

April 7, 2023

**Subcommittee on Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Committee on Appropriations
Washington, DC**

RE: Testimony Submitted to the Subcommittee on Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Regarding Fiscal Year 2024 Appropriation for the Food and Drug Administration

The National Environmental Health Association (NEHA) represents almost 7,000 environmental health professionals throughout the U.S. and around the world. NEHA is the profession’s strongest advocate for excellence in the practice of environmental health. Our mission is the advancement of the environmental health professional and we serve to provide quality training, continuing education, and credentialing to our members and environmental health professionals.

As the committee reviews the fiscal year 2024 (FY 2024) budget, we would like to emphasize the following:

Program Name	FY 2023	FY 2024 Request
Food and Drug Administration Food Safety Program	\$1,519 million	\$1,730 million
Federal and State Initiative	\$120 million	\$150 million
New Era of Smarter Food Safety	\$3.5 million	\$40.5 million
Integrated Food Safety System	\$115.6 million	\$128 million

The U.S. Food Safety System

The U.S. has one of the safest, if not the safest, retail and manufactured food systems in the world. The rate of foodborne disease in our nation, however, remains too high. The U.S. food industry is worth approximately \$1.5 trillion, accounting for one-fifth of the U.S. economy. FDA oversees 78% of the U.S. human food supply.

The programs highlighted above support efforts of the Food and Drug Administration (FDA) to provide resources to state, local, tribal, and territorial (SLTT) food safety programs that protect this nation’s food safety system through inspection, education, and enforcement.



Foodborne illness outbreaks can originate from any stage in the food production line. Restaurants are the most reported location of food preparation associated with outbreaks, accounting for 64% of the outbreaks for which a single location of preparation was reported; most of such outbreaks (48%) occur in sit-down establishments.

NEHA would like to highlight three points regarding this nation's food safety system:

Food Safety Is Performed by State, Local, Tribal, and Territorial Agencies.

The numerous federal agencies regulating foods (primarily FDA) rely on their SLTT counterparts to implement their food safety programs. There are 70 state agencies alone that apply the FDA *Food Code*—mainly through their departments of agriculture, health, or environment—to protect the public from adverse food incidents. There are over 3,500 local health departments with food safety authorities, several tribal jurisdictions with delegated authority from their states and the federal government, and U.S. territories that have food safety responsibilities.

SLTT programs implement the requirements of FDA food safety programs. The vast majority of food safety inspections, both retail and manufacturing, are performed by SLTT inspectors. The majority of enforcement actions occur by SLTT agencies, under SLTT authorities.

FDA's Retail Flexible Funding Model (RFFM) provides the resources that SLTT food agencies need to meet the requirements of the Retail Food Standards and the *Food Code*, and has been very beneficial to the jurisdictions that have accepted the funding.

Food safety will only succeed if SLTT agencies are well-funded through programs like the RFFM and provided with resources necessary to implement and administer food safety measures.

The FDA Uniform Food Safety System promotes public health.

National uniform adherence with FDA retail food regulation best practices—such as the FDA *Food Code* and Voluntary National Retail Food Regulatory Program Standards (Retail Program Standards)—decrease the occurrence of foodborne illness outbreaks. The FDA Federal and State Initiative and Integrated Food Safety System promote a uniform food safety system.

The Retail Program Standards provide a clear set of evidence-based guidelines for self-assessment and continuous improvement of regulatory agency programs and processes. SLTT enrollment with the Retail Program Standards aids in the reduction of foodborne illness incidence by providing standardized training, program evaluation, and technical support for SLTT jurisdictions.

Adoption of the FDA *Food Code* prevents foodborne illness. The FDA *Food Code* advances known practices for preventing foodborne illness. The code promotes the best advice from FDA to address the safety and protection of food offered at retail food and food service industries. FDA's purpose in maintaining an updated *Food Code* is to assist SLTT jurisdictions by providing them



with a scientifically sound, technical, and legal basis for regulating the retail segment of the food industry.

The Retail Food Safety Association Collaborative, a cooperative agreement funded by FDA, promotes the adoption of the *Food Code*.

There are more than 3,500 SLTT government agencies that have the primary responsibility of regulating retail food and food service industries in the U.S., all of which follow some version of the *Food Code*. These agencies regulate food service operations in restaurants, retail food stores, food vendors, schools, hospitals, assisted-living facilities, nursing homes, and childcare centers.

Conformance with the *Food Code* and Retail Program Standards encourages STLL jurisdictions to follow a standardized set of guidelines for food safety that are known to lower the incidence of foodborne outbreaks.

A strong, qualified environmental health workforce is necessary to meet the public health mandate around food and human food needs.

Trained and credentialed personnel within SLTT food safety programs prevent adverse foodborne health outcomes through ensuring human food remains healthy and nutritious. This workforce is vital in FDA meeting its human food objectives.

Credentialed personnel within SLTT food safety programs improve the health and quality of life of people living in their communities. Their services prevent adverse health outcomes. FDA needs to improve its ability to recruit, hire and retain personnel with the skills necessary to meet its objectives, both at the federal and STLL levels.

According to the Reagan-Udall report on human foods, FDA should move to a stronger, more cooperative relationship with states and other local authorities. Approximately half of the human food inspections are done by states through contracts and cooperative agreements, accounting for over 13,190 human food inspections in FY22. Funding for a strong, qualified SLTT workforce through FDA's Federal and State Initiative, the Integrated Food Safety System, and the Retail Flexible Funding Model is imperative in meeting FDA's goal of meeting public health mandate around food safety.



Food safety is a critical public health issue that affects individuals and communities across the U.S. and around the world.

We look forward to working with Congress and FDA in funding a system that improves the nation's food safety system.

In health,



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