# Beyond Enforcement Changing Food Retailer Habits and Thinking

**Environmental Public Health Leadership Institute Fellow** 



Joseph M. Malinowski, BS, REHS
Consumer Protection Program Coordinator
Environmental Health Division

### Focusing Questions

- Why aren't we getting positive long-term behavior changes in retail food facilities?
- Why does the Boulder County food program remain focused on inspection numbers rather then behavior outcomes?
- Why are we focusing on inspection numbers with inadequate/limited resources?
- Why aren't we using an outcome-based approach to food safety?
- How can we measure positive behavior change in retail food facilities?

### The Quick Fix

Short Term Change In Public Health Risk

Inspections
Dictate
Immediate
Correction of
FBI Risk Factors

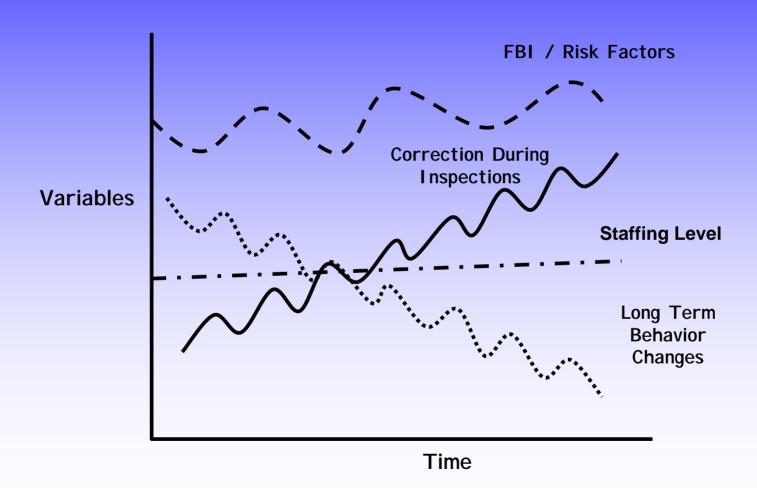
Have to inspect every restaurant two times per year. I don't have all day. Management is looking at my numbers.

I'll tell them how to do it right! They'll know how to do it. В

Food Borne
Illness Risk
Factors at Retail
Food Facilities

Why does the same violation keep repeating? I showed them what to do last time.

### **Behavior Over Time**



## Contributing Factors

- Lack of oversight by managers of food handlers during food preparation.
- Lack of trained food handlers at retail food operations.
- Lack of environmental health staff to conduct retail food assessments.
- Lack of an evaluation to gauge public health food program success.
- Lack of partnerships and collaboration with the retail food industry and consumers.

Shifting the Burden

Short Term Change In Public Health Risk.

I'll tell them how to do it right! They'll know how to do it.

Behavior Change & Long Term Change In Public Health Risk

Inspections
Dictate
Immediate
Correction of
FBI Risk
Factors

В

Food Borne
Illness Risk
Factors at Retail
Food Facilities

В

Outcome Based Inspections

Have to inspect every restaurant two times per year. I don't have all day. Management is looking at my numbers.

Why does the same violation keep repeating? I showed them what to do last time.

Resources: Limited staff Limited time

R

What about all these inspections that don't get done?

### Program Objectives

### **Shift Program Focus to FBI Risk Factors**

- Identify Risk Factors
- Conduct Risk Ranking
- Conduct Critical Item Inspections
- Implemented FDA Guidelines

### Implement Strategies Targeted at Lowering the Incidence of These Risk Factors

- WEB Based Training
- Active Managerial Control Assessments
- Interventions/Consultations
- Initiate a Food Safety Advisory Committee

### **Evaluate long-term trends in Risk Factors and FBI**

- Develop Reports
- Reassess Level of Active Managerial Control



#### **Public Health**

\_\_\_\_%

Environmental Health 3450 Broadway Boulder, CO 80304 (303) 441-1564

#### **Active Managerial Control Evaluation**

Active Managerial Control is a term used to describe a Retail Food Facility's responsibility for developing and implementing a food safety management system to reduce the occurrence of foodborne illness risk factors.

Existii	ng Management Policies:	Documents attached/obse	rved:
ΥN	Certified food safety manager (10)	Y	N (-5)
ΥN	All staff receive formal food safety training (10)	Y	N (-5)
Y N	Written employee illness policy (5) Y N Paid sick leave(5)	Y	N (-5)
Y N	Thermometers available (circle only one): (5)Thermocouple Y N Thin probe available (5)	(5)Digital (0)Dial (0)None	
Y N	Document food temperatures every 2 hours (5) Y N Document thermometer calibration (5)	Υ	N (-5)
ΥN	Conduct daily food safety inspections (10)	Y	N (-5)
Y N	Private/corporate inspections (10)	Y	N (-5)
ΥN	Document handwashing/glove use (10)	Y	N (-5)
ΥN	Document sanitizer concentrations and usage (10)	Y	N (-5)
Y N	Contracts for preventative maintenance (circle all that apply, Pest control Dishmachine maintenance Refrigeration mai		N (-5)
Resou	rces Provided to Facility:		
		ple illness policy	
		inspection form	
		ning resources hand contact information	
		ection rating information sheet	
		l penalties handout	
Consultation Observations/Comments: (if observations do not support answers above, subtract 5 points per question)			
			_
Environmental Health Specialist Facility Name/Location			
Date	Minutes Received by		_

### National Goals Supported

#### 10 Essential Environmental Health Services

- Assurance
- Assessment
- Policy Development

#### Healthy People 2010 – Food Safety Objective

FBI Risk Factors

### National Strategy to Revitalize Environmental Public Health Services

- Communication & Marketing
- Developed /Competent Workforce

# Environmental Health Competency Project: Recommendations for Core Competencies for Local Environmental Health Practitioners

- Strengthen Capacity
- Assessment/Evaluation
- Communication

# Challenging Questions

- Why aren't we getting positive long-term behavior changes in retail food facilities?
- Why does the Boulder County food program remain focused on inspection numbers rather then behavior outcomes?
- Why are we focusing on inspection numbers with inadequate/limited resources?
- Why aren't we using an outcome-based approach to food safety?
- How can we measure positive behavior change in retail food facilities?

### Acknowledgements

### **Leadership Process and Project Team**

Mentor:

Dwayne Roadcap, BS, REHS

Program Manager, Virginia Department of Health

Sherry Immediato, MBA

Managing Director, Society for Organizational Learning

Jeffrey M. Brasel, REHS Senior Registered Environmental Health Specialist Washoe County District Health Department

Ron Marsden, BS, LEHS

Program Manager, Utah Department of Health