World Café: Food Safety Interventions

Workshop Summary Report

CIPHI ON Annual Educational Conference, October 2011

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Introduction

The National Collaborating Centre for Environmental Health (NCCEH) conducted an interactive workshop with approximately 35 participants at the Canadian Institute of Public Health Inspectors - Ontario Branch (CIPHI ON) Annual Conference, October 2011. The purpose of this workshop was to share information and perspectives relevant to food safety in food service establishments.

The workshop began with a short introduction about the NCCEH, its evidence review documents, and the NCCEH food safety project exploring the effectiveness of food safety interventions. The workshop focused on restaurant disclosure systems; programs that inform members of the public regarding results of food safety inspections. In small groups, workshop participants explored four initial discussion questions:

1. What are the objectives of a restaurant disclosure program?
2. What are the benefits of a restaurant disclosure system?
3. What are the challenges to restaurant disclosure?
4. How can we measure the impacts of a disclosure system?

Hannah Moffatt, NCCEH Knowledge Translation Scientist, presented the preliminary findings of a process that explores the effectiveness of restaurant disclosure programs; describing a methodology and the evidence for public policy assessment.[1] There are four major types of disclosure programs: local health unit disclosure, online disclosure, media disclosure, and on-site food premise disclosure. The literature search found no evidence available on the effectiveness of local health unit disclosure and online disclosure programs. Findings, from the only study on media disclosure and seven of eight studies for on-site disclosure, demonstrate improvements in hygiene compliance. On-site disclosure programs in Toronto and Los Angeles may be associated with reduction in food-borne illnesses and increases in consumer confidence in restaurant safety, but several limitations exist. The evaluation of disclosure programs is often

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[1] See National Collaborating Centre for Healthy Public Policy. Retrieved on October 13th 2011 from: http://www.ncchpp.ca/172/Publications.ccnpps?id_article=536

difficult as the indicators used to define program success are limited and other interventions, often implemented at the same time, can mask the effect of the disclosure program.

Ron de Burger, Director of Healthy Environments at Toronto Public Health, described how the Toronto DineSafe program arose in the early 2000s, following the Greater Toronto Area amalgamation and negative publicity about food safety programming. At the time, there was little research available about *best practices* for food safety interventions. The DineSafe program was created in consultation with numerous stakeholders. It has been evaluated using indicators from inspection reports, rates of reported food-borne illness, and opinions from restaurant owners/operators and members of the public. In 2011 Toronto Public Health was awarded the *Samuel J. Crumbine Consumer Protection Award* for demonstrated excellence in food protection.

Ray Copes, Director of Environmental and Occupational Health at Public Health Ontario, presented the challenges related to our understanding of the extent of foodborne illness and the limitations of available evidence and literature. Ray asked participants for feedback regarding key research gaps for evidence-informed decision-making for food safety programs in Ontario and the potential role Public Health Ontario can play when working with local health units across the province.

Small groups explored five questions about evidence-informed decision-making for food safety interventions:

1. What are the criteria for food safety programming *success*?
2. What type of indicators/data are health authorities currently collecting? What information does the industry collect?
3. What data format (e.g., paper, excel databases) is currently available? (Is historical data available? In what format?)
4. How are indicator data currently being used? How could we improve use of monitoring and evaluation indicators?
5. How can we facilitate data sharing, analysis, research, and evaluation?

The ideas discussed during this workshop are summarized in this document.

Challenges and Benefits of Disclosure Programs

Workshop participants described a number of potential benefits of restaurant disclosure systems, including:

- Increase in public access of information about restaurant inspections;
- Increase in public awareness of food safety;
- Increase in awareness of the role of Public Health Inspectors;
- Increase in restaurant owner/operator motivation for restaurant inspection compliance;
- Decrease in food-borne illness.

However, participants described a number of challenges to disclosure systems, including:

- Regional and jurisdictional differences in inspections and disclosure programs protocols (e.g., inclusion criteria, rating systems, and display information) can create confusion among consumers and members of the food industry (particularly for regions that are geographically close and food chain restaurants located in various jurisdictions).
- Local public health units (particularly in rural regions) may have to work with numerous local governments, delaying the creation, adoption, and implementation of a disclosure system.
- There is limited experience and information about the implementation of disclosure systems in rural areas. There is speculation that disclosure systems may have negative impacts in rural communities, due to the tight network of relationships and fewer options for consumers.
- Inspections may be subjective as Public Health Inspectors utilize their judgement, potentially introducing greater bias due to pressure from restaurant owners/operators for improved scores.
- The public may misinterpret information available in disclosure systems.
- Online disclosure programs may not be accessible to everyone.

Food Safety Programming: Local and Provincial Roles

Workshop participants discussed a potential role for the Ministry of Health and Long-Term Care to provide provincial direction and legislation to introduce food safety programming that is consistent across the province. General feeling among some participants was that, while many systems were created by local health units originally, the system would now benefit from regional leadership to improve provincial consistency. Further, health units that create their own programs may spend resources *re-inventing the wheel*. Participants from the food industry described challenges that result from various food safety programs across jurisdictions (e.g., regulatory differences in chains located in different jurisdictions). However, the drawback of provincial leadership is the loss of local autonomy, particularly given the diversity of local health units across Ontario. Food safety programs implemented locally are more flexible to account for local context of resources and health unit organization.

Data Collection and Analysis: Local and Provincial Roles

Participants noted that a lot of data and information about food safety programming was currently available. Examples of types of indicators and data include: frequency and types of inspections; food handler compliance rates; food handler risk behaviors; number of food handlers trained; number of food handler courses taught; number of website visits (re: online disclosure systems); feedback from public and restaurant owner/operators; illness reports from the Integrated Public Health Information System (iPHIS). Inspection reports and indicators are available in a number of formats, including: relational database management systems (e.g.,

Microsoft Access), computer program tracking systems (e.g., Computerized Inspection Surveillance System (CISS), and Computerized Reporting Inspection System Program (CRIP)); some inspection reports are available in paper format). Additionally, reported food-borne illness outbreaks are generally rare events – thus, there may be an opportunity to further investigate the *misses* and *near misses* that happen in local contexts.

In depth analysis and cross-comparison of the available information was described as challenging, as different jurisdictions use different language, protocols, and databases. One suggestion was for Public Health Ontario to play a role in making recommendations for common datasets and common use of language. Furthermore, data extraction and analysis can be quite costly for local health units. Suggestions were made for increased collaboration with research organizations[2] and university and college partners to fund local projects and cross-data synthesis.

Opportunities and Conclusions

Participants noted that members of the public generally expect very high standards from the food service industry. Meeting these expectations requires public engagement and understanding in food safety issues. One suggestion was that disclosure systems may provide an opportunity to increase public awareness and engagement. Workshop participants identified some priority needs related to consistent guidance for programming, licensing, and best practices for food safety interventions. Participants also suggested further collaboration to improve available evidence and data synthesis. The general indication from participants was that there were opportunities to improve food safety programming within Ontario. Workshop participants suggested a need for further discussion.

This document is a summary of ideas generated in the workshop and does not necessarily reflect the views of each individual participant. Specific reference to organizations, legislation, and guidelines pertain mainly to Ontario.

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[2] For example, the Population Health Intervention Research Network website (www.phirnet.ca) provides opportunities for research and practice collaborations.