefore, comments in this paper will be directed largely toward evaluation of District and County Foodservice inspection programs. I feel regulatory agencies as a whole do not place enough emphasis on retail food service.

The importance of retail food service was borne out by a paper, "The Federal Food Service Program," by Bowers and Davis (1). The authors indicate that the foodservice industry is the fourth largest business in the United States. This industry alone has an estimated gross sales of $62 billion annually. The National Restaurant Association projections through 1977 anticipate approximately $80 million in sales.

The Kentucky Restaurateur (2), a publication of the Kentucky Restaurant Association, indicates that according to a 1974 survey conducted by the Department of Labor, approximately 27% of the food dollar is spent on food prepared outside the home. Since 1974 this percentage has increased to over 33%.

No wonder supermarkets are beginning to consider the restaurant as their prime competitor. I feel this has brought about the current trend of many retail food markets going into the foodservice business. In Kentucky this includes not only the sandwich business, but also plate lunches and all the trimmings. The bicentennial celebrations throughout the United States have brought into existence more mobile foodservice and temporary food service units this year than have ever previously existed at one time.

Increased interstate movement, not only of people, but also of food, food ingredients, and food additives has, in my opinion, increased the need for uniformity and standardization by regulatory officials on the Federal, state and local levels.

FDA is presently making strides in this direction. Revision of the 1962 Food Sanitation Ordinance and the 1965 Vending Machine Ordinance are under way. Also, a new model Ordinance for Retail Food Markets is nearing completion. Hopefully these revision will be available for state adoption in 1977.

How ever great the words standardization, uniformity, revised model food ordinances, etc. sound to us in the regularly field, I cannot, in good faith believe any or all of these things will greatly improve the overall condition of foodservice in the United States.

I feel in most areas, the problems with substandard foodservice establishments can largely be traced to the lack of industry training and the failure of regulatory agencies to take a positive attitude toward their foodservice inspection and enforcement programs.

The function of the Kentucky Food Branch is primarily to provide administrative and technical support to local health units in the areas of: program planning, monitoring, and integrating. This is done through: (a) standard setting, (b) technical consultation, (c) training, (d) program standardization, (e) certification, (f) permit issuance, and (g) construction plan approval. The Branch also provides direct services in food manufacturing and storage facilities, state-owned institutions and interstate carrier facilities. Much of this work is carried out under a contract with the Food and Drug Administration. The areas I'll attempt to deal mainly with here today are program standardization and certification.
THE KENTUCKY PROGRAM

Kentucky presently has four FDA Certified Food Service Sanitation Rating Officers. The State is divided into four areas. The Survey Officers' time is spent in the following areas: (a) foodservice Establishment Surveys, 30% of time; (b) retail food market surveys, 30% of time; (c) environmentalist and industry training, 15% of time; (d) interstate travel sanitation program (under FDA contract), 10% of time; and (e) special problems and technical assistance to local health units, 15% of time.

In Kentucky, regulations are adopted by the Department for Human Resources and are effective in all areas of the State. Although local health boards have the authority to adopt more stringent regulations, this is rarely done. Some counties do require annual health examinations or tuberculosis tests for foodservice employees, and Lexington-Fayette County has a grading examination for foodservice establishments.

Surveys are conducted according to requirements of the Kentucky Food Service Code. The present code was revised in late 1974, and became effective April 1, 1975.

Kentucky has not adopted the Federal Ordinance; however, we have patterned our regulation very closely after the recommended Ordinance. In fact, our present regulation was patterned closely after the 1962 ordinance. Whenever the final FDA Ordinance revision is completed for state adoption, we will revise our regulation accordingly.

We are presently attempting to survey the food service and retail food market programs for each local unit a minimum of biennially. More will be said about this later.

Procedures for Evaluating Foodservice Sanitation Programs as recommended by the FDA are followed very closely as regards foodservice establishment data.

In 1974 we attempted to review the foodservice establishment. Surveys conducted over the previous 2 years. Although we are basically satisfied with the establishment data collected, we found what we considered a weakness in the administrative or enforcement data collected. In most instances the enforcement rating was not compatible with the establishment rating.

In too many instances the establishment rating was below the acceptable level; however, at the same time the administrative or enforcement rating was rather high. This meant one of two things: (a) enforcement procedures were not sufficient, or (b) we weren't using the right evaluation methods.

In reviewing closely the items considered as administrative data, under the FDA recommended procedures, we found many of these items to have no direct bearing on the inspection and/or enforcement program. These items were eliminated from the evaluation sheet.

Examples of these items are: (a) Does the inspection staff equal a minimum of one inspector/15,000 population of 300 establishments? (b) Are pre-assembled sample kits available for investigation of foodborne disease outbreaks? (c) Is an approved laboratory available to assist in foodborne outbreaks? (d) Are the local media utilized for dissemination of program information? (e) Are standards equivalent to State and FDA standards? (f) Are report forms equivalent to State and FDA recommendations? (h) Are construction plans for new establishments reviewed and approved? (i) Do inspectors attend workshops and seminars on a regular basis? (j) Is at least one trade of professional journal subscribed to?

Although credit is not presently given for these items, they are documented and spoken to in the survey narrative report. At best most of these items have only an indirect effect on program operations. If, in the opinion of the Survey Officer, they are not being carried out and they have a bearing on the overall program, recommendations are made along these lines.

We then took a look at what was actually required, under the Code, to carry out the inspection and enforcement requirements, and a new Enforcement Evaluation Sheet was developed accordingly.

Basically, when we reviewed the Kentucky Code, there were nine areas which required the regulatory agency to carry out some type of enforcement action. Therefore, the "Food Service Establishment Survey Report" (Fig. 1) was developed accordingly. We feel this enforcement evaluation approach is much simpler and actually places emphasis where it is needed.

Those readers having knowledge of Interstate Milk Shippers Program, may recognize a similarity between the form shown in Figure 1 and the one the Milk Sanitation Rating Officer uses in conducting milk surveys under the cooperative State-Public Health Service Program for Certification of Interstate Milk Shippers.

We have been using this system for about a year and have found the establishment and enforcement rating to be much more compatible. We feel it gives us a much better picture of the enforcement being carried out in the program.

Once the Survey Officer completes the survey, and it is sent to the State Office for typing and review, copies of the completed summary sheets, enforcement sheet, and narrative report are forwarded to: (a) district/county administrator or health officer, (b) sanitarian(s) responsible for the program, (c) community: health services, (d) FDA District office, and (e) survey officer.

As Manager of the Food Branch, I also submit a cover letter with each survey report, emphasizing weaknesses and areas which need immediate action and offering technical and administrative assistance if needed. If the survey report indicates the local program plan, which was approved and funded, is not being carried out and the objectives not being met, this also receives attention.

USE OF REPORTS

The survey reports are used by the program
FOODSERVICE SANITATION EVALUATION

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR HUMAN RESOURCES
BUREAU FOR HEALTH SERVICES

FOOD SERVICE ESTABLISHMENT SURVEY REPORT

OF

DATE

Health Officer: ____________________________ Environmentalist: ____________________________ Supervisor: ____________________________

Survey Officer: ____________________________ Date Certified: ____________________________County: ____________________________ Population: ____________________________ Code in effect: ____________________________

SUMMARY OF SURVEY RESULTS

Total No. of Establishments ____________________________ Sanitation Compliance Rating ____________________________

No. Inspected on Survey ____________________________ Enforcement Rating ____________________________

ENFORCEMENT EVALUATION

<table>
<thead>
<tr>
<th>Number</th>
<th>ITEMS</th>
<th>Number Inspected</th>
<th>Number Complying</th>
<th>Percent Complying</th>
<th>Weight</th>
<th>Credit</th>
<th>Number</th>
<th>ITEMS</th>
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<th>Number Complying</th>
<th>Percent Complying</th>
<th>Weight</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>All establishments hold valid permits</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6. Est. below 70 issued suspension notice</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Permits posted</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7. Requirements Interp. according to Reg.</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>All Establishments Inspected 1/6 months</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8. Enforcement Procedures carried out</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Est. scoring 70-84 Inspected in 30 days</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9. Records, systematically filed, complete, current</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Est. with 4 or 5 point Insp. in 10 days</td>
<td>10</td>
<td></td>
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</table>

ENFORCEMENT RATING

Remarks:

Figure 1. Foodservice establishment survey report form used in Kentucky.

The administrator in developing program plans in the future. They may be used locally to request budgeting support for additional staff, staff training, or administrative support.

The Office of Community Health Services, which is responsible for appointing state funds to local health units, may use the survey report to determine if program plans which were approved and budgeted with State funds are being carried out effectively and efficiently. State funds may be withheld in certain program areas based on the failure of a program plan being administered. However, this is a last resort action and rarely done.

More usually in problems areas, we attempt to work more closely with the sanitarian and provide him with additional training. In areas where program problems
result from poor administrative support from the health officer or administrator, problems are sometimes brought before the local board of health.

Based on surveys we have conducted over past 1.5 years under the present Code, the Statewide average for Kentucky Foodservice Establishments Rating is 82.6% with an average Enforcement Rating of 84.3%.

PROPOSED ADDITIONS

Two program additions which we are presently considering putting into effect are: (a) A certification program for all district/county inspectors carrying out the foodservice inspection and enforcement program. (b) Annual spot checks of all district/county programs.

Under this program, complete surveys would be made approximately once each 2-3 years or more often upon request and in problem areas. Under the annual spot check system, each district/county unit would be required to keep an up-to-date record, of their rating, based on their last inspection.

On the spot check, the survey officer would: (a) Make a complete record review. (b) Select at random somewhere between 8-15 establishments for inspection. This will vary based on the size of the program being surveyed. We realize these few establishments would not be a statistically sound number, however, we do feel they would give us an indication of the program operational status. The ratings of the establishments selected would be compared with the district/county average as compiled by the local unit. If the rating we compiled was within + or -5% of the local established rating, we would accept the present program rating as being accurate. (c) Spot checks falling over 5% lower than the local rating would require us to complete a full survey.

This would free our Survey Officers to spend more time in problem areas and would strengthen the overall state program. We will also be adding one survey officer to our staff as soon as he receives some extra training and is certified by FDA.

IN CONCLUSION

In closing, I would say that as Program Managers and Survey Officers we need to maintain a positive attitude, and constantly look for new ways to strengthen the foodservice program. For too long, too many of us, have taken the attitude, that little can be done in foodservice programs. There is no reason why through a positive enforcement and training programs much needed improvement cannot be achieved. We don't have to wait for a national disaster to get concerned. To do less than our best in the field of foodservice would be unexcusable.

ACKNOWLEDGMENT

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REFERENCES