



Washtenaw County Environmental Health

Food (Safety) for Thought



Winter 2010

48 Million Illnesses Caused by Food Each Year in US

The Centers for Disease Control and Prevention (CDC) has published new estimates of the number of foodborne illnesses. The study estimates that **48 million people, or about 1 out of every 6 people in the United States, gets a foodborne illness each year.** This number is lower than the previous estimate of 76 million illnesses, published in 1999. It is important to note that the new number doesn't reflect improved safety in the food supply, but rather an improved method in calculating the number of cases.

These new calculations estimate that foodborne illness is also responsible for 128,000 hospitalizations and 3,000 deaths each year in the United States.

Of the diagnosed foodborne illnesses, Norovirus accounts for the majority, 58% or 5.5 million illnesses. The rest of the diagnosed illnesses, about 3.9 million cases, are caused by bacteria, such as Salmonella and E. coli, and parasites like Toxoplasmosis. Salmonella comes in second among diagnosed infections, causing 1 million illnesses each year, or about 11% of the total. Clostridium perfringens causes 10% of the illnesses and Campylobacter causes 9%.

Salmonella lead the hospitalization rates with 35%, followed by Norovirus at 26% and Campylobacter at 15%.

Estimates of the total number of foodborne illness can be difficult because only a small percentage of these illnesses are laboratory confirmed or reported to the local health department. Other factors making the estimate challenging are the age and immunity of the individual, as well as the various types of food contamination (bacteria, virus, chemical, physical).

The study estimated that many of the foodborne illnesses, about 38.4 million, are caused by what researchers have called "unspecified agents." That includes pathogens for which there is little data and those that have not yet been discovered. It also includes known pathogens that may not be recognized as being transmitted in food. This unspecified agent group also includes non-infectious agents such as mushroom toxins, marine toxins, and metal poisoning.

Although the number of illnesses by unspecified agents sounds high, several causes of foodborne illness, such as Campylobacter and E. coli O157 were only discovered in recent decades.

For the full articles, go to: www.cdc.gov/eid

Study says restaurant workers go to work sick

Restaurant Opportunities Center United released a report that shows that more than half of the workers surveyed go to work even when they are sick.

This report is drawn from analysis of 4,323 surveys of restaurant workers nationwide - the largest national survey sample of restaurant workers ever conducted.

More than 63% of all restaurant workers reported cooking and serving food while sick, thus impacting consumers' health. Some of the comments from the study included the lack of paid sick days, need for wages, and employer pressure on coming in to work when sick.

Over 11% of the employees surveyed in this study are from Michigan.

Please take time during your next staff meeting to share this information with your staff and managers. Managers must understand that employees can not work with food if they are experiencing uncontrolled sneezing, coughing, a sore throat with a fever, vomiting or diarrhea.

For the full article, which includes additional information on health and safety statistics, go to: [http://www.rocunited.org/files/roc_servingwhilesick_v06%20\(1\).pdf](http://www.rocunited.org/files/roc_servingwhilesick_v06%20(1).pdf)

Study Shows Restaurant Wiping Cloths Contaminated

A study by England's Health Protection Agency (HPA) showed that **56% of the wiping cloths used in restaurants had unacceptable levels of bacteria.**

Researchers with the HPA sampled 133 wiping cloths in 120 restaurants in England. The most common bacteria found were enterobacteriaceae (found on 86 cloths), *E coli* (21), *Staphylococcus aureus* (six) and listeria (five).

Dr John Piggott, lead author of the study, said: "Although many disinfected their cloths using bleach or other disinfectants, soaking does not remove the food on which the bacteria grow. The disinfectant qualities of bleach wear off after a period of time... We have had certain outbreaks of food poisoning at a restaurant where we have isolated salmonella from the person who has eaten the meal and we have found salmonella on the cloth in the kitchen as well."

In this study, only a third of restaurant kitchens (32%) were following the recommendation to use disposable cloths and change them regularly. The ma-

ajority had reusable cloths. Also, in 15% of the kitchens, staff were unsure how often the reusable cloths were replaced.

To limit cross contamination, areas for preparing raw meats should be separate from areas for preparing ready to eat foods, and likewise have their wiping cloths separated. However, in this study, researchers found 24 cloths that had been used in both areas.

This underscores the importance of not only changing the wiping cloth disinfectant solutions frequently, but also changing out and laundering the wiping cloths frequently. Better practices are to use disposable wiping cloths, but these still must be used properly.

For more information on this study, go to: www.hpa.org.uk/NewsCentre/NationalPressReleases/2010PressReleases/100915dirtondishcloths

New Database to Search for Foodborne Illness Outbreaks

Marler Clark, the Seattle-based group known for being the nation's leading law firm for victims of foodborne illness, has launched a **free online database that tracks outbreaks of foodborne illness.**

The database is pulling together data from state and local health departments, as well as the Centers for Disease Control and Prevention (CDC) and other publications that track outbreaks.

The CDC defines an outbreak as "two or more ill persons linked to a common source," and this serves as the basis of the database. To be included in the database, the outbreak must have supporting documentation from public health agencies, journal arti-

cles, media reports, etc. Names of stores, brands, restaurants, or other sources are listed if they have been publicly identified previously.

The cases date back to 1984. The database is a work in progress, and the website allows for user feedback and comments.

The database can be found at <http://outbreakdatabase.com> and can be searched by food item, organism, date, and state.

Improper Glove Use Can Increase Food Safety Problems

Gloves create a warm, moist environment against the hands and can be a great place for microbial growth. If gloves are not changed often and hands are not thoroughly washed between glove changes, these microbes can spread to food and other surfaces. Also, tiny tears and holes in gloves can allow these micro-organisms to get out and contaminate foods, equipment and utensils. In fact, the longer gloves are worn by an employee, the more likely their effectiveness as a food safety barrier will be compromised.

Another interesting point is that not all gloves are created equal. Vinyl gloves are more prone to tears than latex gloves. Additionally, a study by the Journal of Food Protection states that **people wearing gloves may engage in "riskier" food safety behavior because they feel the gloves provide a sense of safety.**

For more information, go to: www.foodsafetynews.com/2010/10/glove-use-doesnt-necessarily-mean-safer-food

Foodborne Illness Risk Factors Still Found on Inspections

In 2008, the U.S. Food and Drug Administration's (FDA) National Retail Food Team conducted the third phase of a three-phase, 10 year study to measure the occurrence of practices and behaviors commonly identified by the Centers for Disease Control and Prevention (CDC) as contributing factors in foodborne illness outbreaks. Inspections were done at a variety of establishment types at 5-year intervals to observe and document practices and behaviors that relate to five categories associated with foodborne illness outbreaks within foodservice and retail food establishments. The 5 foodborne illness risk factors are:

- Food from Unsafe Sources
- Poor Personal Hygiene
- Inadequate Cooking
- Improper Holding/Time and Temperature
- Contaminated Equipment/Protection from Contamination

For fast food restaurants, the foodborne illness risk factors most in need of attention and their corresponding Out of Compliance percentages are as follows:

- Improper Holding/Time and Temperature (38.2%)
- Other/Chemical (31.4%)
- Poor Personal Hygiene (24.2%)
- Contaminated Equipment/Protection from Contamination (17.4%)

For full service restaurants, the foodborne illness risk factors most in need of attention and their Out of Compliance percentages are as follows:

- Improper Holding/Time and Temperature (54.7%)
- Poor Personal Hygiene (40.9%)
- Contaminated Equipment/Protection from Contamination (35.0%)
- Other/Chemical (25.2%)
- Inadequate Cooking (15.4%)
- Food from Unsafe Sources (12.0%)

Another interesting point that the study made is that **Full Service Restaurants with a certified manager had a 70% compliance rate with the 5 foodborne illness risk factors, but those without one had a 58% compliance rate.**

The full study is available here:

<http://www.fda.gov/Food/FoodSafety/RetailFoodProtection/FoodborneIllnessandRiskFactorReduction/RetailFoodRiskFactorStudies/ucm224321.htm>

5 Foodborne Illness Risk Factors

- Food from Unsafe Sources
- Poor Personal Hygiene
- Inadequate Cooking
- Improper Holding/Time and Temperature
- Contaminated Equipment/Protection from Contamination

45% of Restaurant Workers Smoke Cigarettes

The Substance Abuse and Mental Health Services Administration published a study in 2009 detailing smoking rates among different occupational categories. Among the 22 major occupational categories surveyed, **the highest rates of past month cigarette use among full-time workers aged 18 to 64 were found in the food preparation and serving-related occupations (44.7%).**

Although the health impacts of this smoking rate among this population are concerning, there are also some food safety considerations.

Smoking can contaminate hands and proper hand washing must occur prior to returning to work. If employees are not properly washing their hands,

they can contaminate foods, silverware, glassware and other items with the bacteria from their mouths.

Additionally, with Michigan's Smoke Free Workplace Law, all employees must go outside to smoke, and smoke away from entry ways to restaurants.

Please take the time to discuss proper hand washing after an employee takes any kind of break, including a smoking break, and to remind them to smoke only in designated outdoor areas.

For the full study, go to: <http://oas.samhsa.gov/2k9/170/170Occupation.cfm>

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World Class Service

Washtenaw County Environmental Health's mission is to enhance the safety of food, water, air and surroundings through education, regulation and advocacy in partnership with a knowledgeable industry and informed public. We provide regulatory oversight of food service establishments in accordance with state and federal mandates, investigate consumer complaints related to food service establishments, including complaints of foodborne illness, and continually strive to increase availability of food safety information to both the industry and public.

If you have a suggestion for a topic in a future edition of this newsletter, please [email us](#) and let us know!

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ServSafe Certification

Food safety training is a commitment, a mindset and a smart business practice for every restaurant and food service operation. ServSafe is a training program that can provide resources to help keep food safety an essential ingredient in every meal.



This 16-hour certification program provides food managers with thorough training in all areas of food safety relevant to a food service establishment. Upon successful completion of an exam, managers will receive a certificate verifying that they are a certified ServSafe Food Protection Manager.

ServSafe was developed by the National Restaurant Association. It is taught by Michigan State University Extension staff at Washtenaw County's Western Service Center in partnership with Washtenaw County Environmental Health. The course is taught each month as a 16-hour program. The fee for the course is \$210, which includes a course book and test. Upcoming course dates include:

- **January 20 & 27, 2011**
- **February 22 & 24, 2011**
- **March 22 & 29, 2011**
- **April 12 & 14, 2011**
- **May 11 & 18, 2011**

A \$25 late fee will be applied to all registrations not received 14 business days prior to class start date. A ServSafe Manager Certification is valid for 5 years, and meets the new Michigan Food Law Requirement of having a certified manager.

To register for a ServSafe course, go online at: <http://web2.canr.msu.edu/servsafe> or call Jan Seitz at (517) 788-4292 for more information. When calling, please state you are interested in a Washtenaw County ServSafe course.