



## *Quality Food Analysis, Consultation & Training Services, LLC*

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### December 2007: Influenza and Food Handlers

With the flu season (usually between November and May) way in the United States, we must begin taking a closer look at employee health. As we've discussed in an earlier article, employee health is a major risk factor in causing foodborne illness. When is your employee too sick to work? How do you know when to send them home?

The Federal Food Code provides a list of owner/manager responsibilities to minimize the risk of foodborne illness that can occur because of a sick employee. One of the responsibilities of the responsible person, or Person-In-Charge (PIC), is making sure that all of their food employees report certain symptoms and illnesses to the local health department and take necessary action to minimize the risk to getting other workers and customers ill.

The illnesses and symptoms are categorized into several risk levels based on the severity of the risk for illness. This risk based approach allows PICs to determine the appropriate level of employee exclusion and restriction when handling food. The approach strikes a balance between protecting public health and the needs of the food employee and employer.

#### Risk Level 1:

Risk Level 1 is associated with symptoms and diagnoses that are reportable to the local health department and require the exclusion of staff from the facility. Employees with risk level 1 symptoms include sore throat with a fever, lesions containing pus, vomiting, diarrhea, or jaundice. These symptoms need to be reported to the local health department because they are commonly associated with pathogens that cause foodborne illness from employees contaminating the food. Jaundice is caused by high levels of a chemical known as bilirubin in the blood. Bilirubin is what makes the color of feces brown, but when there is a defect in the liver, the liver is unable to remove the bilirubin from the blood and causes a yellowish staining of the skin and the whites of the eyes.

A diagnosed illness includes Norovirus, Salmonella Typhimurium, Hepatitis A, Enterohemorrhagic or Shiga Toxin-producing Escherichia Coli, or Shigella spp.

When an employee is categorized in Risk Level 1, the PIC should exclude the employee from the facility until the physician identifies that the employee does not have an infectious disease, or if the employee is free of the infection. Please contact your local health department or talk to your health inspector about how you should report these illnesses and symptoms.

#### Risk Level 2:

When an employee is diagnosed with one of the Risk Level 1 illnesses, is not showing symptoms of disease because they have recovered from the illness and are no longer infectious, they are in Risk Level 2. This is different from an employee who has been diagnosed with a specific illness of concern,

but is asymptomatic . As long as a physician has stated that the illness is resolved and is no longer infectious, the employee can safely return to work.

#### Risk Level 3:

Risk Level 3 is associated with employees who are diagnosed with one of the Risk Level 1 illnesses, but never develop any gastrointestinal symptoms. This does not apply to Salmonella typhi and Hepatitis A. Both Salmonella typhi and Hepatitis A can be transmitted even if the carrier is asymptomatic so even though they are not showing any gastrointestinal symptoms, they are in Risk Level 1.

#### Risk Level 4:

Risk Level 4 is when an employee may have been exposed to a pathogen, but are currently well and are within the normal incubation period of disease. Please note that the incubation period of Hepatitis A is anywhere between 10 to 60 days and oversight will need to continue for that time period. In some cases, immunizations and other preventative measures may be necessary.

Depending on the risk level, the type of intervention varies, with risk level 1 being the most stringent. Risk level 2 and 3 usually restrict the employee to work that does not come in contact with food or food contact surfaces. Observation and monitoring of the employee may be all that needs to be done with an employee in the Risk level 4 category.

An employee health operational manual based on the FDA Food Code would be an important step towards minimizing foodborne illnesses associated with ill employees.

For further information concerning the use of Employee Health Decision Trees and Tables see <http://www.cfsan.fda.gov/~dms/fc05-toc.html>.

Five minutes a day of staff training would make all the difference. Why don't you try various methods to incorporate training into your work day? If you have any questions regarding sanitation or food safety, or require additional information regarding staff training, please feel free to e-mail us.