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Protecting Retail Food Safety by Strengthening Partnerships and Collaboration

Editor's Note: The National Environmental Health Association (NEHA) strives to provide up-to-date and relevant information on environmental health and to build partnerships in the profession. In pursuit of these goals, NEHA features this column on environmental health services from the Centers for Disease Control and Prevention (CDC) in every issue of the *Journal*.

In these columns, authors from CDC's Water, Food, and Environmental Health Services Branch, as well as guest authors, will share tools, resources, and guidance for environmental health practitioners. The conclusions in these columns are those of the author(s) and do not necessarily represent the official position of CDC.

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I lead the Safe Food Section of the Division of Environmental Health Science and Practice within the Centers for Disease Control and Prevention (CDC). A primary goal of the section is to support retail food safety by identifying and promoting best practices for environmental health professionals to ultimately reduce foodborne illness in retail food establishments. As the CDC advisor to the Retail Food Safety Regulatory Association Collaborative (Collaborative), I would like to tell you a little about the Collaborative and why we at CDC are excited to participate in this innovative and promising project.

The Collaborative is a group of organizations working together to reduce foodborne illness associated with retail food establishments. In 2018, representatives from the Food and Drug Administration (FDA) began talks with leadership from the Association of Food and Drug Officials, Conference for Food Protection, National Association of County and City Health Officials, and National Environmental Health Association to initiate a collaborative effort to reduce foodborne illness associated with the retail sector in the U.S. In 2019, these organizations identified strategies to reduce foodborne illness and brought

CDC on board (Figure 1). In 2020, under an FDA cooperative agreement, the Collaborative began to execute its strategic plan.

The Collaborative is working toward meeting six main objectives to improve retail food safety nationally:

1. Develop a national strategy for adoption of the latest edition of the FDA *Food Code*.
2. Promote risk-based inspection and intervention strategies.
3. Increase enrollment and active participation in FDA's Voluntary National Retail Food Regulatory Program Standards.
4. Improve foodborne illness outbreak investigations.
5. Improve food safety management systems at retail food facilities.
6. Enhance effective communications and sharing of best practices among retail food protection partners.

CDC supports the Collaborative as it has the right organizations and the right priorities. CDC recognizes the importance of the organizations in the Collaborative to retail food safety and has worked with them on food safety projects over the years. The members of these organizations are typically on the front lines of retail food safety, conducting retail establishment inspections, food safety training, and foodborne illness outbreak investigations, as well as developing food safety regulations and guidance. As such, they have the commitment, expertise, and experience to succeed, and are therefore best positioned to meaningfully improve retail food safety.

The key to the Collaborative is that these organizations are working together. Although these organizations often have similar food

FIGURE 1

List of Organizations Along With the Centers for Disease Control and Prevention That Comprise the Retail Food Safety Regulatory Association Collaborative



safety goals, there has never before been a concerted working effort to achieve these goals. The Collaborative allows each organization to leverage its expertise and resources to focus on priorities that will significantly improve retail food safety.

CDC also recognizes the importance of the Collaborative's priorities. The Collaborative supports the FDA (2021) New Era of Smarter Food Safety Blueprint. Success in meeting

these priorities will lead to improved food safety. CDC has engaged in several activities that support these priorities.

- For almost 25 years, CDC has supported national adoption of the FDA *Food Code*. In 1997, David Satcher, director of CDC, stated that the "Nation's frontline of defense against the growing, evolving threat of foodborne disease and illness is the uniform, nationwide application of

this food safety guidance and regulation based on the best-available science that is embodied in the 1997 *Food Code*" (Food and Drug Administration, 2015). CDC research has strengthened the evidence on the importance of the *Food Code* to food safety; Kambhampati et al. (2016) found that states that had adopted specific provisions of the *Food Code*, compared to states that had not, had lower foodborne illness outbreak rates.

- CDC has a long history of supporting foodborne outbreak investigations. CDC has funded surveillance and investigation activities in all 50 states and has produced reports of foodborne outbreak investigations conducted by local and state health departments since 1938 (Centers for Disease Control and Prevention [CDC], 2019). CDC understands the value of outbreak investigations. In the short-term, they can help stop the outbreak and prevent more people from getting sick; in the long-term, investigation data provide valuable insights into the agents and foods that cause illness. Recently, CDC has focused on collecting data on the environmental causes of outbreaks—the factors that contributed to the outbreak and the events that led up to the occurrence of those factors. These data are key to outbreak prevention. CDC has developed free, comprehensive training on this component of outbreak investigations (CDC, 2021).
- CDC research supports strong food safety management systems. CDC has conducted several studies on retail food safety best practices. CDC has found that components of a strong food safety management system—procedures, training, and monitoring—are linked with better food safety outcomes (Brown, 2021). For example, restaurants with cleaning procedures had norovirus outbreaks with fewer sick people when compared with restaurants that did not have cleaning procedures (Hoover et al., 2020). Restaurants with food safety trained and certified managers had fewer violations on their inspections compared with restaurants that did not have trained and certified managers (Cates et al., 2009). Furthermore, Schaffner et al. (2015) found that restaurants that monitored cooling food temperatures more often held cooling food at appropriate temperatures com-

TABLE 1

Food Safety Research From the Centers for Disease Control and Prevention

Restaurant Situation	Outcome	Source	Learn More
Cleaning procedures	Smaller norovirus outbreaks	Hoover et al., 2020	www.cdc.gov/nceh/ehs/nears/norovirus-outbreaks-restaurant-practices.html
Managers trained and certified in food safety	Fewer violations on their inspections	Cates et al., 2009	www.cdc.gov/nceh/ehs/ehsnet/plain_language/kitchen-manager-certification-and-food-safety.htm
Procedures for monitoring food during cooling	Food cooled at appropriate temperatures more often	Schaffner et al., 2015	www.cdc.gov/nceh/ehs/ehsnet/plain_language/food-cooling-improvements.html

pared with restaurants that did not monitor cooling food temperatures (Table 1).

CDC is excited to support the collective effort of the Collaborative. CDC’s work has shown the value of the Collaborative’s priorities in retail food safety and its focus on these priorities will significantly advance retail food safety in the U.S. For more information on the Collaborative, visit www.retailfood-safetycollaborative.org.

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