

NATIONAL ADVISORY COMMITTEE ON MEAT AND POULTRY
INSPECTION

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SPRING MEETING

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SUB-COMMITTEE SESSION

+ + + + +

STANDING SUB-COMMITTEE NUMBER 3

+ + + + +

*Issue: How can risk-based sampling most effectively
be conducted in small and very small plants?*

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Thursday, June 16, 2005

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The Subcommittee convened in Conference Room
1061, South Building, United States Department of
Agriculture, 1200 Independence Avenue, S.W.,
Washington, D.C., at 3:00 p.m.

SUB-COMMITTEE MEMBERS PRESENT:

- GLADYS BAYSE
- DARIN DETWILER
- MIKE GOVRO
- JILL HOLLINGSWORTH
- CHARLES LINK

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1 P-R-O-C-E-E-D-I-N-G-S

2 (2:48 p.m.)

3 MR. DETWILER: Somehow I'm your
4 factilitator for the group and that's very cool.
5 Let's do a very quick round the table for the purposes
6 of recording and if someone didn't get who is who.
7 First off, I'm Darin Detwiler and I'm from the Seattle
8 Area. And I am one of the members of the National
9 Advisory Committee on Meat and Poultry Inspection and
10 we have -- let's start over here to my left, Dr. Dan
11 Engeljohn.

12 DR. ENGELJOHN: Right.

13 MR. DETWILER: And you're Deputy Assistant
14 Administrator with the --

15 DR. ENGELJOHN: FSIS, Office of Policy and
16 I'm here as a resource to the committee, to answer
17 your questions.

18 MS. HICKS QUESENBERRY: I'm Heather Hicks
19 Quesenberry. I'm the Listeria Team Leader for Risk
20 Aassessment and I'm here as a resource.

21 MS. KAUSE: I'm Janelle Kause. I'm the
22 Director of the Risk Assessment Division of the Office

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1 of Public Health Science in the Food Safety Inspection
2 Service again as a resource.

3 MR. LINK: Charles Link, I'm with Cargill
4 Value Added Meats.

5 MS. HOLLINGSWORTH: Jill Hollingsworth.
6 I'm with the Food Marketing Institute. They represent
7 the grocery stores.

8 MS. BAYSE: Gladys Bayse, Department of
9 Chemistry from Spellman College in Atlanta.

10 MR. GOVRO: I'm Mike Govro with the Oregon
11 Department of Agriculture, Food Safety Division.

12 MR. DETWILER: And we have some people,
13 some familiar and some new faces in the back here,
14 starting with Tony?

15 MR. CORBO: Tony Corbo from the Consumer
16 Group Public Citizen.

17 DR. WENTHER: Dr. Jay Wenter with the
18 American Association of Meat Processors.

19 MS. JOHNSON: Lavonne Johnson, FSIS.

20 MR. SHIRE: Bernie Shire of Shire and
21 Associates. I'm a consumer group.

22 MR. DETWILER: All right. We are working

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1 on -- we're at Tab 5, the Risk Base Sampling Issue
2 Paper. And specifically, on page 2 we have four major
3 questions, but question 4 does kind of break it down
4 into four major subsections. Question 1, again,
5 relating to risk-based sampling and really dealing
6 with small and very small plants is, are there any
7 risk factors FSIS presently uses in designing risk-
8 based sampling, more important when addressing the
9 concerns of small and very small plants.

10 Number 2, are there additional factors
11 unique to small and very small plants that FSIS should
12 consider in the design of risk-based sampling. Number
13 3, how can FSIS conduct risk based sampling more
14 effectively in small and very small plants. And 4,
15 what are examples of the unique business practices of
16 small and very small plants that should be considered
17 when designing and implementing risk based sampling
18 for and then the A, B, C and D, including E. Coli
19 01757 in raw beef manufacturing, trimmings and ground
20 beef, Salmonella in raw livestock and poultry product,
21 Listeria monocytogenes in post-lethality exposed to
22 ready-to-eat product and finally, Salmonella in

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1 pasteurized egg products.

2 I wanted to really quickly in case --
3 hopefully, I'm not the only one that wanted to be
4 clear on this, we're talking about small and very
5 small plants. A large plant is defined as equal to
6 or greater than 500 employees. Small is between 499
7 and 10 or greater than 2.5 million in sales and very
8 small is less than 10 employees or less than \$2.5 in
9 sales. I kind of thought that was significant in
10 terms of the way we're spelling this out. At this
11 point, what I kind of thought would be a good idea to
12 do since we have Dr. Engeljohn here, is not
13 necessarily to have you go over everything you went
14 over already right after lunch, but to kind of give us
15 Reader's Digest primer again for what we're doing here
16 today and kind of the purpose and leading into what
17 exactly you want.

18 DR. ENGELJOHN: Okay, I think there are
19 two parts to what I'd like to re-emphasize from the
20 discussion just a bit earlier from the larger session.

21 One is that the Agency has traditionally just had a
22 random sampling program in terms of how we selected

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1 plants that we would conduct our verification testing
2 and we looked to make it more targeted in risk-based
3 with the belief that there is a desire by
4 establishments to have FSIS test less frequently in
5 their establishment where possible.

6 And so in order -- if that is, in fact,
7 one of the designs that the risk-based program should
8 have it would be one for which the agency would have
9 confidence that the establishments producing product
10 with their controls in place would, in fact, have
11 effective controls in place. So one is to help
12 identify how we can begin more targeting testing as
13 opposed to random testing. We started the process
14 with Listeria and we've identified the factors that we
15 used for the Listeria one right now, which is, in
16 part, information based on the type of product
17 produced and the degree of control that the
18 establishment has. So those are the primary features
19 there.

20 And we want to expand the programs for
21 risk-based verification to include E. Coli 0157-H7 as
22 well as Salmonella in both ready to eat products and

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1 in raw products. So it's all the verification
2 programs but we're focusing first on Listeria, then
3 moving towards E. Coli. So those would be some of the
4 primary points that I would have you consider in terms
5 of how we design our programs. We are, in fact, going
6 to test. We are -- we allot a certain number of
7 samples each year, so the question then becomes how
8 best to do that, what's the most efficient and
9 effective way to utilize those resources and have an
10 impact on public health.

11 MR. DETWILER: Thank you. When we look at
12 the first question in looking at risk factors that are
13 more important than others when addressing the
14 concerns of small and very small plants, that's one
15 category of information we need to come up with. Also
16 factors unique to the small and very small plants that
17 should be considered when designing this risk-based
18 sampling, we need to come up with that group of
19 information and then when we start being able to
20 synthesize those two pieces there, looking at how can
21 we more effectively conduct sampling in these two
22 plants, that's one more question we are looking at

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1 answering there, too.

2 Why don't we look at the first thing in
3 terms -- the first issue of the risk factors and once
4 we get some risk factors that emphasizes currently
5 using maybe we can try to start identifying which of
6 them are more important than others when it comes to
7 these smaller plants. And this is where I don't
8 really have any expertise.

9 MS. HOLLINGSWORTH: I have sort of a
10 question, I guess, and a comment here. Dan, you had
11 mentioned -- and if we just look at Listeria, which,
12 as I understand it, is probably the current example of
13 where you've done the most to look at using risk
14 factors for sampling and you mentioned two things.
15 One is the type of product and then the second one was
16 what -- which of the alternatives they are using.

17 And I'm trying to remember, I don't know
18 that I can do this off the top of my head, the USDA-
19 FDA-CDC risk ranking risk assessment paper, didn't it
20 identify five risk factors that should be considered?

21 It was ability to support growth, frequency of
22 consumption, do you remember? I can't remember off

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1 the top of my head but there were five risk factors in
2 that risk assessment. Is FSIS using those same five
3 and then your others added to that or -- I'm not sure
4 which risk factors you're using other than the two
5 that you've mentioned.

6 MR. DETWILER: Go ahead, Heather.

7 MS. HICKS QUESENBERRY: Jill, I think,
8 first of all let me just say I'm impressed because
9 that's a big document, you've obviously read it but --

10 MS. HOLLINGSWORTH: Yes, me and two other
11 people, I understand.

12 MS. HICKS QUESENBERRY: -- those risk
13 factors were the risk factors that that assessment
14 team used to decide whether a food was at high risk,
15 medium risk or low risk --

16 MS. HOLLINGSWORTH: Right.

17 MS. HICKS QUESENBERRY: -- in contributing
18 to a case of listeriosis.

19 MS. HOLLINGSWORTH: Right.

20 MS. HICKS QUESENBERRY: What we're doing
21 at FSIS, is looking at the specific product that's
22 produced under our regulation and looking at those

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1 products how likely is that product to contribute to a
2 case of listeriosis.

3 MS. HOLLINGSWORTH: Okay.

4 MS. HICKS QUESENBERRY: So there are two
5 different -- two different assessments.

6 MS. HOLLINGSWORTH: Okay.

7 MS. HICKS QUESENBERRY: So some of the
8 risk factors that the FDA/FSIS in risk ranking used
9 are applicable here and some of them aren't.

10 MS. HOLLINGSWORTH: Okay.

11 MS. HICKS QUESENBERRY: The ones that we
12 use were established in the 2003 FSIS Risk Assessment
13 for Listeria in deli meat, okay?

14 MS. HOLLINGSWORTH: Okay.

15 MS. HICKS QUESENBERRY: And we did that
16 because the risk ranking that we do with FDA
17 identified deli meat as a high risk food. So then we
18 wanted to understand why, what are the risk factors
19 that make deli meat a high risk food, so that's where
20 we came up with the idea of is this product post-
21 lethality exposed, is it sliced, is it repackaged, is
22 it peeled after the final cooking step? Yes or no?

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1 If yes, is this product formulated with an ingredient
2 that's going to retard the growth of Listeria should
3 it be present during the shelf life? Yes or no?

4 Is this product treated -- after the
5 slicing or peeling or chopping or repackaging, is it
6 then treated again with something that's going to kill
7 Listeria that would be present, yes or no? Does this
8 plant have specialized sanitation? Does it have a
9 program that is looking for Listeria and annihilating
10 it if it's in that processing environment? Yes or no?

11 Those are the primary risk factors, that kind across
12 the board allocation of resources.

13 Then, within those categories, what's this
14 plant's compliance history, what's the volume of
15 production? Is this establishment adopting voluntary
16 interventions above and beyond what FSIS considers to
17 be good manufacturing processes? Those are the
18 secondary ones. Does that answer your question, Jill?

19 MR. GOVRO: Can you expand a little bit --
20 would you like is to identify ourselves as we speak?
21 Mike Govro. You talked about the compliance history
22 and as a regulator who's worked in the field a long

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1 time, that seems to be an area that's very difficult
2 to quantify and I'm wondering if you could tell us how
3 you do that and how you factor that in. I know the --
4 one of the biggest challenges for us in achieving
5 consistency is achieving consistency from inspector to
6 inspector, and getting apples and oranges or apples
7 and apples to compare.

8 DR. ENGELJOHN: Well, from the perspective
9 of compliance history, I think this includes
10 information about sanitation findings, the NR's that
11 are written for plans, whether or not there are FSIS
12 positives found in the plant, that's the kind of
13 information that is collected and so we realize that
14 there are inefficiencies and some degree of non-
15 uniformity by inspectors in terms of some of this
16 information but collectively over time we believe this
17 information serves as a useful indicator. So it is
18 the results of our PBIS testing is part of what goes
19 into the overall looking at an establishment as to
20 whether or not they've had a history of non-compliance
21 or not.

22 And I'm not sure how your algorithm fits

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1 that in, but it's a factor in terms of the design of
2 how the plant is selected then.

3 MR. GOVRO: Do you assign a number to it
4 or --

5 MS. HICKS QUESENBERRY: Actually, there's
6 two parts to my answer. The first one is that we're
7 just beginning to do this. So what we're doing right
8 now is looking at while the Listeria rules has been in
9 effect, has this establishment complied with that
10 rule. Yes or no, and that's judged by the presence or
11 absence of Listeria in their final product in
12 regulatory sampling. Eventually, Dr. Engeljohn is
13 exactly right, what we'll do is we'll be able to
14 incorporate a long history of compliance, all these --
15 basically ways of evaluating their HACCP plan. Our
16 inspectors are charged with assessing that and then
17 documenting non-compliance. So we have that in a big
18 data base.

19 And also, as time goes by, we'll have
20 accumulated more and more laboratory samples under
21 this program. So there's a -- does that answer your
22 question?

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1 MR. GOVRO: Yeah, yeah, it does. It leads
2 me t another thought though, if I can keep going. I
3 might go over it again. One of the arguments that we
4 get from industry as we talk about assessing fees
5 which is directly related to where we expend our
6 resources as a food safety agency, has to do with the
7 firm's ability to provide technical expertise on
8 sites. That is their level of technical knowledge and
9 how that might effect how they go about producing the
10 product. And obviously, large companies that have
11 someone like Charles on board and then people at each
12 plant who are involved in technical services, quality
13 control, food safety issues, people with degrees and
14 have worked in the field a long time, should be
15 considered to have an advantage over those who don't.

16 And I would think that maybe that would be a little
17 bit difficult, more difficult than in the very small
18 plants because you're not likely to see that level of
19 expertise, but again, maybe that would be a factor
20 that you would want to take into consideration, so
21 technical competency.

22 DR. ENGELJOHN: And how just -- this is

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1 Engeljohn with FSIS. Now, how do you assess that
2 information?

3 MR. GOVRO: Well, we don't. At t his
4 time, it was an argument that was brought forward by
5 industry. We're currently in a big fight in Oregon
6 over who should pay how much for their license fee and
7 one of the points that was brought forward by the
8 larger processors is that we have technically
9 competent staffs and therefore, you should inspect us
10 less and, therefore, charge us less. We kind of
11 rejected that argument because we're down to such
12 minimum inspection that we don't really feel like we
13 can go any lower and the bigger plants take more time
14 just because of their size.

15 But I understand their point, that they
16 may be better able to address the technical aspects of
17 food safety than a smaller plant.

18 MR. DETWILER: In the back, I'm sorry.

19 DR. WENTHER: This is Jay Wenter, just to
20 address that, what are you going to measure, anything
21 from have they actually taken a HACCP course or have
22 they had the consultant write their HACCP course? Is

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1 there someone still employed there at that business
2 that has a HACCP certificate saying they went to the
3 course? Have they been updated with the Listeria
4 guidelines. Have they attended E. Coli workshops,
5 Listeria workshops, that type of thing.

6 We have members, like you said, you
7 mentioned all those people. QC who contract up to one
8 or two people in the plant, I can see where they're
9 coming from. We also have members that have an
10 education in food science and technology that when
11 they ask for a process authority and you ask what
12 makes up a process authority, they come back and they
13 say an education in food science or meat science.
14 Does that automatically make them a process authority.

15 There's really a hard measurement on that deal but I
16 think with some of the classes that are out there and
17 the availability of resources you've put together for
18 the outreach program, that may be one point.

19 DR. ENGELJOHN: Okay.

20 MS. HOLLINGSWORTH: I'm looking over these
21 questions and I'm just trying to organize my thoughts
22 and one of the things that -- I guess what I'm looking

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1 here is, I'm coming from the bottom question up and
2 that is if FSIS has a limited amount of resources for
3 sampling, just like a pot, and this pot can be used
4 for sampling and how are we going to do that, I guess
5 one of the first things that, as a public health
6 agency, you would need to look at is what is the
7 greatest public health risk that we can actually
8 address.

9 And I'll use for example, and excuse me
10 for doing this because this is a very sort of the CDC
11 epidemiology approach which becomes very insensitive
12 toward the individual but I'm just thinking here based
13 on the information that we've gotten recently from the
14 FoodNet site, where if you look at Listeria, they have
15 what 2.8 cases per million and if we assume 25 percent
16 of those result in a death, you're looking at less
17 than one death per million, less than three episodes
18 per million. Now, if you put that up against the
19 numbers for Salmonella and E. Coli, and I can't do
20 that math in my head, I picked Listeria because I
21 could do it in my head, if you look at Salmonella,
22 maybe one of the things you're going to have to look

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1 at, although the rates of illnesses are clearly
2 higher, I'm not sure about the percent of deaths or
3 subsequent or sequelae illnesses, but it would seem to
4 me the first thing you would need to do is look at
5 those illnesses that you are trying to reduce or
6 prevent from a public health standpoint and first
7 quantify or risk-rank them, then once you know which
8 pathogens you want to focus on, or what human
9 illnesses really, then look at what food products can
10 be most -- and I know we don't have a lot of
11 attribution data, but what food products are most
12 likely to cause that illness, and you risk-rank that
13 and then you get down to what products are most likely
14 to be produced and what facilities where that occurs.

15 Is that -- am I making sense there? I
16 mean, it seems to me like we're starting with the
17 plant, the small plant, when, in fact, that may not be
18 the first thing you need to look at. You need to look
19 start with the pathogen first and then work your way
20 down to where can you get the most public health
21 benefit from your sampling protocol.

22 MR. DETWILER: Did you want to say

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1 something?

2 MS. KAUSE: Yeah, I'd like to say that,
3 you know, actually, I do think it starts at a broader
4 perspective. When they set the healthy people
5 2010/2005 goals, that's where it starts. So when we
6 say it's risk-based and we're using risk assessments,
7 it is to provide -- to have interventions in place
8 that lead to a reduction to achieve those goals.

9 MS. HOLLINGSWORTH: Right.

10 MS. KAUSE: From a risk assessment point
11 of view in thinking about should you go after
12 Salmonella versus Listeria? Well, back in the early
13 '90s should we have -- you know, chased after 0157
14 versus other things? The risk that is chosen to be --
15 that we go after is publicly driven.

16 MS. HOLLINGSWORTH: Uh-huh.

17 MS. KAUSE: As a public agency, you know
18 do --

19 MS. HOLLINGSWORTH: Is the pathogen of the
20 moment, yeah.

21 MS. KAUSE: Yeah, I mean, it's also
22 severity. I mean, you're comparing numbers but some -

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1 - you know, X numbers of gastrointestinal illness for
2 risk assessment, even if you have 100 of those, is
3 that more important than one death of a child.

4 MS. HOLLINGSWORTH: Right.

5 MS. KAUSE: And these are value-laden, so it's not that straight. So basically CDC sets the
6 goals and as a regulatory agency, we're here to
7 achieve those.

8 MS. HOLLINGSWORTH: Well, and I'm right
9 with you there, and that was my point, I guess, is
10 that if you look at the CDC numbers, if I can recall
11 from memory, the industry or the government, whoever
12 is taking credit for it, but the goal for E. Coli has
13 already been exceeded or we've gone better than the
14 goal. Listeria, you're what .3 or .2 or something
15 cases per million off the goal. So I guess that's --
16 what I'm saying is that what's going to be used as a
17 starting place for what you're trying to achieve if
18 that is Healthy People 2010 then I think first you
19 need to say, okay, here's areas where we've done well,
20 and obviously what we're doing is working, so we don't
21 want to back off on that, but here's areas where we
22

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1 have to do more and so all of a sudden the risk that
2 they present bumps up.

3 In other words, Salmonella, actually if
4 you look at the CDC numbers, should be considered a
5 higher risk issue for the Agency than E. Coli and
6 Listeria. Now, I don't know as a personal individual
7 I'm comfortable with that, but if you look at Healthy
8 People 2010, I think that would be your logical
9 conclusion, or am I missing that?

10 DR. ENGELJOHN: No, I would just say,
11 Jill, that's an excellent point and the Agency does,
12 at this time, use Healthy People -- I'm sorry, Healthy
13 People 2010 as its guide. And you're right, we do
14 want to insure first of all, that we're having a
15 system designed to address that. The small plant
16 issue is on the table simply because again, who we
17 regulate is a factor that there are more small plants
18 than there are large ones and so we made the decision
19 at this point and you certainly can give us feedback
20 that you think maybe instead of doing 10,000 Listerias
21 you should do 5,000 of them or substantially less
22 there and substantially more with -- that certainly is

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1 something that you can recommend to the agency to
2 consider.

3 We've put in place the programs that we
4 have now because those are the resources we have
5 determined that we're going to do based on previous
6 years. So the real issue becomes how do we divert
7 those with small plants having special consideration
8 in what we do just so we have that there. So that's
9 the purpose there and you're right, it's -- we are
10 concerned more about the pathogen than we are whether
11 or not you're a large or small plant. There are just
12 so many small plants that we have a special need to
13 insure we're not overwhelmingly just focusing on them.

14 I think that was the issue. We wanted to have a plan
15 in place to insure that we're addressing the issue.

16 MS. HOLLINGSWORTH: And I certainly --
17 unless there may be others here who feel a lot more
18 confident in their knowledge of risk assessing, mine
19 is not great, I would be -- speaking for myself, I
20 can't imagine we'd give you anything even close to a
21 recommended number. I guess what I'm looking at is
22 just sort of a process of how do you prioritize which

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1 things you're going to assess before you get to that,
2 so how many samples do we take? I mean, that's to me
3 way down the line, way beyond our expertise, but I
4 keep going back, too, to that real simple formula.
5 I've only taken a minimal number of risk classes and I
6 remember the first thing I ever learned is there is
7 two things you look at, and that is, what is the
8 chance of exposure and what is the outcome if you have
9 that exposure. And that's sort of, I guess, the
10 simplest version of risk there is.

11 And so maybe that gives us a starting
12 place, like if you're looking at small and very small
13 plants, what is the chance of exposure either to the
14 product or from the product to the customer and I
15 guess that would be a volume issue.

16 MS. KAUSE: And that's in the model.

17 MS. HOLLINGSWORTH: And then what is the
18 outcome if there is exposure and I guess that's the
19 concern about the public health outcome, do you give
20 Listeria more weight than say Salmonella given that
21 you have a higher rate of death?

22 MR. LINK: This is Charles Link. Just to

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1 comment; I think initially we've got to look at the
2 risk of exposure, I guess, not the severity because we
3 all kind of know maybe that if you get a 157, it's
4 going to be different than if you get a little
5 Salmonella, but just looking at this risk-rank or, I'm
6 sorry, the alternatives of Grade 2B, 2A1 and
7 sanitation as a start, it's easy to say well,
8 sanitation is most risky if you don't do other things
9 on top, but has the Agency looked at the sanitation
10 programs the companies have and what their finding
11 through their sanitation programs and you can have
12 one, but it may not be worth beans, you know.

13 One of the big differences, probably in
14 larger and smaller and very small plants is just how
15 much one actually tests. You know, I don't know what
16 the right number is, but if you test three surfaces
17 versus 25 surfaces, does it really make a difference?

18 Statistically, I don't know, but what are the
19 sanitation programs, what do they look like, what are
20 they looking for, what are they finding? And if we're
21 finding, you know, a lot of positive hits, but we're
22 treating it with some antimicrobials ORK, I'm not sure

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1 that's the right answer. I guess you've got to start
2 with a strong sanitation program and I guess that's
3 why it's on there.

4 If you do it right, to your point earlier,
5 you can pretty well sleep at night. Sleep better if
6 you do a few more things, I guess, but so I don't know
7 if the Agency has looked at and I couldn't sit here
8 and say, we'll one percent positive hits is the right
9 number of .2 or 5, but it may be a way to kind of
10 identify where you think the risk might be. If a
11 plant is higher than the other, maybe that's where you
12 ought to go look. And I think most people are
13 sharing that data now with --

14 DR. ENGELJOHN: Yeah, and I think that's
15 a good point in terms of consideration the Agency can
16 go back and do is, analyze the data that we have thus
17 far in the plants. We have -- as I tried to mention
18 before, we have what the plants have given us on the
19 form and then we have what they have in their HACCP
20 plan which is the rationale for why they're doing what
21 they're doing and I think the perspective that the
22 Agency has is that often times there isn't a rationale

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1 for why they chose the numbers that they did, the
2 frequency of testing, for example, other than it's
3 what the Agency had in its compliance guideline.

4 And I will say that we are intending to
5 look at those plants that have had positives in the
6 FSIS program what was it that they had in terms of the
7 design of their program so that we can at least come
8 up with a list of features that may be similar in
9 plants in terms of the design of the programs that may
10 give an indication that these are the things you might
11 want to tend to if you want to enhance the control you
12 have in place. There's always this issue about we
13 know that the testing in and of itself isn't the
14 answer. You know, the frequency of testing we
15 concluded is not indicative of how effective your
16 program is but it's how you've designed your program
17 to prevent contamination to begin with is part of that
18 issue.

19 And so we don't have an effective means to
20 actually quantitate that. We know what the plants say
21 they're doing in terms of the number of testing and
22 we're considering factoring that in to our decision

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1 making but we also know that that may not have a
2 science basis.

3 MR. LINK: You mean testing product or --

4 DR. ENGELJOHN: Or contact services.

5 MR. LINK: -- or contact services.

6 DR. ENGELJOHN: And the goal from the
7 Agency is, whatever we look at, I think we would want
8 to say we want to encourage the testing and we want to
9 encourage the finding of positive. The issue becomes
10 what did you do when you found the positive and
11 addressing the positive is the behavior we want to
12 reinforce as opposed to finding the positive and then
13 that being a target, that isn't what, I think we want
14 to do in terms of a program. We want to encourage
15 that.

16 MR. LINK: Yeah, you need to encourage
17 finding them because otherwise, I mean, you can design
18 your program not to run, you know, so you need to
19 encourage, okay, great, you found it, now what are you
20 doing is the next step.

21 MR. DETWILER: Go ahead.

22 DR. WENTHER: I was just addressing his

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1 question. You need to encourage them to find it and
2 we've had plants that have gone above and beyond just
3 to find out they get beat over the head when they find
4 a positive because then everything comes crashing down
5 on them. They were trying to be proactive and it
6 becomes an ethical issue whether you want to find it,
7 an ethical issue of okay, if I do find it, now what's
8 the Agency going to do? Are they going to help me
9 along with this or are they going to bash me over the
10 head because we found it?

11 MR. DETWILER: Dr. Bayse?

12 MS. BAYSE: Gladys Bayse. I'm not sure
13 that this is the right place to bring it up, but if I
14 understood Dr. Engeljohn's, what he mentioned earlier,
15 did I write this down correctly that with the small
16 and very small and by defining that by number of
17 employees, I know we all kind of said, yes, it should
18 be done really by volume rather than that, is it right
19 that you said 80 percent of the products from small
20 and very small plants come from 20 percent of the
21 establishments? Was that -- something like that?

22 DR. ENGELJOHN: Yeah, again, I think if it

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1 was for Listeria, it's probably a different number
2 than that. But just in terms of getting it into your
3 head as to there are substantially larger number of
4 small and very small plants as defined in the HACCP
5 category that produce a rather small amount of product
6 and it's a small amount of establishments that produce
7 a large amount and that's the concept.

8 MS. BAYSE: And if you spoke about how
9 that's factored in or if you've tried to do that with
10 what you've started with, if you mentioned that, I
11 missed that.

12 DR. ENGELJOHN: Well, the issue becomes
13 one of when we report back to the Small Business
14 Administration or to the Office of Management and
15 Budget or in our yearly congressional reports, we have
16 to -- we do have to turn in a report on how we've
17 addressed issues related to small business and small
18 business to us is defined by our regulation which is
19 the HACCP categories, but we've tried to provide
20 refinement to that so that you may, in fact, be a
21 small plant, but you're producing an extremely large
22 amount of product. Well, so our goal is to be able to

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1 provide clarity, "Here's what we've done and how we're
2 addressing small and very small plant issues?", by
3 regulation and by definition of the categories that
4 Darin mentioned, you know, the 500 or more employees
5 or fewer than 10 employees, those categories, but then
6 base our decisions preferably now on those factors
7 that would discern the exposure and volume is one way
8 that we're doing that. We're just not aware of other
9 features that may, in fact, be good things to use to
10 make those discernment.

11 It's -- we talk about small and very small
12 plants from perspective that by the HACCP categories,
13 they're defined by regulation and we have to report
14 out on our activities related to that. How we design
15 a risk-based program doesn't necessarily have to be
16 based on large, small, very small. And we'd like to
17 do that by factors that actually have more of an
18 impact on public health since those weren't designed
19 to actually do that. They were actually designed to
20 look at the issue of economic impact.

21 MR. GOVRO: Mike Govro. Getting back to
22 questions 1 and 2 which as I understand it, which of

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1 the factors that are currently in use are more
2 important in the small and very small plants and are
3 there any other factors that should be considered;
4 when I think of the four that you have listed here,
5 type of control measures, product type, compliance
6 history and volume of production, everything that I
7 can think of that you might want to consider could be
8 included in those and I would say that the compliance
9 history sort of encompasses a lot of things we've
10 talked about like how much does the plant test in-
11 house, what is their sanitation program, how well is
12 it monitored, how effective is it, that sort of thing.

13 So let me just throw this out there maybe as a
14 discussion point.

15 I would say, I can't think of anything for
16 small and very small plants that would be any
17 different. But I would assume from what you've stated
18 up here in the purpose part, that you believe that
19 there is a higher risk with the small and very small
20 plants when you talk about their unique
21 considerations, low volume of production, production
22 specialty items, just in time processing, dependence

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1 on external sources, limited use of new technology, et
2 cetera. So I guess maybe the one thing that I could
3 say that might help you in dealing with the small
4 plants, would be that the more detailed
5 characterization of the data you can provide, probably
6 the better information you're going to get. And it's
7 going to be more useful data. I mean, you can take a
8 sample and characterize it as sample number 1 take on,
9 you know, such and such date at such and such time,
10 but you know, the more you can characterize the source
11 of the ingredients that went into it, how large a
12 batch it was part of, you know, just everything
13 associated with the product, the more useful
14 information you're going to get.

15 MS. HICKS QUESENBERRY: Heather
16 Quesenberry. We do get source of the product,
17 ingredients and on the sample collection form, there's
18 a place for the inspector to make notes about any
19 specific conditions that are present at the time of
20 collection.

21 MR. GOVRO: Do you direct them to note
22 specific types of things, or is it just kind of up to

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1 them to --

2 MS. HICKS QUESENBERRY: There are, if I'm
3 not mistaken, 36 specific questions that we ask them
4 when they collect a sample.

5 MR. GOVRO: That's pretty detailed.

6 MS. HICKS QUESENBERRY: Things like, time
7 of day --

8 MR. GOVRO: Ambient temperature?

9 MS. HICKS QUESENBERRY: All those kinds of
10 things. And then we give them as much room as we can
11 spare to give us anything else that occurs to them
12 that's particular about that sample. So I agree with
13 you.

14 MR. LINK: Part of what I struggle with is
15 trying to look at Listeria and try to determine where
16 you should focus your efforts and I start asking
17 questions regardless of the plant size. I mean, I
18 guess I have a hard time segregating that out, but and
19 you've got to start with raw materials. You've got to
20 look at your ovens and what kind of ventilation
21 process does the plant have on their ovens, so that we
22 know what cooks, sanitation programs, the elevation

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1 of the inhibitors we're putting in that it really
2 works, post-pasteurization, that we're really
3 maintaining temperature and time and things said we
4 were going to do. And everybody is trying to do this.

5 I assume the very small plants may not be able to
6 afford to buy a post-pasteurizer, I understand that
7 and so they may choose a different route, may do batch
8 pasteurization in an oven and that's fine, but how do
9 they validate that, do they have the records, the data
10 to support what they're doing?

11 If they do and everything is in place and
12 maybe you go to the next guy that's not doing that, so
13 that's where you focus your efforts, but just to say,
14 ?Well, this guy does less volume, therefore, or more
15 volume I should go in there because there's more of a
16 chance?, well, yeah, there's more product but it
17 depends on how well their systems are working, really,
18 because every day is every day and you just do
19 whatever. I don't know. I just have a hard time
20 trying to decide that big plant, small plant, very
21 small plant. If whoever is doing it has got a system
22 and is validated and it's working for them, you've got

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1 to find those that aren't.

2 MS. HICKS QUESENBERRY: I think you raise
3 a good point and the only time that we do go to the
4 bigger guy first is when all those other things are
5 the same, when the processes are the same. And --

6 MR. LINK: And the difference is volume.

7 MS. HICKS QUESENBERRY: That's right. And
8 as far as how effective is this system, well, first we
9 have an inspector there. And you know, we trust that
10 our inspectors are evaluating the systems, have
11 evaluated their HACCP plans, have evaluated that their
12 oven temps are reaching the proper kiln and secondly,
13 I'm excited about next year we're planning to do
14 checklist for our inspectors so that they can actually
15 -- we have self-reporting information from all the
16 establishments that say we're doing this. This
17 checklist will allow us to verify that that is
18 actually happening and give us greater confidence in
19 the effectiveness of those systems.

20 MS. HOLLINGSWORTH: I guess one of the
21 things that, it seems to me if what the Agency is
22 trying to do, though, is to determine sort of, if you

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1 will, from a headquarters level, here's this model and
2 what can we plug into it that we have -- information
3 we have access to when we set up our sampling plan?
4 Although it would be nice if you could have all this
5 individual specific information about, you know, how
6 well do they clean everyday, I don't know how you're
7 going to get that information to put it into a model
8 to come up with a big nationwide sampling plan. So I
9 guess what I'm wondering is what information does the
10 Agency have readily available that it can plug into a
11 model because you can come up with great things to
12 assess, but if you can't get the data, what's the
13 point?

14 And I guess I'm sitting here thinking
15 about what kinds of things can you actually get your
16 hands on to put into a model and I guess it would be
17 things like the size of establishment, based on your
18 HACCP definition, maybe we could, I don't know, list
19 those or something or make a whole big list here of
20 what you have available, size of plant, volume of
21 product, I'm sure the Agency still collects volume of
22 product, types of product, at least in some kind of

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1 categories like ready to eat versus raw ground beef
2 type of categories and then I don't know what's on the
3 PBIS, I'm not close enough FSIS inspection reports any
4 more to know all this stuff, but I would assume you
5 have some kind of access to data on how many NR's they
6 have or deficiencies or who -- what kinds of problems
7 they've had with sanitation. If that information is
8 readily available, then I think it becomes a useful
9 tool to plug into a model. And maybe that's -- it
10 would seem to me we would almost have to know what
11 information you have or can get your hands on before
12 we can say, "Okay, now, given this list of information
13 you have, that you can use to model? -- and the same
14 thing about do they use post-lethality or what are
15 they doing, then you can look at which of the list is
16 perhaps -- should be or should not be weighted more or
17 less for a small plant.

18 But I think you -- or we would even have
19 to know what information do you have.

20 DR. ENGELJOHN: Right, and I think, you
21 know, that's a good point, Jill, and I would just say,
22 you know, in all fairness, I don't think we're asking

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1 for the specifics though, because I know you don't
2 necessarily have it, although if you had it, that
3 would be really good.

4 MS. HOLLINGSWORTH: If I had it, I'd be
5 selling it.

6 DR. ENGELJOHN: But I did try to point out
7 earlier, you know, the Agency at one time did have
8 access to more information we did collect. Back in
9 the '80s, we collected a lot of really specific
10 information about what's produced and how much. We
11 don't actually have those approvals any longer, so we
12 don't -- we know what's in our PBIS system in terms of
13 the plant profile, what products, what HACCP category
14 and things like that but actual volume of production
15 we don't have.

16 And on our sample request forms, for 0157
17 for ground beef as an example, the inspector makes an
18 estimate. He provides a range of what has been
19 produced, I think in the last week or last month, I
20 can't remember but it's just a range of time, just to
21 give us an estimate. And so we don't actually have
22 the type of information we think that would be

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1 helpful. We thought and we tried to correct that in
2 the Listeria regulation by actually getting OMB
3 approval to collect specific information from the
4 plants.

5 So for Listeria, we do have the
6 information the plant provides on what they produce,
7 how much they produce and how effective they think
8 their program is, how frequently they test and how
9 effective they think their sanitation is. So we think
10 that that was an important first step at getting at
11 some of the issues that the plant has that could be
12 used in terms of how we weight which plants we would
13 go to.

14 So for Listeria, it will be an interesting
15 exercise for us to see how effective this information
16 is in terms of designing a program. And if it is
17 effective, then we'll continue to collect the
18 information and refine it as we need to. I think the
19 real issue that we have is, is there a sense that you
20 may have that this is actually the type of stuff that
21 you should be collecting and should pursue approvals
22 to get that same kind of information for the other

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1 program areas, like for poultry slaughter. I mean, we
2 don't collect information about what interventions are
3 used and volume and those kind of things there either.

4 But if we believe that that could, in fact, be
5 helpful to the Agency, it would be something that we
6 would intend to pursue provided that we actually use
7 the data.

8 I mean, the real issue is we can't collect
9 data just to collect it. We have to have a purpose
10 for it. We believe that that probably would be
11 helpful information to design risk based verification.

12 We started it with Listeria and we'd like to pursue
13 it elsewhere but I think one question we would have is
14 feedback from you as to whether or not you think
15 that's a prudent way to go, because we don't actually
16 have it. Again, it's the inspector making a decision
17 about what's in the plant's program but we don't
18 actually collect that information routinely.

19 DR. WENTHER: Jay Wenter. I would think
20 that you'd have to -- the data you're talking about
21 the PBIS system you're talking about, I would think
22 you'd have to look at that very carefully to you being

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1 from -- I'm sure you deal with a lot of NR's around
2 different plants. You see a lot of --

3 DR. ENGELJOHN: I see that a lot.

4 DR. WENTHER: But there's different, I
5 would say levels of NR's, whether they're actually
6 food safety related, they're not in compliance but it
7 is directly a food safety issue. One guy has rust on
8 a nail, the other guy forgets to take lethality
9 temperatures. There's different levels but an NR is
10 an NR is an NR is an NR at the end of the day. One
11 thing when you talk about volume of production, you
12 might want to think about or add into when that volume
13 actually occurred. We've got guys that pop up in
14 October and they're producing 50,000 hams in three
15 months and they're done. So the volume thing, you
16 have to kind of space out. Is it an intensified
17 volume or is it over the entire year, and you look --
18 I don't know if distribution has ever been looked at.
19 Small and very small, recognizing what we're looking
20 at, their distribution is two counties versus 20
21 states, is that ever going to be taken into account or
22 is that -- should be taken into account.

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1 DR. ENGELJOHN: I think it's a very good
2 point. From my perspective, for E. Coli 0157-87
3 presently we collect supplier information so that, if,
4 in fact, you have a positive, and we find out who were
5 the suppliers and I think we are interested in whether
6 or not there's a greater risk if you have multiple
7 suppliers of source materials versus single source in
8 terms of for a number of reasons. But I think -- I
9 don't know as if we've considered collecting
10 information about distribution and geographical
11 distribution but that sound reasonable. I don't know
12 from your perspective, Jill, with the food
13 establishments that you have, is that -- I mean, I
14 don't know.

15 MS. HOLLINGSWORTH: Well, I'll tell you
16 the one thing that strikes me and because it's a
17 current issue that we're dealing with, and that is in
18 the CDC data there is a significant difference in the
19 cases of Campylobacter in the East Coast versus the
20 West Coast. And I think that serves as a good example
21 of where distribution and differences in handling in
22 fact, probably would totally impact your risk. Your

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1 risk actually on the West Coast is different than your
2 risk on the East Coast. You're far more likely to be
3 exposed to Campylobacter, have the disease if you live
4 on the West Coast and so I think there the question
5 would be, and why is that and so there you have to
6 look at things like distribution and differences in
7 practices.

8 My personal opinion is it's entirely based
9 on state law with temperatures. And so there's a
10 situation where those kinds of factors, I think, make
11 a big difference when you're looking at how would you
12 do your sampling. I mean, again using Campylobacter,
13 if you were going to do sampling for Campylobacter, it
14 seems to me it would make far more sense to be
15 weighting your sample to the West Coast facilities
16 versus the East Coast because your risk is greater out
17 there. So I do think you have to take those other
18 kinds of issues into account and I guess that's where
19 I was going with the whole idea of if you're going to
20 try to come up with a model that you can plug things
21 into, there's probably a whole laundry list of
22 different things that you would have to consider, can

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1 we get this data and then where do we put it into this
2 model to determine how we adjust our sampling levels.

3 And I think developing that list is useful. I guess,
4 if I understand what you're asking us is, do we think
5 there are some things on that list that are more or
6 less important for a small facility and I know we
7 haven't quite gotten around to answering question yet,
8 but maybe -- we always spend time, it seems, getting
9 them framed up, but I --

10 MR. DETWILER: Well, you wouldn't want to
11 go straight to answering a question without coming up
12 with all the factors behind it, wait a minute. Now
13 that we wrote all the answers, let's start over again.

14 MS. HOLLINGSWORTH: Yeah. We've done that
15 many times. We've debated for four hours and then
16 wrote up the answers in 20 minutes. So I guess in my
17 mind I'm still trying to get that clarified. Is that
18 what you're trying to ascertain or have us help you
19 with, is do we feel that there are those things that
20 may or may not be more important in a model if you're
21 looking at all these criteria because of the
22 uniqueness of a small plant?

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1 DR. ENGELJOHN: That's ultimately the
2 question, is the differences between small plants and
3 others, yes.

4 MS. HOLLINGSWORTH: And it would seem to
5 me that you almost might eventually somewhere down the
6 road, end up with a matrix of all these factors that
7 you want to include in your model or to plug in and
8 then weight them, this factor is more important. If
9 it's a big plant, this factor is more important, if
10 it's a small plant kind of thing.

11 MR. GOVRO: Yeah, just to clarify, I think
12 I'm understanding the question. Any risk factors FSIS
13 presently uses in designing risk-based sampling more
14 importantly when addressing the concerns of small and
15 very small plants, does that mean more important than
16 in large plants?

17 DR. ENGELJOHN: Uh-huh.

18 MR. GOVRO: Okay. As opposed to compared
19 to each other because you're already broken them down
20 into first tier and second tier as I understand them.
21 So --

22 DR. ENGELJOHN: And again, getting back to

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1 the issue, the Agency is interested specifically in --
2 we're going to have a risk-based program and everybody
3 is included in it, but we want to have some special
4 considerations for those things that we're looking at
5 for small or very small plants. So that's why the
6 focus of is there things in particular we should
7 probably pay attention to that we have not.

8 MS. HICKS QUESENBERRY: A good example, I
9 think of what Dan's talking about and what you
10 mentioned in the back, I'm sorry, I don't remember
11 your name --

12 DR. ENGELJOHN: Jay.

13 MS. HICKS QUESENBERRY: Jay. Seasonality
14 production, right now, our risk base verification
15 sampling program knows when a plant is in production
16 and when it is not. So we're able to take that into
17 consideration and we are asking plants next year to
18 tell us not only that they operate for this number of
19 months and this is the poundage, but which months,
20 exactly those happen so that we can look at an annual
21 forecast, not just on a month-by-month basis are they
22 producing. So that's one of the kinds of

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1 considerations that we need to take into account for
2 small and very small plants.

3 You know, an organization like Cargill
4 doesn't have that problem, or doesn't present that
5 challenge because you guys have a more uniform kind of
6 production.

7 MR. LINK: We do, but we still see
8 seasonality differences not in Listeria but in the
9 0157 for example certainly --

10 MS. HICKS QUESENBERRY: I'm sorry, I don't
11 mean in prevalence of pathogens, I mean in how much
12 product you're sending out the door.

13 MR. LINK: Oh, no, yeah.

14 MS. HICKS QUESENBERRY: Yeah, whereas
15 small businesses do.

16 DR. ENGELJOHN: Yeah, I think on that
17 issue, this is Engeljohn, if we know there are
18 seasonal effects with the prevalence of the pathogen,
19 then absolutely, we are -- we take that into account
20 now, such that we double the number or we
21 significantly change the frequency or the numbers of
22 samples that we would collect in the period of time

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1 where there's high prevalence, so we -- that's part of
2 what we try to do if we know that there are seasonal
3 differences.

4 MR. GOVRO: Mike Govro. I'm just going to
5 throw out an answer for question number 1 and then
6 I'll let you all argue it out -- argue me out of it.

7 DR. ENGELJOHN: What is question number 1?

8 MR. GOVRO: Question number 1, are there
9 risk factors that FSIS is using that are more
10 important in small plants and very small plants than
11 in the larger plants. And I'm going to throw out the
12 answer no. I think when you look at all of those
13 things, they're all important whether you're a small
14 plant, a very small plant or a large plant. You may
15 look at them a little bit differently as you try to
16 design your sampling program but those seem to be the
17 elements that are -- I mean, seasonality applies to a
18 big plant as much as a small plant. You may see it
19 more in smaller plants but it's still an important
20 factor.

21 The time of year when you sample and the
22 ambient temperature is an important factor. It's

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1 going to give you maybe different results at different
2 times but it's still as important in a large plant as
3 it is in a small plant. All of these things that
4 we've talked about that we can roll up into the phrase
5 of compliance history and the sanitation program and
6 all this sorts of things as important in small plants
7 as in larger plants. So unless -- can you argue me
8 out of that?

9 MR. LINK: No, I'm not going to try to. I
10 guess the only thing that might be different and I
11 think Jay brought it up, the distribution discussion
12 and maybe it's just very small plants and not small,
13 because small is a really huge category, but you know,
14 if I'm going to the next county or if I'm going from
15 cross country, different considerations, shelf-life
16 weighs in. I may only need two weeks if I'm going to
17 the next county. I might need 60 days if I need to
18 put it anywhere else and distribute to a huge chain
19 retail establishment or something. So there's
20 differences there. I don't know if that's something
21 that needs to be --

22 MR. DETWILER: Well, it sounds almost like

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1 it's not so much that it changes his answer of number
2 1 but it goes into number 2 in terms of those
3 additional factors unique to the small and very small,
4 and it also sounds like it's more so that it pertains
5 to the very small than to the small because of the
6 range of the small plants, that the very small plants
7 because of the time and duration to its -- for its
8 distribution and how wide is its distribution and its
9 seasonality, might play more a factor for the very
10 small, but I don't think that changes that issue of
11 the answer to number 1 being no.

12 MS. HOLLINGSWORTH: Yeah, if I'm
13 following, Mike, what you're saying, it's that some
14 factors may have more weight than others but whether
15 that factor is applied to a small or a large plant is
16 not the issue. If volume of product is important
17 because that has to go to exposure, then it's not
18 volume is more important in a small plant versus a big
19 plant is that the volume is a factor that has to be
20 weighted

21 MR. DETWILER: Exactly.

22 MS. HOLLINGSWORTH: And more product

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1 that's produced say using a single source of material
2 that was contaminated is going to produce a larger
3 amount of contaminated product and result in a larger
4 exposure, therefore, a greater risk, but that could be
5 equally true if that product was produced in a small
6 plant or a large plant. Is that what -- and the same
7 thing with the distribution. The longer a product is
8 held, the more shelf-life time it has for growth, the
9 further its distributed may be all factors, but
10 whether that product originated from a small plant or
11 a big plant is not the point.

12 MR. DETWILER: Yes.

13 MS. HOLLINGSWORTH: Is that -- Okay, and I
14 can agree with that because I do think things like
15 volume matter but it's not a matter of is it the
16 volume, of the big plant or the little plant, it's how
17 much of this product did you produce and therefore,
18 how much exposure is there.

19 MR. DETWILER: So just to recap, I have so
20 far, as some jotted notes here, the answer to question
21 number 1, we have so far is, no, that all factors are
22 equally important. They may be looked at differently

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1 between large and small plants, such as seasonality
2 but equally important, some factors may have more
3 weight than other factors, but again, all factors
4 apply in terms of all large -- I'm sorry, well, to
5 large, small and very small plants.

6 MS. HOLLINGSWORTH: I can't think of a
7 factor that you would consider in one size plant
8 versus another. I mean, it would be -- I'm trying to
9 think here. I mean, it's the exact same factors, the
10 volume, the season, the distribution, the type of
11 product, the type of processes, all that long list we
12 talked about, once you have that list, it's the same
13 for a small or --

14 DR. WENTHER: What about in-house versus
15 brought in product? What I mean by that is there's a
16 guy that -- a small guy that slaughtered his own
17 steers and also brining in raw materials versus a guy
18 that does not slaughter any more and he's just
19 bringing in boxes of materials with USDA marked
20 inspection already on it.

21 MS. HOLLINGSWORTH: And I think you're
22 right, that factor but whether it's a small plant

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1 doing that or a big plant is not the issue.

2 MR. LINK: I mean, we have plants that --
3 I mean, we don't kill a thing. It all comes in and
4 referring to the small plant category, but it's a huge
5 plant. It kicks out, you know, millions of pounds a
6 week of hamburgers, you know, but it's a small plant.

7 And so you look at that and you -- I'm looking at
8 that, yeah, okay, there's a factor there. Raw
9 materials coming in, so we've got supplier programs,
10 loading and sub-loading testing, a lot of things in
11 place to kind of guard against problems, but it's a
12 factor.

13 MR. DETWILER: Are those plants kept as
14 small plant?

15 MR. LINK: Pardon me?

16 MR. DETWILER: Are those plants kept at
17 small plant?

18 MR. LINK: Well, the difference is numbers
19 of bodies, right?

20 MR. DETWILER: Yeah, so just like --

21 MR. LINK: Yeah, it's automated.

22 MR. DETWILER: Yeah, just like you've seen

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1 that guy on Star Trek going on the away mission? You
2 know, he's --

3 MR. LINK: No, no, I mean, it's automated,
4 so you're kicking a lot of volume out but it's small
5 because there's no bodies.

6 MS. HICKS QUESENBERRY: And that
7 illustrates the value of having this based on
8 production volume and not on number of employees who
9 stand in the plant.

10 MR. LINK: That's right.

11 MS. HOLLINGSWORTH: Is your HACCP
12 categories a combination of employees and dollar value
13 and/or employee or dollar or --

14 DR. ENGELJOHN: Only in the very small,
15 the large it's just -- more than 500, small it's fewer
16 than 500 and more than 2.5 or more than \$2.5 million,
17 so small is fewer than 11 I think or 10 employees and
18 do not produce greater than \$2.5 million. So that's
19 how the HACCP categories are. So really it was
20 distinctions made from the census. I mean, it's what
21 the Small Business Bureau had designed in terms of
22 looking at impact. So it's -- really, again, it's

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1 more based on features that are separate and aside
2 from what actually happens in the plant.

3 MS. HOLLINGSWORTH: So you could have a
4 facility that is enormous and extremely automated and
5 it would still fall into the small plant category.

6 DR. ENGELJOHN: It could, absolutely, in
7 fact, it does. And so from the purpose of the Agency,
8 there are a couple choices. One is we could get rid of
9 the HACCP designations which is how we phased in
10 HACCP, you know, that was part of that consideration,
11 and change how we consider our impact on the industry
12 by these other considerations. We don't do that right
13 now, but it certainly could be where we could go in
14 the future. But we think in terms of public health,
15 that's what we should be doing is basing it on those
16 factors that effect risk as opposed to what size
17 category the Small Business Administration classified
18 you as.

19 MS. HICKS QUESENBERRY: It makes some
20 sense when you think about the impact on a business to
21 think about the number of employees and it also makes
22 some sense to think about production volume when you

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1 think about exposure to consumers and that's really
2 what the Agency is doing simultaneously. When we look
3 at economic impact looking at is this a small
4 business, is it a very small or a very small plant,
5 and we were sampling, we were looking at how much
6 product is going out the door to consumers.

7 DR. ENGELJOHN: See, I don't know whether
8 -- again, I think you come up with an answer to number
9 1, but if you were talking about issues for number 2,
10 again, trying to get as some of the issues just raised
11 is -- does a larger plant have greater turnover of
12 employees and is that a factor that may, in fact,
13 effect sanitary dressing on the floor as example,
14 versus a small plant, a very small plant that has the
15 same employees there are often from the same family
16 that that's all they do, you know, there may in fact
17 be really economies generated by not having high
18 turnover. And just simply the fact that you have
19 slower turnaround, you know, that may be a business
20 issue for you but you also have the quality that's
21 there because you have employees that have been doing
22 it for the last 30 years.

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1 You know, those, in fact, may be factors
2 that could and should be considered. We don't
3 consider them now but they -- if there was a way to do
4 so, it would be something we could pursue.

5 MS. HOLLINGSWORTH: And actually, it could
6 work -- the fewer employees a large plant has, could
7 actually reduce their risk because they've taken on a
8 lot of human error kinds of issues if everything is
9 automated. So the whole idea of a small plant has a
10 few people and there's greater risk there may, in
11 fact, not hold up at all.

12 MR. GOVRO: I wonder if you could develop
13 -- Mike Govro, develop some sort of ratios in terms of
14 volume of product versus number of employees or
15 another measure, how many steps to the process, how
16 many pieces of equipment does it touch or get moved
17 from one to the other to the other, increasing your
18 chances of exposure to a pathogen. I'm kind of
19 thinking out loud right now, but it seems like there
20 might be some other things that you could look at that
21 -- you know, it sounds that we're all a little bit
22 uncomfortable with those three size categories as

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1 being significant in any way and there are so many
2 other things like distribution, sanitation programs,
3 number of employees, turnover, I mean, that's a great
4 one, characterize the training that the employees get.

5 MS. HOLLINGSWORTH: Sort of off the
6 record, I guess, we have -- retailers have an audit
7 program for suppliers and when we were trying to
8 determine how we would assess the need for how many
9 auditors and how much time they had to spend in a
10 facility and how much they were going to charge to do
11 an audit, we started out using FSIS' criteria and we
12 abandoned it. It just didn't work. Now that was
13 different because it's a lot of FDA regulated
14 products, too, but if you start looking at produce
15 facilities where they're growing a product, they have
16 6,000 employees in August and 12 in December.

17 We tried to base it over a 12-year cycle
18 or a two -- we just got rid of it, we just couldn't do
19 it and it's all done now on sales -- volume of sale.

20 MR. DETWILER: So I have turnover of
21 employees, ratio of -- I like this one, the ratio of
22 volume of product to employee -- not employee number,

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1 employee numbers, differences in geography. We also
2 talked about seasonality before. Is that still
3 something we want to put for number 2, seasonality or
4 we're not thinking that's really a different initial
5 factor?

6 MR. LINK: I think it's -- is it Heather,
7 I want to get it right?

8 MS. HICKS QUESENBERRY: You mean seasonal
9 production, right?

10 MR. LINK: Exactly.

11 MR. DETWILER: I'm sorry, seasonal
12 production.

13 MR. LINK: If you run six months out of
14 the year, what six months are they and does it matter.
15 If it's in the summer, maybe you want to be in there.

16 MS. HOLLINGSWORTH: But I think to
17 question number 2, again, going back to Mike's point,
18 there's a lot of factors that could be considered in
19 maybe not only the ones that FSIS is using but even
20 look at some different ones or weight them
21 differently, weight some more important than others,
22 but to the question of are there factors that are

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1 unique to the plants that are small or very small, I
2 thought we were saying no, that it's the same factors,
3 they're not unique. We send --

4 MS. BAYSE: Well, the risk factors are the
5 same, I think, in number 1.

6 MS. HOLLINGSWORTH: Right.

7 MS. BAYSE: Did we say -- did we agree on
8 number 2?

9 MS. HOLLINGSWORTH: Well, I guess that was
10 my point. Number 2 says, are there additional
11 factors.

12 MR. GOVRO: And again, we came up with
13 some other things to think about but I'm not sure they
14 should be considered unique to small and very small
15 plants.

16 MS. HOLLINGSWORTH: Right.

17 MR. DETWILER: It's -- one thing that
18 keeps coming back to me is that I sat on a panel with
19 King County, which is basically Seattle and the area
20 there and they're talking about some of the more
21 ethnic stores that they provide for different basic
22 customers but in trying to deal with the economy, they

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1 expand a little bit since they have some of the
2 equipment. They also might do ground beef in addition
3 to very limited cultural things and that I remember
4 then telling me at this meeting, I remember then
5 saying that that was one of the things that the
6 smaller establishment -- they did have some problems
7 in terms of dealing with those very unique, you know,
8 smaller, usually family owned what do you call that, a
9 rare -- a rare market, more of a rare --

10 MS. HOLLINGSWORTH: I niche market.

11 MR. DETWILER: Exactly, a niche and that
12 over the last 30 minutes is one thing that I keep
13 thinking. I don't know if that would be something a
14 large plant would be as much as in terms of where it
15 is actually something as being seen as unique to a
16 very small plant because you wouldn't have it causing
17 the same problem.

18 MS. HOLLINGSWORTH: Well, I think Darin,
19 that's a good point in that -- but again --

20 MR. DETWILER: Ultimately you're right.

21 MS. HOLLINGSWORTH: Whether a big plant is
22 making a meat product or a little one --

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1 MR. DETWILER: Whether -- big plant would
2 be the same thing.

3 MS. HOLLINGSWORTH: But you're right, it
4 does tend to be that small operators tend to look for
5 a product or something that makes them unique. That's
6 how they compete with the big guy.

7 MR. DETWILER: Right.

8 MS. HOLLINGSWORTH: They compete by making
9 something different or unique and maybe that does in
10 some ways increase their risk because there is less
11 knowledge or experience with making that product,
12 handling it. There's not as much technology available
13 for doing post-processing maybe of a particular
14 product. So I think there are some niche or unique
15 products that present greater risks. Again, I don't
16 know if that matters what size facility they're being
17 made in, but you're right there are --

18 MR. DETWILER: Well, their argument
19 though, is you would not find that niche in --

20 MS. HOLLINGSWORTH: In a big plant.

21 MR. DETWILER: Yeah, exactly, you would
22 not find that in the large plant. But ultimately, in

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1 terms of the factors, the risk factors, it's a moot
2 point to say that it's any different if it was large,
3 small or very small.

4 MS. HOLLINGSWORTH: Right.

5 MR. LINK: Something just popped in my
6 mind that might be a little different, big, small, is
7 on some of the interventions that people employ, if
8 it's freezing, for example, to get to -- does it
9 matter if you freeze it on site or if you freeze it at
10 a warehouse somewhere three hours away. If you're
11 using high pressure, does it matter if you do it in
12 your own plant or if you take it 10 hours away and
13 stick it in a pressure vessel? Does that really
14 matter?

15 MS. HICKS QUESENBERRY: That kind of takes
16 us back to the issue of distribution that was brought
17 up earlier and the thing with distribution is besides
18 the self life issue, is you think about time and
19 temperature during that distribution and that's an
20 additional handling step and what you get into there
21 is actually an issue of compliance. You know, it
22 theoretically shouldn't matter if the product is

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1 shipped an hour away or a week away if it's handled
2 properly during this. And so what you end up with is
3 this issue of distribution and the compliance during
4 that distribution.

5 MR. LINK: I understand that but I think
6 to Jill's point and if we go back to the Campylobacter
7 discussion, you know, if I'm taking raw poultry to 26,
8 28 degrees, and distributing it fresh and I'm in
9 California and I think I don't know what that means.
10 I'm thinking 36 is fresh, so I've created a different
11 situation and I'm in compliance but I've created a
12 different -- I don't know.

13 MS. HICKS QUESENBERRY: That would be
14 something like the voluntary measures that we talked
15 about before where an establishment goes above and
16 beyond what the basic minimum good practice is and
17 that's where you have to -- where we're excited about
18 the ability to assess the individual relative risk of
19 one establishment's practices and processes to
20 another's.

21 MS. HOLLINGSWORTH: Yeah, I mean, it would
22 be sort of interesting if there were some software

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1 developed where a company actually fills out just
2 fields and then automatically it ranks that based on
3 criteria that have been preset in this software
4 program, you know, where you just ask the company to
5 fill out this series of questions and they do a whole
6 bunch of things and fill them all out and then when
7 it's done, it sends back to FSIS some arbitrary number
8 like this is an A23946 facility based on all these
9 things they've told you but that little code means
10 something to FSIS as far as how many times do we
11 sample this facility and for what?

12 DR. ENGELJOHN: And so that's -- quite
13 frankly, that's exactly where we are trying to go is
14 to -- as we can identify those things that matter
15 whether or not, here's a minimum level of what we
16 consider to be industry good manufacturing practice,
17 where this is the bar that's set for most plants and
18 then there is others that exceed the expectation and
19 here are the factors that may impact that, that's
20 ultimately what we're trying to do is come up with
21 that -- what we call a checklist to say here's some
22 features that we want feedback from the inspector on

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1 and, again, do they have these practices, do they have
2 real shelf-life data as opposed to a computer modeling
3 their program and that type of thing.

4 And then that ultimately would segregate
5 right now plants for Listeria anyway into one that
6 exceeds expectation versus meets minimum but doesn't
7 go over this threshold. So that there are, in fact,
8 distinctions made within the alternative. That is, in
9 fact, what we're trying to do, starting with Listeria
10 but ultimately we would do with Salmonella, depending
11 on do you control from that hatchery all the way
12 through slaughter, what comes to the slaughter house
13 and the intended use of the product? Well, those all
14 would be features, hopefully that ultimately would
15 impact on one of those decisions as do we target it or
16 not, you know.

17 MS. HOLLINGSWORTH: And if that's the
18 concept, then I guess it goes back to our original
19 point and that is when you're answering those
20 questions, I don't think it matters really how your
21 plant is categorized according to HACCP; it's how
22 you've answered those questions. What are you doing

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1 and how are you doing it and how much of it are you
2 doing.

3 MR. DETWILER: Okay, Jill, based on your
4 concept of this A236 kind of thing, would there then
5 be the idea of going well, we've got this data and
6 what do you know, here's another A236 and so what is
7 it that's common between these two A236. We don't
8 just say that they're both small or they're both very
9 small. We can actually get more specifically targeted
10 and say that these both have a seasonality issue
11 that's the same or they both have a turnover of
12 employees issue that's the same and now we can look at
13 either training outreach or difference in inspection
14 criteria that's very much more specifically targeted
15 to not just a small, very small or a regional but
16 specifically on that idea of what are those various
17 weighted factors that they have in common?

18 MS. HOLLINGSWORTH: Right, you're right, I
19 think it's a good point, if we make up this
20 theoretical thing were you have these A23 plants and
21 if you went to them or just looked at their size, you
22 might think, why would they be sampled the same, but

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1 if you looked at the processes they have in place, and
2 the kind of practices and the kinds of operations that
3 they're -- whether they're sampling or not sampling,
4 what they're producing, how much of it, if they have
5 unique niche products, that's what they're going to
6 have in common, not how many employees they have or
7 how big or small their building is.

8 MR. DETWILER: Right because what happens
9 then is I tend to think that there's some plant that
10 they would fill that out once and they might never
11 change. They would always be that A236, that a year
12 or two down the road, they're no longer an A236,
13 they're something else, so if we can identify maybe,
14 in terms of certain factors, what is it that would
15 change, then that would be the kind of thing we need
16 to look at in terms of what are those factors that
17 would make those small or very small plants differ and
18 I do see the idea of turnover employees, the ratio of
19 product to employee quantity, the region geography
20 and the seasonal production as being those kind of
21 things that could change, you know, even if the
22 ownership of the plant does not change.

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1 MR. LINK: It could be volume of sales,
2 now I can afford to do things I couldn't do before.

3 MR. DETWILER: Exactly, or we have this
4 new deforestation law that requires me to not be able
5 to have this and the zoning changed and now we have to
6 focus on this and therefore, the place where I was
7 getting my product has changed or, you know, there are
8 many factors that could change. The seasonal
9 production and the distribution of geography.

10 MS. HOLLINGSWORTH: Even formulation, I
11 mean, if you're making a product that has a certain pH
12 and your high on the list for Listeria sampling and
13 suddenly you've reformulated it and you now have a
14 very acidic product with a very low pH, your need for
15 Listeria sampling is going to probably totally change.

16 And we've seen that even with non-meat products. I
17 mean, we've seen a real change -- and I'm getting off
18 the subject here -- but in the industry that produces
19 salads, deli salads, they've just gone to acidifying
20 the stuff and now the whole food code is going to
21 change because they've got the pH so low on that
22 stuff. So it's like, you know, the product, the

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1 formulation.

2 MR. DETWILER: Mike and then Gladys.

3 MR. GOVRO: I was just going to say, it
4 sounds a little bit like we've gone through question
5 number 3.

6 MR. DETWILER: Way to go, Mike.

7 MS. HOLLINGSWORTH: Thank you, Mike.

8 MR. GOVRO: Unless Gladys has more to add,
9 it sounds like what we're focusing in on is just
10 refining the risk criteria and maybe being able to
11 create categories or scores or something that would
12 allow you to focus your sampling on those with the
13 highest risk and again it sounds like we're still sort
14 of shunning the size categories as really being
15 significant, although there may be differences in what
16 you see in those risk categories from size to size.

17 MS. BAYSE: It was about the same comment.
18 We've sort of talked now about performance evaluation
19 and if we have the spreadsheet whatever, Jill's with
20 blocks in it, then when something changes, now you
21 should be able to -- yeah.

22 MS. HOLLINGSWORTH: In the interest, I'm

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1 sorry.

2 MR. DETWILER: I'm sorry, Jay?

3 DR. WENTHER: I'd just ask the question,
4 how come a niche market automatically makes it a risk
5 to the product because I could think the other way,
6 too, a niche market would make it a non-risky product?

7 I think ground beef, as I said, I grind five boxes,
8 20 boxes of beef. I bring it out of the freezer on
9 Monday, I grind it on Tuesday and I sell it Tuesday
10 afternoon. I don't know if that's quite as risky as
11 something that's got 60 days of shelf life.

12 MR. LINK: I don't think that implied it
13 was more risky. It was just a factor to consider.

14 MR. DETWILER: Yeah, the reason they had
15 brought it up in King County was that they were
16 talking about the inspectors went to this one
17 restaurant and that a meat processing plant in the
18 back for this one cultural group and they were
19 surprised to find love goats walking around and
20 apparently that's what they do. They -- it's that
21 short of a duration, a farm to table and --

22 DR. WENTHER: Well, I don't know that

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1 niche markets are risky but I think there's some that
2 aren't risky even -- I didn't want this to just be all
3 they --

4 MS. HOLLINGSWORTH: No, I think the idea
5 is it needs to be one of the factors looked at.

6 MR. GOVRO: And that probably goes under
7 the characterization of product type and --

8 MR. LINK: Can I jump off in the weeds a
9 little bit? This concept of 1A, 2B and 3, now there's
10 four, do you or does the Agency see an alternative to
11 formulation better than host pasturization or vice
12 versa or are they equally as wonderful as far as
13 you're concerned?

14 DR. ENGELJOHN: Well, I would say when the
15 risk assessment was done, it was the combination of a
16 post-lethality treatment and preventing growth as
17 being the most effective way to address Listeria
18 throughout the shelf life of the product. And so if
19 you're only treating something post-lethality but it
20 would allow growth and if there's low level
21 contamination in the shelf life long enough, well, it
22 could, in fact, create a hazard on down the road. So

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1 I don't know as if there's a distinct way to discern
2 how much risk is different between the two. It's just
3 that it's the combination of barriers is what's more
4 effective than --

5 MR. LINK: No, I understand that. I just
6 -- if I were to choose one or the other and
7 alternative 2, which would be the most effective, I
8 guess in my mind, which would be better and I'm kind
9 of looking like the formulation -- because, you know,
10 if you've got a good sanitation program, chances of
11 surface contamination are pretty minimal anyway but I
12 just wondered -- I didn't know where you were on that.

13 Is one better -- is there some hierarchy on --

14 DR. ENGELJOHN: I would say for the moment
15 the way the Agency is looking at it, it is. How the
16 establishments are, in fact, verifying that they have
17 an effective program and you know, we do have a
18 concern that some establishments may have just added
19 antimicrobials but not necessarily at a level that's
20 effective. That's a concern to us and so when --
21 taking all things into consideration, if, in fact,
22 they're effective, obviously having sanitation which

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1 is a necessary thing to begin with, in preventing its
2 growth would be something I think would be highly
3 desirable.

4 MS. KAUSE: This is Janelle. Just to add
5 to that, you can always go to the website and look at
6 the 2003 FSIS' Listeria risk assessment that's been
7 extremely peer reviewed according to OMB guidelines
8 and cleared through OMB, it's the only one that's been
9 cleared through OMB to date and they actually give you
10 the differences overall but on top of that is exactly
11 what Dan said, you know, you may be doing one of those
12 interventions but how effective is it to say, ?I did
13 it?. You know, you can add it at a level that was
14 going to make much difference.

15 MR. DETWILER: Very true.

16 DR. ENGELJOHN: The only issue that I
17 don't think that's been talked about much and it's
18 talked about and you can make a decision about how you
19 want to recommend back to the Agency but I do think it
20 is important that the agency consider the
21 establishment's documentation, their own data and a
22 way to figure that into -- if a plant has lots of data

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1 and it's reputable data, or they have ongoing data not
2 necessarily lots of it but they have good sound data
3 to support their program, that there needs -- or there
4 could be a means by which that gets factored into the
5 overall decision such that it's not just the Agency's
6 data that's driving but there's the encouragement,
7 like we said on Listeria in particular, an
8 encouragement to have data designed to find the
9 problem and then data to demonstrate its fix, should
10 probably carry some weight over having no data or
11 insufficient data to make those kind of
12 determinations.

13 MS. HOLLINGSWORTH: I think even in
14 previous discussions and committees we've always come
15 back to that point of can you make having data and
16 giving it to the Agency an incentive and not a risk?

17 DR. ENGELJOHN: Right.

18 MS. HOLLINGSWORTH: And that's tough. I
19 mean, it is tough. The other thing I was just going
20 to throw out and I thought it was interesting when
21 your comments -- when you made your comments and
22 toward the end how there seemed to be sort of a

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1 concern or maybe even a misunderstanding about looking
2 at small plants differently. I think with this type
3 of approach, where you're looking at all these factors
4 on a matrix that are weighted but they're not weighted
5 for whether or not the factors are in a small facility
6 or a large facility, I think it certainly also goes to
7 address those concerns that the Agency does not give
8 perhaps bias or preferential treatment that allows one
9 plant more latitude to be a little less safe than
10 another and I think this concept wipes out that whole
11 fear or concern that that could happen.

12 MR. LINK: Is part of our discussion --
13 I'll save the questions and answers but just in terms
14 of where these folks and their attention whether it's
15 Listeria, Salmonella in poultry or eggs, when you've
16 got limited resources and I think Jill pointed out,
17 they're talking about 0157, already where we're
18 supposed to be and still making progress with regards
19 to the 2005/2010 goals really close on Listeria, not
20 quite there yet. Salmonella is still kind of out
21 there a little bit but we don't really know if it's
22 meat, poultry or if it's alfalfa sprouts or something

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1 else. But is that part of what we need to be talking
2 about or am I really in the weeds now?

3 DR. ENGELJOHN: You guys have the ability
4 to decide what it is you want to talk about.

5 MR. LINK: We can talk about whatever.

6 DR. ENGELJOHN: I mean, that's what you
7 can decide, do you want to go in that direction.

8 MR. LINK: Part of it is, okay, if I'm
9 going to look for Listeria, what do I need to think
10 about. If it's 0157, there are a different set of
11 factors, I think. If it's Salmonella, it's something
12 completely different again because they are completely
13 different processes and different sources and things
14 of that sort. And really, we're kind of focused on
15 Listeria but touched on other issues and I don't know.

16 But then I wonder how much effort you really ought to
17 be putting on 0157 given where we are today and maybe
18 we're in a maintenance mode as far as you're concerned
19 there and not so much the Salmonella where we ought to
20 focus a little more attention. I don't know. I'm
21 thinking that way.

22 MR. GOVRO: Related to that, I think it's

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1 really important that we get the -- what's the word
2 I'm looking for, I'm having a brain freeze right here
3 -- attribution data, in terms of the illnesses and try
4 to make a determination whether these products, meat
5 and poultry products, are where the overall resources
6 of the food safety machine get focused. You know, the
7 -- and I appreciate that if you reduce the amount
8 that's in the source, then you will reduce the number
9 of illnesses. I think that's a straight correlation,
10 but there are so many other factors that influence it.

11 For instance, with Listeria, we see a lot of Listeria
12 cases at least in our part of the country that has had
13 a large influx of Hispanic population in recent years
14 in the production of illegal queso fresco cheese which
15 is a raw milk fresh unpasteurized cheese, a lot of
16 cases. We are estimating that there is more illegal
17 queso fresco sold than legal queso fresco sold, and so
18 I think the attribution is just really essential, that
19 we determine where to look and that's going to drive
20 overall where we should place our resources in food
21 safety.

22 Maybe it should be consumer education.

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1 Maybe it should be food worker education. Maybe it
2 should be inspection at the food service level. So I
3 think that's an important point with regard to which
4 particular organisms we look at and how we view that
5 data.

6 MR. LINK: And on the Salmonella side,
7 just a similar argument, we've looked at on farm data
8 pretty extensively trying to understand what's going
9 on in farming and looking at the stereotypes of
10 Salmonella. We don't find the same stereotypes in
11 plants that we find on the farm, interesting enough.
12 And then I think what we've finding in the plant
13 typically aren't pathogenic strains but and I know
14 that sometimes there are obviously, but at some point,
15 do we need to look at Salmonella and focus in on these
16 are the strains that are the problem, all the rest of
17 them are not a problem.

18 You know, because I guess there's a finite
19 number of pathogens within the Salmonella family.
20 We're going after positive/negative and if it's there
21 we'll go nuts, trying to figure out how to get rid of
22 it and a lot of times it doesn't matter anyway because

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1 it's not a pathogen.

2 DR. ENGELJOHN: But I would say on that
3 issue -- this is Engeljohn -- is that one thing that
4 we are looking into is methodology can be a factor
5 being the one that we're looking at right now, with
6 the other advisory committee but we do have a need to
7 insure that our methodologies aren't selecting for
8 certain pathogens in the medium that we use to find
9 pathogens in the products that we regulate.

10 The medium may, in fact, be selecting for
11 certain strains and this would be the incubating media
12 that we use in the lab, such that the strains that are
13 causing people to get sick may, in fact, be there on
14 the plate but they don't grow well and the other ones
15 do. And so those are the kind of issues we need to
16 make sure that if in fact, people are getting sick
17 from these particular pathogens, and we're not finding
18 them on the products, that, in fact, we know they're
19 not on the products and so there are a number of
20 issues we need to answer there as well.

21 MS. HOLLINGSWORTH: I think back to
22 Charles' point, maybe in this concept of developing

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1 sometimes ultimate software where you just plug in
2 this information, I think there almost needs to be
3 probably two separate components of what data is going
4 into that decision tray, if you will. One set of data
5 is all the information that the plant supplies you;
6 their volume of product, their processing activities,
7 if they're testing all these different factors that we
8 talked about, and then I think on the other side, the
9 other pieces of data that need to be put in are things
10 like how common is that pathogen or how much disease
11 results from that pathogen, what is the
12 morbidity/mortality rates for that, all that human
13 public health kinds of information also needs to be
14 plugged in because you're right, I mean, there's no
15 point in putting your resources into testing for a
16 pathogen that no one is getting sick from. So clearly
17 that second component, the public health component,
18 I'll call it for lack of a better term, needs to be
19 added into the model along with all the industry
20 information when you're trying to assess what are your
21 real risks and where you really put your resources for
22 sampling, if, in fact, your goal is to lower food

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1 borne illnesses in the human population.

2 MR. LINK: Part of that, you know, is back
3 to this are we on cruise control on 0157. I don't
4 think that we are but from an Agency perspective,
5 maybe you back up and say, ?Yeah, I want to keep my
6 hands on it, my finger on the pulse, but I ought to
7 put more effort on identifying in the Salmonella world
8 where we ought to be working.

9 MS. HOLLINGSWORTH: Have a maintenance
10 level versus a reduction level.

11 MR. LINK: Yeah, I mean, once you're
12 there, you're there but --

13 MS. HOLLINGSWORTH: Then you've got to
14 maintain that.

15 MR. LINK: I know, and that's why you've
16 got to keep your finger on it. Do you go aggressively
17 after 0157 and you know we're well ahead of goal at
18 this point and focus our effort somewhere else? I
19 don't -- until we found Listeria, if you know -- I
20 mean, if we had the attribution that we knew that,
21 hey, do you know what, we're close but the reason
22 we're not over the hump is because of cheese, you

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1 know, it would be nice to know that.

2 MS. HOLLINGSWORTH: Well, if they could
3 take out the cases, even the cases they know about,
4 that occur from non-commercially produced products,
5 that would be way below the Healthy People goal. The
6 problem is the non-commercial products are
7 incorporated in and there's nothing FSIS and FDA are
8 going to do in the industry to effect that. I mean,
9 that's strictly public education. There's nothing you
10 can do to change that as an industry.

11 MR. DETWILER: I also agree in terms of
12 the fact that if you look at the forces and the
13 various factors at play here, I mean, if it was, we
14 could limit it down to a few, this is why we have the
15 E. Coli or the Salmonella or whatever, that would be
16 great, but unfortunately it's so fluid and to say
17 we'll focus on this, who's to say that's going to
18 change, like you were saying here, six months a year
19 down the road or in this part of the country versus
20 this part of the country, like you were saying.

21 It almost seems like the factors that
22 we've looked at weighing them that they don't really

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1 have any difference whether it's small, very small or
2 large. But looking at some different factors but at
3 the same time, not just looking at the pathogen of the
4 day but looking at here are some standards and we've
5 got some more interesting data that says maybe we need
6 to go look at this as well and that, you know, three
7 weeks from now it might be completely different. So I
8 don't know if specifically we would relate it to any
9 one or two pathogens based on any factors as in the
10 long range the prudent thing to do. That's just my
11 ramblings.

12 So for number 3, just trying to move on,
13 keep with the list here, I have down for number 3,
14 refining the risk criteria, creating categories or
15 scores but not necessarily focusing on plant size.
16 Was there any more specific verbiage that you wanted
17 to include that we had not already included in our
18 responses to numbers 1 and 2?

19 I did include for additional factors that
20 idea, I think it was Dr. Hollingsworth and her -- I'm
21 sorry, it was someone -- about the amount of ongoing
22 good and sound data. I'm sorry, someone over here

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1 said that. That might -- maybe being another factor
2 to look at, a small plant that never has any data
3 might be something you'd want to keep your eyes on
4 more than a plant that has a lot of very good sound,
5 ongoing data and they are proactive in looking at
6 their own factors there. Was there anything else for
7 question number 3 in terms of anything else for
8 sampling more effectively?

9 MS. HOLLINGSWORTH: Darin, is it -- I
10 guess what I'm seeing is, I'm not even sure that you
11 have specific answers any more for 1, 2 and 3. It's
12 like here's our one big answer to that whole block
13 issue.

14 MR. DETWILER: Yeah, but then again, to
15 some extent, the questions are not very unique in and
16 of themselves, because look at our answer number 1 and
17 then saying that, no, all factors are equally unique,
18 but then question number 2 is what are additional
19 unique factors? We're saying still no, there's no
20 unique factors but here's some additional factors that
21 are not unique but need to apply to the large, small
22 and very small that could be looked at in terms of

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1 coming up with your A236 kind of categorization or
2 scores, if you will in trying to avoid just the focus
3 on the plant size.

4 And then we had listed the few additional
5 factors to look at but that they were not -- again,
6 these are not unique factors to the three different
7 types of -- these are just additional factors to
8 consider.

9 MS. HOLLINGSWORTH: You know, it would be
10 sort of interesting if you had your criteria and could
11 plug information in to see if, in fact, for example,
12 very small plants all tend to fall into one category
13 because they do have factors in common that large
14 plants don't have, but you wouldn't be sorting them
15 because they're small. They would have to fall out
16 into one category because either they don't collect
17 data or they don't use post-lethality treatments.
18 They end up falling into the same category together
19 anyway but it would be interesting.

20 DR. ENGELJOHN: Yeah, I -- I mean, again,
21 it's -- the issue is the Agency's looking to start
22 capturing differences and then trying to see if, in

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1 fact, the outcomes of the plants are different and
2 whether or not we can attribute food borne illness to
3 anything in particular. All those things are trying
4 to mesh together and so the -- it just gives us
5 direction to just continue to do that.

6 DR. WENTHER: There's different tiers I'm
7 looking at, too, when you talk about just because they
8 have -- they may all have the same 50 components and
9 they all say the same thing but when you break those
10 components down, just because one company uses lactate
11 and the other one does, too, the level of lactate will
12 then break it down even farther and it just keeps on
13 tiering it down. So it's not as simple as then we're
14 going to clog everybody down and they're all going to
15 be the same again. I don't think it will ever get to
16 be the same, because now the customer that we deal
17 with is --

18 DR. ENGELJOHN: I can tell you this; we
19 did try a couple of years ago, when we were starting
20 to look at how we could do Salmonella testing for raw
21 product differently, we looked at the plants that had
22 failures of the criteria for the Salmonella programs

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1 and we looked at plants that didn't -- did not fail
2 and rarely, if ever, had positives to try to see if
3 there were differences in terms of the written
4 programs that they had and the reality is, the written
5 programs are the same, but the commitment by
6 management to the programs were different. But how
7 you capture that is difficult.

8 You know, again, a small plant that has a
9 commitment to -- they may do it slow and they may do -
10 - you know, do it infrequently but they still may, in
11 fact, have better dressing procedures, you know than
12 an automated system and you know, consequently, there
13 simply are differences, simply because of just how
14 they conduct their business. But there also is a
15 commitment to making things happen versus one that
16 doesn't. You know, how we capture those things,
17 that's the hard part.

18 MR. LINK: One factor we hadn't mentioned
19 and I'm not sure if anybody believes this to be a
20 factor or not, was geography. And I'm sure in my mind
21 that it matters.

22 MR. DETWILER: You mean not the

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1 distribution geography but physically where it is.

2 MR. LINK: Where they are.

3 MR. DETWILER: Yeah.

4 MR. LINK: Where you are.

5 MR. DETWILER: I think there's a big
6 difference between places depending upon where exactly
7 they are. I'll put that down.

8 DR. ENGELJOHN: What do you mean by that?
9 I mean, we -- I can -- do you mean like what we said
10 with jerky as an example, that if you're in a high
11 altitude area, that may be something you need to
12 consider in terms of cooking temperatures may be more
13 difficult to achieve a level, a falsity at a higher
14 elevation than one at sea level as an example.

15 MR. LINK: That's a good example. I think
16 just being in a warmer climate makes a difference for
17 Salmonella for example or 0157. If you're in Texas
18 instead of Pennsylvania, you may see a difference.

19 DR. WARD: And that's where the animals
20 are slaughtered or reared or both.

21 MR. LINK: Reared and slaughtered.

22 MR. DETWILER: Do you know what else I was

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1 thinking when you were saying that? One of the things
2 that popped into my mind is, if you're a small plant
3 in the Eastern part of the United States, you got much
4 less distance to a much greater percentage of
5 population than if you're in you know, the Midwest.

6 MS. HOLLINGSWORTH: Wyoming.

7 MR. DETWILER: And it might take you a lot
8 longer and you have to go a lot further to get to the
9 same quantity of customers you want to get to. So
10 it's not necessarily big city/little city or rural or
11 urban, but you know, proximity to your basic customers
12 that could effect that as well.

13 MS. HOLLINGSWORTH: Well, if you start
14 looking at factors like humidity with Listeria it
15 seems to us we find more environmental Listeria
16 particularly in the Southeast. I think it might be
17 related to humidity. Everything is always wet and
18 they're always blowing air conditioning all the time.

19 MR. DETWILER: I'm going to be a
20 facilitator here and say we've been here for two hours
21 and maybe we should take a break for a little bit and
22 if anyone disagrees --

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1 MR. GOVRO: Yeah, and I mean at some point
2 probably when we come back, we ought to think about
3 getting a report written.

4 MR. DETWILER: Yeah, just don't forget
5 what room we're in. They all look the same on this
6 floor. Yeah.

7 DR. WENTHER: Just one question before you
8 break, is this something, Dan, that we're going into,
9 I mean, the system on the grade, the concept is on the
10 grade, it's been talked about for years. Is this
11 something that's going to maintain for years? And
12 what I mean by that is, they say we're there with E.
13 Coli, we've made the 2010 goal in 2005. When it hits
14 2010, then what, is it going to lower even farther and
15 then we're going to back up and now we're going to be
16 addressing E. Coli again because our goal is -- are we
17 still going to maintain it? Is it something we can
18 achieve or is it different -- you can't foresee the
19 future, but different Administrations have different
20 objections for this, accomplish what you need to get
21 done for moving to that system?

22 DR. ENGELJOHN: Yeah, I mean, in all

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1 fairness, I don't have an answer to the question but
2 in terms of the strategic planning by the Federal
3 Government we do, for public health, use 2010, Healthy
4 People 2010, so we'll at least know until then we have
5 some goals to work towards, and the goal is to not
6 meet them but to exceed the goals. And there will be
7 efforts made to reassess where we need to go beyond
8 2010. Whether or not it will be continued lowering or
9 in the case of 0157, and I certainly don't know the
10 answer to this but again, there's been significant
11 progress made within raw beef products but there
12 hasn't been a focus in Healthy People 2010 by the
13 water or other areas that contribute to that disease.

14 So the focus may be on a different product.

15 There still may be a goal there to be
16 achieved and it may not specifically identify raw
17 ground beef the next time. It may, in fact, identify
18 another vector that needs to be controlled.

19 MR. DETWILER: All right, let's get back
20 in 10.

21 (A brief recess was taken.)

22 DR. ENGELJOHN: I'm not trying to put

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1 words in your mouth but from my perspective, the --
2 what has been talked about by this group is there are
3 a number of things that should be taken into account,
4 much if not --

5 MS. HOLLINGSWORTH: Beyond these five.

6 DR. ENGELJOHN: Beyond these things and
7 much of which the Agency does not have access to, has
8 access to the information but we don't collect it and
9 that by -- the establishment providing the data, could
10 and should be used to help factor in how the Agency
11 does its verification program which to me, means that
12 it would be prudent for the Agency to identify those
13 things that could be used in a matrix type of thing to
14 use in its decision making which would come from the
15 establishments themselves.

16 And that would give, in essence, us one
17 direction which would be to pursue a means by which we
18 can capture that information.

19 MR. GOVRO: If you need to pursue that
20 permission, then you should. Some of the things we
21 may have talked about today might be things you could
22 observe in terms of their sanitation program and that

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1 sort of thing.

2 DR. ENGELJOHN: And we do that now and it
3 gets into the issue of we, the government, has this
4 information but there needs to be a way to take -- for
5 the establishment to get credit for the good things
6 that they're doing as opposed to just an opinion by
7 the Agency and we did that in Listeria by creating a
8 data request form that we would update it regularly.
9 As the establishment changes its process, they can
10 submit new information which may, in fact, put them
11 into a lower risk if we're rating establishments based
12 on relative risk and that should be a good thing.

13 The problem is, is that we -- it would be
14 helpful to have from the committee a recommendation
15 that that should be something the Agency pursues.

16 MS. HOLLINGSWORTH: Well, again, I guess I
17 sort of -- thinking here of my future career, perhaps,
18 I'm going to be a millionaire and write this software,
19 it would seem to me that -- and I know, Dan, you
20 referred to like a checklist. I guess I see it sort
21 of as a series of questions that can be provided to
22 the industry to fill out and even very small plants

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1 that might not have the wherewithal to download a form
2 and fill in, you know, data fields, even the inspector
3 could have that information and sit down with the
4 client management and say, "Let's see how many of
5 these questions or this information we can fill out?".

6 There may be some small and very small
7 plants that either aren't going to know or even if
8 they're unwilling, I mean, you're not going to
9 hopefully mandate this, that they're going to say, "I
10 don't know?", or, "I don't want to put that information
11 in?", in which case there would be a default which
12 might automatically mean they're going to be ranked as
13 a higher risk and sampled more, so it's to their
14 advantage to give you all the information you need but
15 they fill in this information about how they operate
16 and what they do and what they produce and how much
17 and things like that.

18 I would also say, though, I feel strongly
19 that in addition to that industry component, we also
20 need to go back to this other idea that side-by-side
21 with that needs to be this public health set of
22 information that needs to be added to the matrix.

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1 DR. ENGELJOHN: Yeah, in fact, when I
2 wrote that down, Jill, I wrote down, there's the need
3 to have input of plant data provided by the plant as
4 one category that fits into this. There's the need to
5 have the risk information which is the public health
6 information, the morbidity, mortality, some factoring
7 in of that and then the third component being that the
8 FSIS data, since you've got those three pieces there,
9 probably that feed into an algorithm or something.

10 MS. HOLLINGSWORTH: Exactly.

11 DR. ENGELJOHN: But that would be helpful
12 but from my perspective coming from this committee, it
13 would be especially helpful to have a recommendation
14 back that the Agency should pursue obtaining this kind
15 of information.

16 MS. HOLLINGSWORTH: And Charles, as a
17 person who's going to be in a company or in a plant
18 that's going to get these questions to answer, does
19 that seem like something reasonable to ask a company
20 to do if, in fact, the answers -- first of all, it's
21 going to give you a chance to explain yourself to the
22 company, but then that will also be a basis for

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1 determining what gets sampled in your facility and how
2 frequently.

3 MR. LINK: And especially if you tell me
4 if I don't fill it out and they're going to be all
5 over me.

6 DR. ENGELJOHN: Or again, if we told you
7 if you met this threshold, you're in one category of
8 higher likelihood of being tested frequently versus in
9 this if you meet these criteria, you have a lower
10 likelihood, that type of thing. So that's it's
11 incentive based to do what you can within your
12 resources.

13 MS. HOLLINGSWORTH: And I think the whole
14 idea of giving companies incentives for sharing data
15 is built into a process like that with the idea of if
16 you're not filling out certain fields or providing
17 information, there are defaults. The problem is the
18 defaults are not an incentive, providing the
19 information is an incentive.

20 MR. LINK: I'll tell you what the problem,
21 the immediate problem that I see is because the USDA
22 is asking for it and we give all that data, it becomes

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1 public domain and the next thing we know you've got
2 this list of plants and the first thing -- I go back
3 to this -- do you remember the Salmonella deal that
4 got published in the paper and one of our plants was
5 in the Filthy Five.

6 MS. HOLLINGSWORTH: Yeah.

7 MR. LINK: You know, and that was not good
8 news. It's not there any more, but, you know, that's
9 the kind of thing that would inhibit this type of
10 sharing. You know, I don't know if it's something
11 that USDA can do or do through a third parties to get
12 the information but not have -- somehow not have it
13 available to them.

14 DR. WENTHER: That's the first thing I was
15 thinking of because, I mean, FPA did a seminar on
16 risk-based inspection and data sharing and that was
17 one of the biggest things, all big industry and all
18 industry wants the data sharing but they want to know
19 how the data is going to be used and they do not
20 believe it should be out there in the public domain
21 where everybody can use it against everybody to then
22 muddy the waters with that data and I believe it's

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1 going to take data to get there.

2 To use this old grid system like you're
3 talking about makes sense but to have that out there
4 and to really put it out there, it's tough.

5 MS. HOLLINGSWORTH: And saying it's a
6 trade secret or protected under FOYA might not be
7 enough but it might be the kind of thing where the
8 Agency could decide to let this out as a contract or a
9 grant to a university or some other private entity and
10 then what the Agency gets back maybe is not the
11 individual pieces of data but the categories or where
12 plants fit in, in a testing scheme, if that's the only
13 way to protect the privacy of it, but I agree, I think
14 the Agency needs to consider that because chances are
15 a lot of people may just say, "Just put me in at the
16 default level and I'll take the heat, but I'm not
17 going to tell everybody in the world everything about
18 my plant?", and that will be an issue.

19 MR. LINK: You just don't want to read
20 about yourself in the paper.

21 MS. HOLLINGSWORTH: Yeah, especially --
22 and that much data and information is so likely to be

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1 misrepresented and misunderstood.

2 MR. LINK: And the problem is, if you do
3 that ranking then you've got these plants that fall
4 into this other category as default. They're the
5 first ones that are going to be on the front page,
6 ?What's wrong with these guys?, you know?

7 DR. ENGELJOHN: But the reality is, is
8 that the Agency's testing program is, in fact, going
9 to need to identify which plants to target and that's
10 just how it is and so there are going to be those
11 categorizations of the plants so the question then
12 becomes what other -- what data is absolutely
13 necessary to get you for the agency to be -- where the
14 benefit of providing it outweighs the risk that you
15 have otherwise.

16 MS. HOLLINGSWORTH: Well, and I think,
17 too, a lot of it might be in the explanation, if it's
18 clearly understood and the agency does a good job of
19 communicating the fact that a plant may be in a
20 category to be tested a lot, because they make a lot
21 of product and a lot of product that is a challenge to
22 make because it can, in fact, if made badly or in

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1 appropriately, could cause illness.

2 DR. ENGELJOHN: Sure, and those are -- I
3 think that could be part of your recommendation going
4 forward is for the Agency because we're suggesting
5 moving forward with risk-based approach, which may in
6 fact, segregate plants or products into categories,
7 it's critical to have a communication plan developed
8 around that, and that's something that I think you
9 should recommend, so that we don't not do that.

10 MS. HOLLINGSWORTH: Yeah, I mean, the
11 whole thing might be to find a whole other way to
12 categorize so that the terminology isn't high risk and
13 low risk which sounds bad, ?I am a high risk plant?,
14 when in fact, it might be that you have some of the
15 safest product in the country but it's because of what
16 you're making and how much of it you're making.

17 DR. ENGELJOHN: The inherent --

18 MR. GOVRO: FDA characterizes the firms on
19 their official establishment inventory as high risk,
20 low risk, allergen.

21 MS. HOLLINGSWORTH: Right.

22 MR. GOVRO: And I don't know, and they've

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1 been doing it for a long time.

2 MS. HOLLINGSWORTH: Of course, you know,
3 even now they're looking at rechanging all of their
4 inspection reports to get away from the use of the
5 word, critical, because then people think, "Oh, my
6 God, you have a critical violation therefore, you have
7 good contamination?", but in the Food Code a critical
8 violation means something that could result in a
9 hazard and it's not quite understood that way. So
10 they're changing the names, just to get away from the
11 words.

12 DR. ENGELJOHN: I think that's an
13 important point to bring up and if we don't capture it
14 in your recommendation coming forward, we may not get
15 that addressed. In other words, remember to capture
16 that, so that would be an important --

17 MR. DETWILER: I'm sorry.

18 MS. HOLLINGSWORTH: We'll tell you in a
19 minute. Tell us when you're ready --

20 MR. DETWILER: I'm just trying to process
21 what we've got here.

22 MS. HOLLINGSWORTH: Okay.

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1 MR. DETWILER: So we'll have a first
2 draft.

3 MS. BAYSE: You may not want us to talk.
4 With the FoodNet surveillance, I don't know enough
5 about that. It's reported illnesses but do they track
6 back to try to -- and is there a way for Jill to fix
7 her matrix so it's compatible with their software?

8 DR. ENGELJOHN: Yeah, I think, ultimately,
9 Gladys, will fit in in the sense that there are only a
10 certain number of states involved in FoodNet right
11 now, volunteer states.

12 MS. BAYSE: Oh, yeah, I forgot about that.

13 DR. ENGELJOHN: And -- but those states
14 have directly tied into the clinical illness, a means
15 by which food is better attributed, so that there is,
16 in fact, more close ties in those particular
17 establishments. I would just suggest at the moment
18 just, you know, just another issue the Agency is
19 working on, again, is we think that we, in fact, will
20 have the issues related to Listeria well under control
21 through the procedures we have in place through our
22 regulation, but that just deals with post-lethals,

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1 post-product. We do have a concern about product at
2 retail, which is an issue for which I know Jill has a
3 lot of concern about, where we're going to with that
4 particular program, but the issue becomes if, in fact,
5 getting back to this maintenance issue, if we think we
6 got things under control in the federal and state
7 plants is that the focus may need to switch to retail
8 if, in fact, public health benefits can be gained by
9 refocusing there. But there are a lot of drawbacks to
10 going to retail that have a program which you have to
11 take into account which is you first have to establish
12 that the problem is generated there as opposed to come
13 in with a product. And so -- but we have a FoodNet
14 project -- there's a -- there are certain FoodNet
15 states right now involved in a Listeria program that
16 we're monitoring at retail to see if, in fact, there's
17 better information we should be basing our public
18 health risk-based decisions on. And if so, if we made
19 a focused attention there with our risk based program
20 would that impact public health?

21 And if so, then that may shift our
22 resources to start looking there. But we would

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1 certainly want the data to support changing how we
2 view that first, but FoodNet is more directly tied to
3 the food because there's a more direct means to try to
4 get back at attribution.

5 MR. GOVRO: Mike Govro, in case we're
6 still on the record. It seems like regardless of what
7 we do try to focus the sampling into the correct
8 places, what's really going to drive it or should
9 drive it in the future to a large extent is going to
10 be sampling history and regardless of what category
11 somebody falls in, if they fall into a category over
12 here that says, "Gee, we don't need to sample these
13 guys very much?", but nevertheless in the limited
14 amount of time, limited number of times that you do
15 sample them, that they're positive every time, I would
16 think that they would then fall into a different
17 category.

18 DR. ENGELJOHN: Yeah, Mike, I think that's
19 a really good point is -- and again, I do think we
20 should give credit to the plants particularly if they
21 have data to support what they're doing and we have
22 our own historical data to rely upon. I think what

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1 that gets at is another level of the Agency looking at
2 how the plant has designed their program. If the
3 program by the plant is designed to find low level
4 contamination with high confidence, that's
5 distinguished differently than a plant that may just
6 be testing once a quarter or once a month, just
7 because, not really designed to find the problem.
8 There should be credit given to that and there are
9 means to verify that that is, in fact, working.

10 But I would also point out that just so
11 you know in the current E. Coli 157-87 program, the
12 Agency had made the decision about the fact that if a
13 retail grinder is only grinding product that comes
14 from the federal plant, that presents a different risk
15 scenario than a grinder who grinds in store trim and
16 that that should be a consideration as well, so that
17 if there's the opportunity to test it in the federal
18 plants, that's one consideration about do we test on
19 down the line. I think also one thing that should be
20 considered and as you suggest is, how frequently has
21 those suppliers been tested and if they haven't been
22 tested in awhile, then maybe there should be tests

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1 done intermediary. So those are the kind of things
2 that we're certainly looking into when we design this
3 program, to take all those things into account.

4 DR. WENTHER: I would think the more data
5 you get the longer you continue with the sampling
6 program, the better you're going to get at going after
7 the ones where you're likely to see a problem.

8 DR. ENGELJOHN: Yeah, well, that's one of
9 the reasons why with the Listeria program right now
10 and I know Jill in particular asked this question
11 earlier and the answer was confusing that I gave, but
12 we do intend to have a discernible difference in the
13 frequency in Alternative 3 versus Alternative 2 versus
14 Alternative 1 plans. And right now, there is a
15 distinction between those three alternatives but all
16 three are being sampled at a very high rate.

17 Ultimately, that will likely change such
18 that it will be allocated to the highest risk but all
19 of this historical data we're generating now for
20 Alternative 1 and Alternative 2 plans will be
21 captured, which we wouldn't get otherwise if we only
22 tested them infrequently. So we think there's a

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1 benefit right now to have the high level of frequency
2 in all three categories even though it's at different
3 levels as a historical basis.

4 DR. WENTHER: When you're talking about
5 the risk and everything and you're talking about small
6 meat processors, I find it very difficult to put my
7 hands around the fact that these small meat processors
8 are making 50 different types of meat products, two of
9 which fall into the high risk categories of either
10 frankfurters or deli products and then we have all the
11 rest of them that are in there, when you talk about
12 how many times you sample, is that ever going to take
13 into consideration because we'll never get out of all
14 Alternative 3 because some of the options aren't
15 available to them to get into Alternative 2. Take for
16 example, scrapple in Pennsylvania. You can't have
17 approval without tasting it. Most people are saying
18 they don't want to because it changes this and that.
19 They've always got excuses and reasons.

20 If then never get out of Alternative 3 and
21 they make 50 different products and all of them except
22 for two or three are in Alternative 3, is there still

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1 going to be that same frequency or --

2 DR. ENGELJOHN: Well, maybe I'm not
3 understanding the question as fully as I need to but
4 if all the products -- a number of those products all
5 fit within -- they're Alternative 3 but they support
6 growth, and we would consider all those to be --
7 that's -- when we pull a sample, all those fit within
8 that, so it's not like each one of those products has
9 an opportunity to be scheduled separately. It's part
10 of the process and by alternative. Does that get at
11 the issue?

12 DR. WENTHER: Yeah, I'm just trying --
13 when we filled out that reports, when the reports came
14 through and they've got products in every category,
15 some of them do and it's difficult to find out -- they
16 think they're going to get sampled less because
17 they've got two products in Alternative 3 and all the
18 rest of them are Alternative 2. I just wonder how
19 that all calculates out. I assume it's extremely
20 difficult for you. You just send out a memo and say,
21 ?This product needs to be tested?.

22 DR. ENGELJOHN: Yeah, well, ultimately the

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1 goal will be is if there are ways to discern that the
2 alternative to product, any of it, doesn't get cross-
3 contaminated with those from Alternative 3, then we
4 would look at them as entirely separate entities.

5 DR. WENTHER: Right.

6 (Whereupon, at 5:08 p.m. the above
7 entitled matter concluded.)
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