Iowa Department of Public Health, in conjunction with cooperative agreement work group members, established this document as a "model" environmental health program. Work group members were instructed to consider the program involved and format program activities into core functions and essential services. This document is the summation of that activity.

Food Safety Program

* The Iowa Department of Inspections and Appeals (DIA) has authority over the Food Safety Program in Iowa. The enabling legislation for this program is found in Iowa Code Section 137F.

* Additional rules are found in Iowa Administrative Code 481
  - Chapter 30 - Food and Consumer Safety
  - Chapter 31 - Food Establishment Inspections
  - Chapter 34 - Home Food Establishments
  - Chapter 35 - Contractor Requirements
  - Chapter 37 - Hotel and Motel Inspections

* Contact information DIA
  - Judy Harrison  Ph. 515-281-8587  jharrison@dia.state.ia.us
  - Bob Haxton  Ph. 515-281-6539  rhaxton@dia.state.ia.us

* Food safety inspections are a matter of public record.

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<tr>
<th>CORE FUNCTION/Essential Service</th>
<th>Model Program Activities</th>
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<td>ASSESSMENT/Monitor Health Status</td>
<td>• Track reportable diseases within designated area. Do this in conjunction with public health nursing and the Iowa Department of Public Health's (IDPH) Center for Acute Disease Epidemiology (CADE) office. There is a Friday update on epidemiology issues within Iowa that is emailed weekly from CADE. To receive it email a blank message to: <a href="mailto:join-epi@lists.ia.gov">join-epi@lists.ia.gov</a>.</td>
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<td>• Obtain cooperation with local</td>
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| ASSESSMENT/Diagnose and Investigate | Investigate reported disease outbreaks that may have a food origin. Use your resources (DIA, CADE, regional epidemiologists, Disease Prevention Specialists, Community Health Consultants, public health nursing, the local hospital, and the food establishment owner/manager).
| | Contact state epidemiology lab (1-800-421-4692) and DIA for assistance in collecting information and samples as needed. |
| ASSESSMENT/Evaluate effectiveness, accessibility, and quality. | Establish performance measures and evaluate the food inspection program based upon these potential measures: *number of inspections completed, *number of consultations or training provided, *number of critical violations, *number of repeated critical violations, *number of corrected critical violations, *reduction in number of foodborne illnesses, and *reduction in the number of complaints received and investigated. It will be necessary to establish a baseline.
| | Once every two years, a random number of food operators could be surveyed and tested as to their...
| POLICY DEVELOPMENT/Develop policies and plans. | • Develop a policy to address temporary and mobile food stands at public events (football games, fairs, concerts, etc.)
• Develop departmental policies for A) an enforcement program that addresses, when to close an establishment, when to conduct a reinspection, and what enforcement tools can be used; B) variance procedures; and C) food service equipment requirements (what types of floors, walls, and ceiling surfaces are approved, commercial vs. domestic refrigerators, commercial vs. domestic dishwashers, etc.). Development of these policies will provide greater consistency as well as serve as training guides for new environmental health practitioners. It is not necessarily important to write down everything in explicit detail, but it is important to write down the general process followed.
• Implement risk-based food inspections as resources allow.
• Assist and educate food establishments in reducing critical violations and eliminating repeat violations. Take the time during the inspection to answer any questions and try to provide educational materials "on the spot" as needed.
• Develop "penalty" system for repeat non-compliance requiring follow-up inspections. |
| --- | --- |
| POLICY DEVELOPMENT/Enforce laws and regulations. | • Conduct routine inspections and enforce the most recently adopted version of the FDA Food Code (currently 1997).
• Ensure correction of identified |
| POLICY DEVELOPMENT/Research new insights and innovative solutions. | • Implement the principles of HACCP into food inspection process.  
• Keep current on emerging technologies in the field of food prep, food safety, and sanitation. Utilize websites, educational conferences, etc.  
• Educate food operators on new technologies. Be aware of the needs of nonprofit organizations as well. |
| --- | --- |
| ASSURANCE/Link people to needed service. | • Provide ServSafe or other training to operators or ensure provision of that service. (Contact DIA or Iowa State University Extension Office.)  
• Maintain a list of contacts with other agencies, which may assist food operators. This list could include the Fire Marshall, local building, electrical and plumbing inspectors; local Americans with Disabilities Act coordinator; Iowa Department of Agriculture inspectors; Alcohol Commission contact; planning and zoning officials and landfill locations.  
• Provide/require food training of all food handlers and establishment workers. The turnover rate in food service is high be sure to recognize this in planning and facilitating sessions. |
## ASSURANCE

### Ensure a competent workforce.
- Devote program money to a training line item within the budget.
- Establish a mechanism of quality control for food inspectors (standardization). Standardization could occur through meetings, policy development and discussion, as well as "team" inspections where more than one inspector simultaneously evaluate an establishment and then compare notes.
- Establish a formal certification program based on HACCP, ServSafe, standardization, etc. for inspectors.
- Identify, promote, and attend food safety training opportunities.

### Inform, educate, and empower people
- Educate consumers about federal recalls. And/or inform consumers of food recall.
- Provide physicians, physician assistants and emergency room physicians’ information that describes similarities between food borne illness and other gastrointestinal diseases to raise their awareness of potential food borne related outbreaks.
- Release public service announcements to educate the public about safe food practices within the home and on proper food handling in food establishments. You could use: newspaper, radio, brochures, website, etc.
- Develop a guidance document on the disclosure of food inspection reports to the public. This may be helpful for new employees, education of the local board of health, and media members.
- Community marketing of food program at local home shows, fairs, farmers markets, etc. Perhaps you could collaborate with other community partners to have
| ASSURANCE/Mobilize community partnerships | • Coordinate with nonprofit organizations to ensure safe food production during fundraising events and when serving the public.  
• Coordinate with local school to ensure that food safety/hand washing is part of the curriculum.  
• Work with food banks and soup kitchens to define criteria to address the acceptance of donated food items.  
• Encourage family and consumer sciences classes to promote food safety during food safety month.  
• Provide job shadowing or internships with local schools.  
• Referral or collaboration with appropriate health-care providers. This could include work with dieticians and nutrition educators (Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Iowa State Extension, hospitals, long-term care, etc). |

• Educational materials available at their booth if it is cost-prohibitive to staff your own booth.  
• Educate the public to call the health department if they suspect a food borne illness. This education could appear in a brochure, newspaper, as a radio ad, or any number of ways. Always be sure to provide contact information.