An Ohio Health Department’s Approach to a Comprehensive Foodborne Illness and Food Defense Preparedness and Response Program

Also in this issue…
- 2017 AEC Agenda
The object and purpose of the Association shall be the betterment of the health and welfare of mankind through the improvement of the environment. This shall be done by sponsoring state and regional meetings and publications, by developing methods of measuring and evaluating achievements in environmental health, the establishment of a central point of reference and education material for the membership, the procurement of cooperation with other agencies and organizations, and such other activities as will lead to the greater efficiency and professional growth of the membership.

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President’s Message

Hello Fellow OEHA Members. The time has come to thank everyone for their support and involvement in our great association and celebrate some of our accomplishments. Many of our committee chairs and board members were very busy this past year and completed a lot of objectives for the membership. Here are some of the highlights:

Membership Accomplishments
- Membership has increased over 7% during 2017-2018
- Sponsored Ohio EH Director Meetings twice this past year – we will continue to convene this meeting under a new title to be called OEHA Legislative/EH Program Update Meeting open to all members
- Secured and approved a new service contract with Hicks Partners, LLC for lobbying services
- Provided an Environmental Health Leadership Course
- Continued as a provider of sanitarian, pesticide operator, and wastewater operator continuing education thru our five conferences per year
- The Board updated OEHA’s Policy and Procedure Manual
- Revised OEHA’s Code of Ethics

Partnership and Policy Advocacy Accomplishments
- Advocated on a variety of environmental public health issues within HB 49 (State Budget Bill) including providing opponent testimony in front of the Senate Finance Health and Medicaid Subcommittee
- OEHA was successful in removing Section 737.30 from HB 49. This section stated, “The Retail Food Safety Advisory Council, in consultation with the Director of Environmental Protection, shall study the potential for improving the operational efficiency of inspections conducted by boards of health under laws administered by ODA, OEPA, and ODH.” OEHA was not opposed to improving efficiencies; however, we did not believe RFSAC was the proper group to study this with the Director of Environmental Protection
- Provided proponent testimony on SB 2 before the House & Senate Committees supporting the bills work to address emerging issues related to the Construction and Demolition Debris (C&DD) industry, and specifically, establishing regulatory oversight of C&DD “processing” facilities Senate Bill 2 was signed into law on July 7, 2017
- HB 65 Food Survey Methodology Legislation – On August 29, 2017, OEHA reached an agreement with ODA/ODH that will change the food survey process without statutory changes.
- OEHA is Chairing the 2018 Ohio Public Health Combined Conference
- OEHA was successful in placing an OEHA Board Member on the RS Board Transition Team
- OEHA submitted recommendations of members willing to serve on the newly created Sanitarian Advisory Board with ODH
- OEHA submitted recommendations of members willing to serve on the Department of Commerce’s Manufactured Home Park Advisory Council
- OEHA submitted recommendations of members willing to serve on the Ohio Retail Food Safety Council
- Appointed an OEHA Member to the Ohio EPA Materials Management Advisory Council

Financial Accomplishments
Met all financial obligations to all vendors,
In this section we recognize those individuals who successfully met the standards to earn the title Registered Sanitarian in the State of Ohio. In this issue we congratulate the following individuals who achieved the status of Registered Sanitarian from November 15, 2017—February 15, 2018:

- Aaron B. Moore
- Sion Chamberlain
- Jason J. Revesz
- Rodney J. Brewer
- Brian Scott Elswick
- Kelsey M. Heyob
- Joshua F. Shelley
- Leah J. Terry
- Blythe E. Buurma
- Sasinee Sanka
- Sarah E. Kevany
- Jason M. Soles
- Tory Cramer Coyle
- Amanda L. Hill

Recognizing Ohio’s Newest Registered Sanitarians

As I come to the end of my presidency, I would like to thank all the members, our committee chairs, and our board members. Without all of the continued support from all, we would not have been successful in reaching our goals. I believe that with great leadership from our new President Garrett Guillozet, this association will achieve even more for its membership.

I have thoroughly enjoyed this year as president and I did my very best to represent all of you, our association, and profession. Thank you for your trust and remember take advantage of all that OEHA has to offer including scholarships, education, professional development, and networking. This is your association and it is only as good as you make it. Please get involved and support the Ohio Environmental Health Association.

Thank you for your attention and all the important work you do to protect public health in Ohio!
As we head into the month of February, I realize that the OEHA AEC will be here before long. I look forward to seeing many of you there. Thank you to the Northwest District for giving me the opportunity to serve as the District Director again. In 2005, I officially joined the Northwest District planning committee and have been serving on the committee since that time. Since accepting the nomination and being elected for District Director of Northwest OEHA, I have often been asked, “Why would you take that position again?” Before I answer the question, I want to give you a little background. My career as a sanitarian started at the Van Wert County Health Department in 2004 when I was hired in full-time working primarily in the food and recreation programs. Fortunately, my supervisor and sole co-worker was involved in OEHA and the Northwest OEHA Planning Committee. I became a member and was involved in the planning committee by association. I was elected as District Director-Elect in 2009 and served as District Director in 2010. I missed the first two months of my term due to maternity leave and spent the next few months acclimating myself at the Board meetings. For a young sanitarian from a small health department, the OEHA Board meetings were a little intimidating. By the end of my term, I had just begun to feel really involved with the state association. I accepted the nomination to serve again as district director because I feel that now, more than ever before, OEHA is advocating for our profession and providing education in many different ways. The environmental health profession has changed drastically since I became a sanitarian in 2004 and I want to be involved in that change. In 2015, I took over the position of Environmental Health Director at the Van Wert County Health Department. I have learned that with the growing responsibilities of sanitarians and PHAB accreditation deadline looming, we all need to work together and learn from each other. I look forward to my term on the board as a more seasoned and confident sanitarian.

The other deciding factor when I accepted the nomination was that the Northwest District has a fantastic planning committee. I cannot commend them enough, and I look forward to another year of conference planning. The Northwest OEHA conference will be on October 11-12, 2018 at the Kalahari Resort & Convention Center in Sandusky. If you have any questions, speaker ideas or other suggestions for the conference please contact me or another planning committee member.
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## 2018 Annual Education Conference
### Draft Agenda

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<td>8:45 – 9:00</td>
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<td>Ohio Public Health Climate Resilience Coalition</td>
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<td>Patrick Quade</td>
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<td>Tobacco 21</td>
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An Ohio Health Department’s Approach to a Comprehensive Foodborne Illness and Food Defense Preparedness and Response Program

Abigail R. Zindren¹, T. Burford²
¹Centers for Disease Control and Prevention; Akron, OH
²Summit County Public Health; Akron, OH

Abstract

An estimated 48 million people become ill every year from foodborne illness, which is illness or infection caused by consuming food or drink that contains harmful bacteria, parasites, viruses, or chemicals¹. This number is significant considering that almost all foodborne illnesses can be prevented with proper food safety techniques and vigilant food defense (protection of food from intentional contamination). Despite the preventable nature of foodborne illness, outbreaks occur frequently and remain a constant concern for public health professionals working in food safety and outbreak response. Response efforts to outbreaks can become expensive, as foodborne illness costs approximately $15.6 billion annually in the U.S. due to medical costs, specimen testing, doctor visits, and inspections of facilities associated with the outbreaks¹. The negative effects of foodborne illness can be mitigated by a comprehensive foodborne illness and food defense preparedness and response program. Such a program can be created by using the Food and Drug Administration’s (FDA’s) Voluntary National Retail Food Regulatory Program Standards as a guide for improving existing programs.

Background

The approximately 3,500 food service operators, retail food establishments, and temporary, vending, and mobile food outlets in Summit County rely on safe food handling to protect the public. Safe food practices are a major priority for Summit County Public Health (SCPH). However, before the recent revision, the food defense preparedness and response program could not adequately carry out the competencies deemed essential for responding to complaints and outbreaks with foodborne illness implications. As a result, the Food Safety and Recreation Unit of SCPH initiated a plan in 2011 to improve alignment with the FDA Voluntary National Retail Food Regulatory Program Standards. The FDA Program Standards are intended to reduce, or even eliminate, illness and death from food produced at the retail level². SCPH used principles and ideas from Standard 5, Foodborne Illness and Food Defense Preparedness and Response, as a template to improve its foodborne illness program.

Collaboration is Key

Cooperation from all stakeholders is imperative to implementation of any new food defense preparedness and response program. At SCPH, typically four units are involved with response procedures for foodborne illness-related complaints and outbreaks: the Food Safety Unit, Environmental Health Support Staff, Communicable Disease Unit, and Emergency Preparedness. Building a level of rapport between all units makes completing tasks easier and acts as an incentive for participation from all parties. When all stakeholders of a program agree that improving the program will not only benefit its intended audience (the general public of Summit County), but also improve the efficiency of their own work, a newfound importance is placed on the program improvement. When all parties provide input into desired process outcomes, specific objectives can be created that consequently create staff buy-in.

Creating the Manual

The beginning stages of program improvement began with a self-assessment of the program standard requirements that were already being met, as well as requirements that were not complete. After the self-assessment and a review of the Standard 5 requirements, a detailed foodborne illness and outbreak investigation manual was created.
The manual contains the fundamental principles of a foodborne illness outbreak investigation, including the definition of an outbreak, how to detect an outbreak, reasons for investigating an outbreak, and roles and responsibilities of all who are or could potentially be involved with the outbreak response and investigation.

The manual also contains a succinct written procedure for the investigation. The procedure clearly defines the roles and responsibilities of all stakeholders involved in an outbreak response. Defined roles and responsibilities prevent duplication of efforts throughout the response process. These roles and responsibilities allow stakeholders to establish a mutual understanding of what is required from all parties, and thereby reduce confusion.

The manual addresses intentional contamination of food as a biological weapon. Epidemiologic, law enforcement, and environmental clues indicating intentional contamination are described in detail for investigators. The initial investigation of an intentional contamination case is the same as a standard foodborne illness investigation, as most intentional contamination cases are not identified during the initial stages of the investigation. Protection of food from criminal acts is the best defense against intentional contamination; however, if intentional contamination does occur, detection early in the investigation will become crucial in order to coordinate with law enforcement for the now criminal investigation.

Lastly, the manual contains an appendix of valuable forms used throughout the response. These forms simplify collecting and distributing pertinent information during the foodborne illness outbreak while also sustaining a physical trail of actions taken during the outbreak response.

Assembly of Materials and Verification Audit

Following the foodborne illness and outbreak investigation manual makes it easier to assemble materials for completing the verification audit for Standard 5: Foodborne Illness and Food Defense Preparedness and Response. The FDA outlines seven main criteria for the verification audit: investigation procedures, reporting procedures, lab support and documentation, trace-back procedures, recalls, media management, and data review and analysis.

The foodborne illness and outbreak investigation manual meets requirements for the first three criteria: investigation procedures, reporting procedures, and lab support and documentation. Other documentation must be provided to illustrate conformance with the remaining criteria for Standard 5. The Ohio Department of Agriculture provides all materials necessary for conformance with trace-back procedures, because it is primarily responsible for all trace-back procedures within the state of Ohio. For the recall notification criteria, SCPH can send out mass emails to food facilities through the use of Healthspace, an online database of all Food Service Operations and Retail Food Establishments. SCPH’s Public Information Officer (PIO) is primarily responsible for media management during a foodborne illness outbreak. It is the explicit duty of the PIO to answer all questions from the media during an outbreak, as well as address any questions or concerns that may arise from the general public. Data review and analysis is the final step in an
outbreak response as well as the last criteria for Standard 5. After a foodborne illness outbreak has occurred, data collected throughout the entire outbreak response should be aggregated and reviewed for common trends, distinct outliers, and insights into other prevention techniques that had not been previously applied.

Results

The foodborne illness and food defense preparedness and response program went into effect in September 2017. Since the new program began, the following have been created: two updated, easily fillable forms; seven new response standard operating guidelines; and a comprehensive foodborne illness and outbreak investigation manual. To test the effectiveness of the new program, data were collected on two forms that were updated during the program process: the foodborne illness investigation checklist and the foodborne illness complaint intake. Data were collected from these forms from May through October in 2016 (data prior to program implementation) and May through October in 2017 (data collected after implementation). An assessment of the forms was made by looking at the completion rates of required fields in the forms. An increase of necessary data collected was found on the foodborne illness complaint intake form, from 83.6% completeness in 2016 to 91.2% completeness in 2017 (one-way ANOVA (F(1,34) = 90.316, p <0.001)). Due to the nature of the fields on the foodborne illness investigation checklist, a comparison of completion data from 2016 to 2017 could not be calculated. The newly implemented foodborne illness investigation checklist form had a 98.6% completion rate, indicating that with the new data collection tools, the majority of fields were being filled.

Conclusion

The foodborne illness and food defense preparedness and response program has allowed for improvement of agency processes as a whole. Clarifying roles and responsibilities and identifying pertinent data to be obtained has allowed for a smooth response to foodborne illness in Summit County. The completion of the outbreak investigation manual has met the majority of the requirements for Standard 5.

References

Legislative Updates

- 2017 Ohio Executive Budget Bill

- 2017 Ohio House- Proposed Budget Changes
  http://www.ohioeha.org/aws/OEHA/asset_manager/get_file/154757?ver=1468

- House Bill 65- Regulate reviews of sanitarians who inspect restaurants

- House Bill 65 Testimony- Chad Brown OEHA President
  http://www.ohioeha.org/aws/OEHA/asset_manager/get_file/150459?ver=1205
For the past 18 years, the Delaware General Health District has had the privilege to employ the “original” Sanitarian, Mr. Chuck Gossett RS #001.

Mr. Gossett held public health roles with not only local public health, but with industry, the State of Ohio, and the Armed Forces during his career. In addition, Mr. Gossett served on the Board appointed by the Governor creating the profession of Registered Sanitarian.

Mr. Gossett was a wealth of knowledge and his contributions to Delaware, public health, and the Sanitarian profession will be missed.
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## Educational Opportunities

**OEHA AEC**  
April 17-18, 2018  
DoubleTree - 175 Hutchinson Ave.  
Columbus, Ohio 43235  

Health Impact Assessment 101  
June 24, 2018  
Anaheim, California  
Register at http://neha.org/node/3971  

## Open Positions

(Posted to the OEHA website with an opening of at least 3/23/18)

- **RS/SIT (2 positions)**  
  Cuyahoga County Board of Health  
- **RS/SIT (2 positions)**  
  Delaware General Health District  
- **Environmental Health Technician**  
  Delaware General Health District  
- **Epidemiologist**  
  Fulton County Health Department  
- **RS/SIT - Food Safety Program**  

Franklin County Public Health  
Board Member Opening  
Environmental Health Technician Spring/Summer  
Warren County Health District  

RS/SIT  
Tuscarawas County Health Department  
Accounts Payable Specialist  
Cuyahoga County Board of Health  

RS/SIT  
Erie County Health Department  
Environmental Health Intern (unpaid)  
Union County Health Department  

Environmental Health Intern for Mosquito Control Program  
Kent City Health Department  
Part Time Student/Temporary Help—Mosquito and Water Quality Program  
Summit County Public Health  

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Have a grant, educational opportunity, move, promotion, or other announcement you would like to share? Please email a member of the publications committee.
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**Membership**
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**Publications**
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**Training Scholarships**
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**Concentrated Animal Feed Facility**
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