



# EMPLOYEE HEALTH & HYGIENE

Wednesday, September 1 • 9:00-10:00am

# Focus: Employee Health & Hygiene

---

- **Key Principles of Employee Health**
  - Four levels of risk in the FDA Food Code
- **Requirements for Restriction, Exclusion, and Reporting**
  - Washington is different than FDA Food Code
- **Required Clean Up Plan**
  - It's not the same as kitchen sanitizing

# FDA Food Code: Employee Health Four Levels of Risk

---



## ● Risk Level 1

- Workers with **active symptoms** (diarrhea, vomiting, and jaundice) in the workplace
- Workers with **typhoid** fever or recent **hepatitis A** infection

## ● Risk Level 2

- Diagnosed with specific foodborne pathogens but **symptoms have resolved**

## ● Risk Level 3

- **Diagnosed** with specific foodborne pathogens but **never had symptoms**

## ● Risk Level 4

- **Clinically well, but exposed** and within normal incubation period of pathogen

# Person in Charge: Additional Duties

## WAC 246-215-02115

---

- (15) Notify employees of responsibility to report foodborne illnesses and symptoms in a **verifiable** manner.
  - WAC 246-215-02205 adds **Norovirus** and all species of ***Salmonella*** to the diagnosed foodborne illnesses for employees to report to the Person in Charge (with hepatitis A, *Shigella* spp., STEC, *Salmonella* Typhi)
- (16) Maintain and implement written procedures and plans (**such as clean-up plans for vomit and diarrhea**) to ensure **active managerial control**

# Food Worker Health: **Reporting to the PIC**

---

- **02200** Food workers (including conditional employees) must report to PIC about their health and activities that related to diseases transmissible through food.
  - Includes date of symptom onset, **diagnosis**, or **exposure**
  - Must be timely to allow the PIC to reduce the risk

# Food Worker Health -- Reporting **Symptoms** to the PIC

---

- **02205** Food workers must tell the PIC if they have
  - Symptoms
    - Diarrhea
    - Vomiting
    - Jaundice
  
- **02235** Food workers with symptoms may work without restriction if they submit written documentation from a health practitioner that the symptom is due to a condition not transmissible through food
  - Examples include:
    - Crohn's disease
    - Irritable bowel syndrome
    - Hepatitis C
    - Cancer
    - Pregnancy
  - Documentation may be submitted to either the Regulatory Authority **or PIC**

# Food Worker Health -- Reporting **Lesions** to the PIC

---

- **02205** Food workers tell the PIC if they have
  - a lesion containing pus such as a boil or infected wound that is open or draining and
    - On the hands or wrist
    - On exposed portions of the arms
    - On other parts of the body, unless the lesion is covered by a dry, durable, tight-fitting bandage

# Food Worker Health -- Reporting **Diagnosis** to the PIC

---

- **02220** Food workers must tell the PIC if they have
  - Diagnosed Illnesses
    - *Shigella*
    - *E. coli* (Shiga toxin-producing)
    - Hepatitis A
    - *Salmonella* (Typhi and **all other species “NTS”**)
    - **Norovirus**



# Food Worker Health -- Reporting **Exposure** to the PIC

---

- **02205** Food workers working in facilities serving **Highly Susceptible Populations** must report if they have
  - Consumed or prepared food implicated in a lab-confirmed foodborne disease outbreak
  - Attended or worked in a setting where there is a lab-confirmed foodborne disease outbreak
  - Live in the same household as someone who works at or attended a setting where there is a lab-confirmed foodborne disease outbreak
  - Live in the same household as or have consumed food prepared by a person who is infected or ill with
    - STEC
    - Shigella
    - Salmonella Typhi (note: not all *Salmonella* spp)
    - Hepatitis A virus or jaundice
    - **Norovirus**

# Food Worker Health: **Exclusion** of food workers

---

- **02220** The PIC must exclude (keep from entering the food establishment as an employee) food workers with
  - Symptoms
    - Diarrhea
    - Vomiting
    - Jaundice
    - Sore throat with fever (if working in HSP facility)
  - Diagnosed Illnesses
    - *Shigella*
    - *E. coli* (Shiga toxin-producing)
    - Hepatitis A
    - *Salmonella* (Typhi and **all other species “NTS”**)
    - **Norovirus**

# Food Worker Health: **Restriction** of food workers

---

- **02225** Food workers must be restricted from tasks(kept out of the kitchen and away from unwrapped food or clean utensils) if they have:
  - Symptoms
    - Inflamed lesion that cannot be covered
    - Sore throat with fever (unless as excluded in a HSP facility)
  - **Exposure** to foodborne pathogens through linkage to a confirmed foodborne outbreak or someone with a diagnosed foodborne illness (and work in a HSP facility)

# Foodborne Illness: **Removing from Exclusion/Restriction**

---

○ **02245 - 02255** Person in charge may remove food workers from restriction or exclusion as follows

○ **Symptoms**

- Diarrhea and vomiting: Asymptomatic for 24+ hours
- Jaundice: Approval of LHO **and regulatory authority**
- Sore throat with fever: When asymptomatic
- Infected wound or pus-filled boil: when covered (including a second barrier - single-use glove - if on hand or wrist)

○ **Diagnosis**

- Approval from the local health officer is required

○ **Exposure**

- With **approval from the LHO and regulatory authority**

# Foodborne Illness: **Reporting** to the Regulatory Authority

---

- **02215** Person in charge must report to the local health department (and the regulatory authority if different)
  - food workers that have:
    - Jaundice
    - Diagnosed illness
      - *Shigella*
      - *E. coli* (Shiga toxin-producing)
      - Hepatitis A
      - *Salmonella* (**all species**)
      - **Norovirus**
  - 08520 a potential foodborne illness incident

# Reminder: Aiding illness investigations

---

- **02230** PIC and all employees must cooperate with the regulatory authority and local health officer investigating suspected foodborne disease outbreaks
  - Includes a food employee suspected to be infected with a foodborne pathogen
- **02240** PIC and food employees must follow local health officer orders for excluding or restricting employees due to potential infection

# Written Clean-Up Plan for Vomit & Diarrhea

## WAC 246-215-02500

- Food establishment must have **written** procedures for employees to follow to clean up vomit and diarrheal events
  - Plan must address employees, consumers, food, and surfaces
  - As part of AMC, training must also be provided
- Requirement is intended to control potential Norovirus
  - Norovirus has a low infectious dose of 10-18 viral particles
  - Norovirus causes onset of explosive vomiting and diarrhea
    - Single vomiting incident can contaminate with 300,000 particles
    - Up to 1 trillion viral particles are shed per gram of feces
  - Norovirus can be airborne
  - Bathrooms have been identified as a major reservoir
    - Norovirus can survive on surfaces which may spread the virus

# Written Clean-Up Plan for Vomit & Diarrhea Procedures are Facility-Specific

- Procedures must minimize exposure to:
  - **Employees**
    - Workers that clean vomiting and diarrheal incidents are more likely to contract illness than those that do not
  - Plan should include
    - Procedures for how to segregate and clean the affected area
    - Personal protective equipment (such as gloves and mask)
    - How to clean outer garments (such as going home and changing clothes)
    - Observing symptoms of illness after cleanup (for at least 24 hours)



# Written Clean-Up Plan for Vomit & Diarrhea Procedures are Facility-Specific

- Procedures must minimize exposure to:
  - **Consumers**
    - Contaminated by direct or airborne exposure to an incident
  - Plan should include
    - Procedures to promptly remove ill individuals from area
    - Segregating area for access (recommendation is at least 25 feet around the area)

# Written Clean-Up Plan for Vomit & Diarrhea Procedures are Facility-Specific

- Procedures must minimize exposure to:
  - **Food**
    - Contaminated directly or indirectly
  - Plan should include
    - Procedures for the disposal of any food that may have been directly or indirectly exposed

# Written Clean-Up Plan for Vomit & Diarrhea Procedures are Facility-Specific

- Procedures must minimize exposure to:
  - **Surfaces**
    - Clean up of vomiting and fecal incidents must be handled differently from routine cleaning and sanitization procedures
    - Some sanitizers are not effective against Norovirus
    - Norovirus-laden materials should not be cleaned in the kitchen
  - Plan should include
    - Procedures for cleaning and disinfecting of contaminated surfaces (outdoor, carpeting, upholstery, etc)
    - Procedures for disposal or disinfection of tools/equipment used for cleanup
    - EPA-registered disinfectants indicating effectiveness for Norovirus to be used

# Food Safety Focus

---

- Employees can both prevent and be a source of foodborne illness
- Person in Charge must have Active Managerial Control over employee health and hygiene to reduce risk
- Vomiting and Diarrheal incidents can happen to you - Be prepared (it's required in March 2022)



Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov). TTY users dial 711.