

New Jersey Mentorship Participants

Cumberland County Health Department (NJ)

Background

State: New Jersey

LHD Population Size Served: 157,000

Number of Retail Food Establishments Inspected: 700 - 800

Retail Program Standards Met/Working On: Self-Assessment, Met 7 and working on 2 and 4

Enrolled in the Retail Program Standards: 2016

NACCHO Mentorship Program Cohort(s): 6 and 7

Cumberland County Health Department (CCHD) is dedicated to the promotion, protection and improvement of the communities that we serve.

Cumberland's Retail Food Regulatory Program consists of 6 REHS including a Chief & 2 Senior REHS. Four staff currently working in the food program are standardized in NJ for Risk Based Retail Food Inspections where focus is placed on foodborne illness risk factors, interventions and application of the HACPP principles. The standardized staff perform routine compliance inspections of all risk types and mobile facilities at least 1 time per year, schools are inspected 2 times per year, re-inspections are conducted as required based upon the facility compliance status, administrative hearings are conducted for repetitive violators of identified risk factors, court summons are issued and court proceedings are attended for violators who do not return to compliance or maintain regular compliance, complaint investigations are conducted upon receipt of citizen complaints, basic food safety educational courses are offered to the regulated retail food industry, Food Manager Certification trainings are hosted to provide local, accessible courses to Risk 3 facilities to assist them in meeting compliance with the certification requirements of NJ. Senior staff reviews all food applications received for new, altered and mobile food facilities in addition to event coordinator applications for all events taking place within our jurisdiction. Senior staff, alongside the Chief REHS, participate in the recently formed Retail Food Advisory Committee for improved community relations between the industry, regulators and the community & the Southern Region Mobile Task Force group which was formed in 2011 to address mobile food vendors crossing jurisdictional lines, to provide consistency amongst the southern region and streamline the regulatory process for those mobile food vendors traversing our jurisdictional boundaries.

Cumberland's regulated industry consists of all risk type (1-4) retail food facilities including annual, seasonal, temporary, fixed, catering, mobile, indoor and outdoor establishments. They regulate approximately 700 facilities annually and 100 vending machines including restaurants, schools, daycares, nursing homes, churches, grocery stores, delis, markets, bakeries, bars, concession stands, snack bars, ice cream stands, mobile vendors, etc.

Cumberland has not yet adopted the FDA Food Code but operate under the NJ Administrative Code, NJAC 8:24, Sanitation in Retail Food Establishments and Food and Beverage Vending Machines using the established NJ Risk Based Inspection form.

Administrative Hearings are conducted using the NJ Risk Control Plan to demonstrate a clear understanding of the process and violations observed and to address the critical hazards through agreeable corrective actions. The Chief REHS also meets biannually with other Certified Food Specialist and the NJDOH.

Role in Mentorship Program

Cumberland County Health Department participated in the NACCHO Retail Program Standards Mentorship Program as a mentee in the sixth and seventh cohort. Vineland Health Department (NJ) mentored CCHD conducting a self-assessment and Standard 7. Fairfax County Health Department, (VA) mentored CCHD on Standards 2, 4, 7, and 9.

Lessons Learned/Tips

- A lot of time and effort goes into program assessment and improvement; to be successful, it takes a team approach
- Sharing information is key; the mentorship program is a valuable and essential component of the program;
- The structure and applicability of these Standards can apply to any program beyond Retail Food which provides a bonus to participating.

Contact

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Englewood Health Department (NJ)

Background

State: New Jersey

HD Population Size Served: 27,605

Number of Retail Food Establishments Inspected: 279 year Round, and approximately 80 seasonal establishments.

Retail Program Standards Met/Working On: 2, 3, 5, 7 and Self- Assessments

Enrolled in the Retail Program Standards: 2014

NACCHO Mentorship Program Cohort(s): 4, 5, 6

The Mission of the Englewood Health Department is to protect and enhance the health of the people of Englewood. The Department accomplishes this mission by: Viable partnerships with organizations and individuals; addressing issues that affect the health of Englewood residents; Responding to critical health issues and disasters; and Promote access and availability of health services.

There are two full time Registered Environmental Health Specialist (REHS) who are responsible for the regulation of the retail Food program that serves a community population of approximately 27,605 people. The EHD Retail Food Program involves the inspection of 279 retail food establishments including mobile food trucks, vending machines. Temporary food events (Farmers Market, carnivals, picnics, concessions, & church socials) are additional inspections which are performed throughout the year.

Regulatory enforcement is sited in accordance with the New Jersey State Sanitary Code for Food Establishments, Chapter 24 and the Revised Health Code of the City of Englewood, NJ 2003 Chapter 13 Retail Food Service Establishments. Our program consists of inspections of each food service with major focus on providing education of our operators and their employees. The Food Handler's courses are taught by the REHS team, which are provided in both English and Spanish during each quarter of the year.

Role in Mentorship Program

Englewood participated in the NACCHO Retail Program Standards Mentorship Program as a mentee in the fourth, fifth, and sixth cohorts. In the fourth and fifth cohorts, Englewood was mentored by Vineland Health Department (NJ). In the sixth cohort, Englewood was mentored by Fairfax County Health Department (VA) on Standards 2, 3, and 5.

Lessons Learned/Tips

Our department has had the opportunity to develop a "Food Safety Council", where it serves as a think tank among food establishment managers and the health department. It is through this Council we have increased awareness of what the local food establishments need in terms of training education for their employees. We have now held several food handler and Certified Food Manager courses, but what makes this so impactful is that the local churches are now requesting for us to teach food safety. At one time there were no church members who were certified in food safety but now they are understanding the value in these classes.

For Standard 3 we were excited to perform the Risk- Based Assessments for all of our Licensed Retail Food Establishments. Our food establishments are now documented by risk category which determines the inspection frequency. We found this tool essential to our program because it will enable us to prioritize establishments that will require food safety education the most.

Contact

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Vineland Health Department (NJ)

Background

State: New Jersey

LHD Population Size Served: 60,000

Number of Retail Food Establishments Inspected: 450

Retail Program Standards Met/Working On: Met all 9 in 2012.

Enrolled in the Retail Program Standards: 2002

NACCHO Mentorship Program Cohort(s): 3, 4, 5, 6, 8, and 9

Version of Food Code: 2001

Background:

Mission: "Taking Care of Vineland!"

Our retail food protection program has the primary goal of reducing risk factors, thus reducing the potential for foodborne illness to occur. We approach this in many ways. One of our strongest tools is to teach 6-hour food safety classes at least 9-10 times a year in both English and Spanish. Our efforts also include annual food safety newsletters, food safety calendars, food handler manuals in both English and Spanish, industry recognition, and a website full of information, links and tutorials. Our inspectors' and Supervisors' primary roles are that of educators first, explaining the importance of controlling risk factors. Inspectors and Supervisors are well trained "out of the box" thinkers and can attack a difficult issue in a creative manner, when necessary. Most of the time, they succeed. When they don't, enforcement is applied, starting with the use of risk control plans. Through the use of Standard 9, we demonstrated a reduction in the occurrence of many risk factors since 2005. These include handwashing, bare hand contact, date marking, and cold holding (in most retail types). Unfortunately, cold holding in full-service restaurants went up in our last risk factor study in 2015, meaning we had to attack the problem in new ways. We conducted a SWOT analysis and created a formal 5-year strategic plan. Our next risk factor study is underway. We hope to see positive results in all categories and a true downward trend for most risk factors.

Role in Mentorship Program

Cohort 3: Vineland mentored Portland Public Health Division (ME) and City of Bethlehem Health Department (PA).

Cohort 4: They mentored Outagamie County (WI) Public Health, Alamosa County (CO) Public Health Department, and Englewood (NJ) Department of Health.

Cohort 5: Vineland mentored Chatham County Public Health Department (NC), Englewood (NJ) Department of Health, and North Shore Health Department (WI).

Cohort 6: Vineland mentored Cumberland County Health Department (NJ), Hoke County Health Department (NC), and Snohomish County (WA).

Cohort 8: Vineland mentored *Chatham Health District in Conn., Lincoln County Health Department in MO, Jefferson County Health Department in West Virginia, and West Hartford-Bloomfield Health District in Connecticut.*

Cohort 9: Mentored *Chatham Health District, Ct, Jefferson County Health Department, WV, and West Hartford-Bloomfield Health District, Ct*

Lessons Learned/Tips

- Mentors should provide an overview of all the Standards to mentees to help them start thinking about the Standards on the whole and about what pieces are missing in their program so they can develop a game plan.
- Don't assume that State Health Departments Standardize trainers per the FDA requirements.
- FDA manuals are your best friend as a mentor!
- Pandemics derail the best laid plans.

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