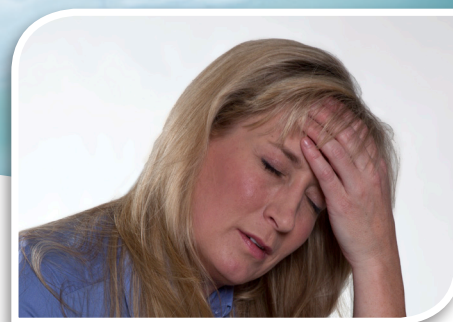


Employee Health *and* Personal Hygiene

for SCHOOL NUTRITION STAFF



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Institute of Child Nutrition

The University of Mississippi

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PURPOSE

Improve the operation of child nutrition programs through research, education and training, and information dissemination.

VISION

Lead the nation in providing research, education, and resources to promote excellence in child nutrition programs.

MISSION

Provide relevant research-based information and services that advance the continuous improvement of child nutrition programs.

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Employee Health and Personal Hygiene for School Nutrition Staff

The incidence of foodborne illness in school nutrition programs is very low because of the thorough food safety procedures practiced by school nutrition employees, but there are still risks. *This guide highlights basic practices school nutrition employees can use to prevent spreading pathogens.*

School nutrition managers, directors, or the person in charge (PIC), should be a certified food protection manager. The certified food protection manager needs to know where the Hazard Analysis Critical Control Point (HACCP) manual is located, understand how to monitor critical control points, and take corrective action when a critical limit is not met. The certified food protection manager needs to ensure Standard Operating Procedures (SOPs) are available and readily accessible to employees, especially for cleanup of vomit and diarrhea.

School Foodborne Illness Due to Poor Employee Practices

The following foodborne illness scenario highlights how a sick school nutrition employee can spread foodborne illness. A school nutrition employee spent the weekend suffering with vomiting and diarrhea, but feeling a little better, came to work the following Monday. Working with bare hands, she chopped the lettuce to be served for lunch. Dozens of students and teachers became ill the next day. The local health department investigation traced the illnesses to the food handled by the ill employee and implicated the employee as the source of the contamination.



Basics of Foodborne Illness

What causes foodborne illness?

Over 40 different kinds of pathogens, including bacteria, viruses, parasites, and molds that

may occur in food can cause foodborne illness. Foodborne illness can also be caused by non-infectious agents, such as chemicals, toxins, and metals. A foodborne illness is commonly referred to as “food poisoning” or “stomach flu.”

What is a foodborne illness outbreak?

An outbreak is when two or more people get the same illness from eating contaminated foods or drinking contaminated liquids from a common source.

Who is at risk for getting a foodborne illness?

Everyone is at risk for foodborne illness; however, some people are considered “highly susceptible populations” because they are:

- Immunocompromised – having an immune system that has been damaged by disease or medical treatment
- Preschool-age children
- Older adults
- Individuals confined to facilities that provide custodial care (such as hospitals or assisted-living facilities)



Do school nutrition employees have a responsibility to prevent foodborne illness?

Yes. School nutrition employees share the responsibility with school nutrition management for preventing foodborne illness and are required to know:

- How their job responsibilities relate to the potential risks of foodborne illness
- How employee health is related to foodborne illness
- Symptoms of foodborne illness
- When to report to the manager/director that they or a coworker is experiencing symptoms
- Why restriction or exclusion from working with food may be necessary to prevent foodborne illness
- How effective handwashing can prevent foodborne illness
- How eliminating bare hand contact with ready-to-eat food can prevent foodborne illnesses

Excluding or Restricting Ill School Nutrition Employees

What symptoms or conditions should school nutrition employees report to their supervisor?

The following symptoms or conditions should be reported:

- Diarrhea or vomiting
- Sore throat with a fever
- An infected cut or wound on hands or arms
- Jaundice (eyes or skin turns yellow)
- Diagnosis with a foodborne illness
- Exposure to a foodborne illness



What should managers/directors do once the symptoms are reported?

Depending on the symptom or diagnosis, the manager/director decides if the employee needs to immediately be “restricted” or “excluded” from duties to prevent foodborne illness.

What is *exclusion*?

Exclusion means a school nutrition employee is not permitted to work in or enter a food preparation site. This requirement applies to areas where food is received, prepared, stored, packaged, served, vended, transported, or purchased.

Most often, this means that the school nutrition employee may not work at all. Though this can result in some loss of income, it is very important that school nutrition employees with certain symptoms not work to prevent others from becoming ill.

What is *restriction*?

Restriction means a school nutrition employee’s activities are limited to prevent the risk of transmitting a disease that is spread through food. A restricted employee cannot handle exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles. Job duties for employees who are restricted may include working as a cashier, stocking packaged foods, or working in cleaning and maintenance tasks away from food preparation areas.



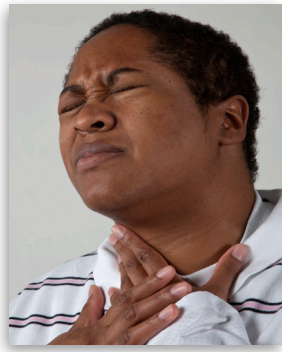
Who can *exclude* or *restrict* a school nutrition employee?

The school nutrition manager, director, and PIC have the authority to exclude or restrict a school nutrition employee from the school food preparation site to prevent the spread of illness through food. The local health department also has the authority to exclude or restrict a school nutrition employee who is suspected of being at risk for transmitting foodborne illness.

Who can lift the exclusions and restrictions?

In most cases, the school nutrition manager, director, and PIC remove, adjust, or retain the exclusion or restriction. In some cases, an approval from a health practitioner or the local health department is required to lift an exclusion or restriction depending on the illness.

For an infected cut or wound on hands, a waterproof cover such as a bandage, finger cot, or finger stall should be placed on the wrist, hand, or finger, and then a single-use glove placed over it. Bandages, finger cots, and finger stalls should be available to employees at all times.



4. Rinse thoroughly with clean, warm, running water.
5. Thoroughly dry hands and exposed portions of arms with single-use paper towels, a paper towel roll dispenser (pull-down, crank, or automatic), a heated-air hand drying device, or an air-knife system hand drying device.
6. Avoid recontamination of hands and arms by using a paper towel to turn off hand sink faucets and/or to open the restroom door.

Why is handwashing important?

Handwashing reduces contamination on hands and helps prevent it from passing to food. Microorganisms can get on hands from a number of sources, such as a dirty cutting board, a pencil, or a refrigerator handle, and then move from hands to food or equipment during preparation and service. An infected school nutrition employee or one with contaminated hands, exposed portions of arms, or dirty fingernails, can contaminate food and potentially cause illness. Food equipment contaminated by unclean hands can further spread illness through cross-contamination.



Effective Handwashing

What is effective handwashing?

Effective handwashing is cleaning hands and exposed arms by applying soap and warm water, rubbing them together vigorously, rinsing them with clean water, and drying them thoroughly. Handwashing is important to get rid of dirt and reduce germs that can cause illness.

The following steps are required for effective handwashing.

1. Use the handwashing sink with running, warm water.
2. Rinse hands under water and apply soap.
3. Lather hands together vigorously with friction for at least 10-15 seconds, paying close attention to fingernails, between the fingers/fingertips, and surfaces of the hands and arms, and surrogate prosthetic devices.



When should school nutrition employees wash their hands?

Hands should be washed immediately:

- When entering a food preparation area
- When changing tasks and switching between handling raw foods and working with ready-to-eat foods (to prevent cross-contamination)
- When hands become contaminated
- Before starting food preparation
- Before putting on new, single-use gloves to work with food and between glove changes

- Before handling clean equipment and serving utensils, and unwrapped single-use utensils
- After handling dirty dishes, equipment, or utensils
- After touching bare human body parts, for example, hair, face, or other exposed skin
- After using the toilet
- After coughing, sneezing, blowing the nose, eating, or drinking

Can hand sanitizers be used in place of adequate handwashing in food preparation areas?

No. Hand sanitizers do not take the place of adequate handwashing, and if used, should be applied only after proper handwashing.

No Bare Hand Contact with Ready-To-Eat Foods

Is it necessary to use single-use gloves when preparing food?

When hands are heavily contaminated, effective handwashing may not thoroughly remove microorganisms to guarantee food safety. The Food and Drug Administration (FDA) requires using utensils such as spatulas, tongs, or single-use gloves when handling ready-to-eat foods (i.e., food that is eaten without further washing or cooking). Single-use gloves used after handwashing can be an effective barrier to the transfer of microorganisms from hands to food. However, gloves are only effective in preventing contamination if used properly.

What are the instructions for properly wearing single-use gloves?

- Always wash hands before putting on gloves.
- Change single-use gloves when changing tasks and between handling raw products and ready-to-eat products.
- Do not wash or reuse single-use gloves.
- Replace torn or damaged single-use gloves.
- Cover an infected cut, boils with pus, or burns with a waterproof covering and a single-use glove.
- If doing the same task, change gloves every 4 hours.



Term Glossary

- Cross-contamination: the unintentional transfer of bacteria or viruses from one object to another; this can occur by hand-to-food, food-to-food, or equipment and food contact surfaces-to-food
- Exclude: to prevent an employee from entering or working in a school nutrition operation
- Hazard Analysis Critical Control Point (HACCP): a preventative food safety system in which every step in the manufacture, storage, and distribution of a food product is scientifically analyzed for microbiological, physical, and chemical hazards
- Health practitioner: a physician licensed to practice medicine, or if allowed by LAW, a nurse practitioner, physician assistant, or similar medical professional
- Microorganisms: small living organisms that can be seen only with the aid of a microscope; there are four types of microorganisms that can contaminate food and cause foodborne illness: bacteria, viruses, parasites, and fungi
- Person in charge (PIC): the individual present at the school who is responsible for the operation at the time of inspection
- Ready-to-eat (RTE) foods: foods eaten without further rinsing or cooking, such as cut fruits and vegetables, sandwiches, and cheese
- Restrict: to limit the activities of a school nutrition employee so that there is no risk of transmitting a disease that is transmissible through food; the school nutrition employee does not work with exposed food, clean equipment, utensils, linens, or unwrapped single-use utensils

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