

FoodSafety INSIGHTS

SPECIAL ADVERTISING SUPPLEMENT

Making Foodservice Safer

September 2008

6 ways to build
rapport with your
health department

Online ServSafe
gaining ground



● typhoid fever ● E. coli
● hepatitis A ● norovirus
● shigellosis

Staff Infections?

What you don't see can put your
customers and business at risk

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Every day, new products and innovative solutions are introduced and embraced by foodservice operators to help enhance food safety. Some are small steps that incrementally improve safety, while others are dramatic new systems designed to rewrite the rules with food safety in mind. All are positive, proactive steps that you can adapt to your own operations. Here's a look at some strategies taken recently by industry leaders. We welcome questions and comments – and your own unique food safety solutions – at www.foodsafetyinsights.com.

1

- ▶▶▶ **Pasteurization makes shell eggs safe. Panera Bread** is serving grilled breakfast sandwiches in its bakery-cafes that are made with fresh-baked Ciabatta and freshly cracked eggs. How do they dare? These shell eggs are pasteurized, a process that kills pathogens such as *Salmonella* and enhances safety. Panera's three Ciabatta egg sandwiches safely and deliciously fill customer demand for a hot, portable breakfast.

2

- ▶▶▶ **Clean the table and toss the wipe. P.F. Chang's China Bistro** has standardized use of disposable cleaning and sanitizing wipes for dining room tables throughout its 180 locations. The disposable wipes reduce food safety risks and create a better impression with guests than do multi-use cloth rags or towels.

3

- ▶▶▶ **Natural sanitizer replaces some chemicals.** At **The Flamingo** in Las Vegas, traditional chemicals have been replaced with an on-site system that produces a natural, food-safe solution created onsite by combining salt, water and electricity. The pH-neutral solution is effective at killing pathogens and spoilage organisms. The Flamingo is using the system for rinsing fresh produce and sanitizing food-contact surfaces.

4

- ▶▶▶ **Colored gloves send critical signal.** The challenge of getting employees to limit their use of disposable gloves to a single purpose has been met by **Buffalo Wild Wings**. Yellow gloves for employees who handle raw chicken are in use at many BWW units. This vivid signal reduces the risk of cross-contamination.

5

- ▶▶▶ **Gluten-free menus ensure safety for allergic customers. Outback Steakhouse** has introduced an extensive gluten-free menu. Gluten is responsible for Celiac disease and is among the most prevalent food allergies. Diners with gluten intolerance can order and eat with confidence at this forward-thinking chain.

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FoodSafety INSIGHTS

Making Foodservice Safer

September 2008

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How Would You Like Your Eggs? Safe.

Give patrons what they want, but do it safely

Consumers are enjoying more eggs and on more occasions, thanks in large part to foodservice operators' quality standards and their culinary creativity beyond the traditional breakfast menu. In fact, eggs today are consumed at an average rate of 250 per American per year, or 80 billion annually.

While the vast majority of eggs are safe, an estimated 4 million may reach the market with risk of infection. Undercooked eggs, in particular, can carry the risk of *Salmonella*. The Centers for Disease Control and Prevention (CDC), Atlanta, reports that raw or undercooked eggs are responsible for approximately 118,000 cases of *Salmonella* annually. Some cases lead to severe and even fatal illness, especially among children, elderly and other with weakened immune systems.

Customers want eggs their way

Public information campaigns, including notices on foodservice menus regarding the risks associated with undercooked eggs, have gone a long way to educate consumers about egg safety. Nonetheless, many continue to prefer and order their favorite egg dishes lightly cooked. A 2007 national survey conducted by TNS Research found that while 70% of Americans believe the best way to eliminate the risk of *Salmonella* is to thoroughly cook eggs, more than half (57%) say they eat eggs prepared in styles that are not thoroughly cooked, such as sunny side up and over easy. The same survey shows how respondents indicate their consuming undercooked eggs:

| | |
|---------------------|-----|
| Over easy..... | 35% |
| Sunny-side up | 25% |
| Over medium | 12% |
| Eggs Benedict | 11% |
| Poached | 10% |
| Soft-boiled..... | 10% |

Risks are also being taken when raw shell eggs are used to prepare foods such as Caesar salad dressing, Hollanda-

ise sauce, mayonnaise, ice cream and eggnog, which are not thoroughly cooked.

Bottom line: Customers love eggs and want them the way they like them, which in many cases is less than thoroughly cooked. Menus with warnings about the risks of undercooked foods are a step in the right direction. But many foodservice operators have learned the hard way about "strict liability." Foodborne illnesses and resulting litigation against operators have become common, to say nothing about endangering customers' health.

The USDA and FDA regulations and inspections dramatically reduce the risk of infected eggs reaching the market. However, some eggs still do carry *Salmonella*, so it's important for foodservice operators to take responsibility for protecting customers' health. When it comes to serving eggs, there are solutions that are under your immediate

control, including:

1. Use "processed egg products," which are eggs removed from their shells, available in liquid, frozen and dried forms, to replace whole shell eggs where practical. These products are pasteurized in USDA-inspected plants and carry the USDA-inspected mark. Visit www.fsis.usda.gov/factsheets/egg_products_and_food_safety/index.asp for more information on processed egg products.

2. Use "pasteurized shell eggs" for freshly cracked or in-the-shell serving occasions. These are relatively new on the market and are processed using FDA- and USDA-approved pasteurization technology.

3. Monitor for strict adherence to a HACCP management plan and absolute compliance by food handlers with cross-contamination prevention practices. And capitalize on training resources such as the American Egg Board (www.aeb.org/foodservice) and the National Restaurant Association Educational Foundation's ServSafe program (www.servsafe.com).

Eggs are a golden opportunity to create new menu appeals, enhance recipes and satisfy growing consumer demand to have their eggs their way – safely.

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▶▶▶ Staff Infections?

What you don't see can put your customers and business at risk



Food handling by infected employees was found to be the No. 1 cause of confirmed foodborne illness outbreaks in a recent study.

It's 11:45 a.m. and the lunch rush is hitting. You're short staffed, but it's a good crew and they should be able to handle it. At 11:50, your line chef, who looked peaked when he punched in, ducks into the restroom for a few minutes and comes out looking even worse – but gamely puts his apron back on and jumps behind the line. At best, it's a hangover that he's trying to shake off so he doesn't lose the hours. At worst, it's a virus or bacterial infection that may be passed on through every piece of food he's handling, putting your customers – and your business – at risk.

Scenes like this play out every day in foodservice establishments across the country, putting managers and employees alike in the position of having to take “active managerial control” to minimize the risk of outbreaks related to sick employees. Indeed, incidents directly related to ill employees are many and disturbing and for children, elderly and other patrons with compromised immune systems they can be life-threatening. A study by the Environmental Health Specialists Network (EHS-Net) (<http://www.cdc.gov/nceh/ehs/EHSNet/>) to identify how and why foodborne illness outbreaks occur in foodservice settings, found that food handling by infected employees was the most common contributing factor (65%) for confirmed outbreaks.

A few cases in point in recent years:

- At a national chain unit in Michigan, employees infected with norovirus sickened at least 364 customers. Of 32 employees interviewed by health department officials following the outbreak, 17 admitted to having worked while sick and 12 said they became ill after working the same day that a line cook had vomited in the kitchen while on duty.
- An infected bartender reportedly exposed customers to hepatitis A through ice served in drinks at a casual dining chain restaurant in Illinois last January. A subsequent class action suit alleged that all customers who were at the restaurant over an 11-day period were put at risk, and the Illinois public health network vaccinated some 1,700 people.
- In March of this year, a kitchen worker at a Hicksville, N.Y., pizzeria was found to have contracted typhoid fever and worked until symptoms became acute, putting more than 100 customers at risk for the potentially deadly bacterial infection.
- In January, a bartender in New York's West Village was found to be infected with hepatitis A. The city's health department urged the 700 to 800 patrons who visited during the time the worker was on duty to get vaccinations as a precautionary measure.

What to look for

Ailments that employees bring to work are many and diverse and monitoring them is no easy task. Some infected workers show no or few symptoms. Others mask symptoms out of a sense

of responsibility to their employers and co-workers or to avoid losing income where no sick leave is provided. Not every case is a cause for alarm, but health officials have identified five infections that management must be on the lookout for and address through mandatory exclusion-from-work policies. Each can be easily transmitted by employees through food, ice or eating surfaces that have come in contact with infected workers' hands. They're identified in a 2005 supplement to the FDA's Food Code, which spells out what to look for and what responses are required. (For more information and specifics, check out <http://www.cfsan.fda.gov/~dms/fc05-sup.html>.) In general, however, critical symptoms are evidence or reports of vomiting, diarrhea and/or jaundice (yellowing of the skin and eyes).

Staff training and aggressive employee health policies help minimize risks.

The specific infections that such symptoms flag include:

Norovirus. The most commonly transmitted illness in foodservice settings, norovirus is an extremely contagious gastrointestinal virus (often incorrectly called the stomach flu) found in the feces and/or vomit of people carrying the virus. It is spread when infected food handlers touch food with bare hands that carry traces of the virus and when contaminated work surfaces aren't properly sanitized. In the EHS-Net study, norovirus accounted for fully 42% of all outbreaks.

Shigellosis. A highly contagious bacterial disease also passed by hands or surfaces contaminated with infected fecal matter. *Shigella* bacteria cause diarrhea (often bloody), abdominal cramping and fever. It is commonly referred to as dysentery.

***E. coli* 0157:H7.** Evidenced by vomiting, abdominal cramping and/or diarrhea, *E. coli* has most often been associated with consuming undercooked ground beef, but also with contaminated fresh produce, as in last year's spinach-related outbreaks. An employee who suffers from symptoms of *E. coli* can easily pass them along to customers through hand-to-food or hand-to-eating-surface contact.

Typhoid fever. A bacterial infection characterized by diarrhea, systemic disease and a rash, Typhoid is most commonly caused by the bacteria *Salmonella typhi*, which are spread by contaminated food, drink or water. Early symptoms include fever, malaise and abdominal pain. As the disease progresses, the fever becomes higher,

►► Get it in Writing: Health Policy Pointers

diarrhea worsens, weakness and fatigue become profound, and delirium may set in. People can become carriers and continue to shed the bacteria in their feces for years after infection.

Hepatitis A. Common symptoms include general weakness, nausea, vomiting and jaundice. An infected person may not show symptoms for weeks, however, but still be very infectious. In the United States, hepatitis A has shown regional concentration, being most prevalent in western and southwestern states. Some operators, particularly large-volume casinos and hotels, require employees to provide proof of hepatitis A vaccination and may offer or require vaccinations to their employees to prevent outbreaks.

How to prevent the spread

The Food Code details actions for managers to take in the event that employees are diagnosed with or show symptoms of these infections. In general, in cases involving diarrhea and vomiting, they must be excluded from work until at least 24 hours after symptoms have gone away or provide written clearance from a doctor. Should symptoms develop while at work, a manager should be told immediately what those symptoms are – i.e., “not feeling well” isn’t good enough. They need to know specifically if the employee has vomited and/or has diarrhea. Employees showing signs of jaundice must get a doctor’s okay before being allowed to return to work. (Note: Return-to-work policies may differ by jurisdiction, so check with your local regulatory agency.)

The Code also notes additional steps that can be taken to reduce risks of employee-related foodborne illness, the most important of which is hand washing. **In virtually every case, proper, thorough hand washing helps safeguard against the transmission of disease by infected employees.** Minimizing bare-hand contact with ready-to-eat foods through the use of gloves, tongs or other utensils is also critical.

Supporting all of these individual tactics must be a culture of food safety awareness nurtured by management, with strong emphasis on educating and training employees and front-line supervisors to be part of the solution. “I’ve been in restaurants and have seen a sick employee come to a manager, report he has diarrhea and doesn’t feel well, and heard the manager say, ‘Gee, I really need you to stay at least through lunch.’ That’s frightening,” notes David Ludwig, division manager for environmental health in Maricopa County, Ariz. “Employees need to know what gets people sick and why, and they need to understand that if the operation has an outbreak because they work while sick, it’s not just them being out and missing a day’s pay, the operation could suffer huge losses and possibly close down, putting everyone out of a job.”



FDA urges every food-service operation to develop and implement an employee health policy. Here are examples of what regulatory officials

look for in policies relating to taking “active managerial control” of sick or infected employees:

1. Does the establishment have an employee health policy? If so, is it in writing and readily available, are employees aware of it and required to sign off on their understanding of and commitment to adhere to the policy?
2. Are employees and managers required to report certain illnesses, conditions, symptoms and exposures, and are the reporting requirements explained to all employees? Operators are encouraged have all employees sign a *Food Employee Reporting Agreement*, included in the Code, acknowledging their responsibility to report key symptoms and illnesses, to go/stay home when such symptoms are present and to practice good hygiene.
3. If an employee reports a diagnosis with one of the five listed pathogens in the Food Code, what questions are asked of him or her?
4. Who does the establishment notify when a food employee reports a diagnosis with one of the listed pathogens?
5. What symptoms would require exclusion of a food employee from the food establishment and what criteria are used to allow the employee to return to work?

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ServSafe Online A Hit With Managers

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The unit shift leader is sitting at the assistant manager's computer before her shift. As she stares at the screen, voices come from the speaker followed by a series of beeps and blips. She pumps a fist in victory and says, "Yes! I got it." Is she squeezing in a quick computer game before work? In a way, yes, but it's a deadly serious one. She is taking the ServSafe® Online course and has just passed one of the interactive quizzes.

Like hundreds of managers today, this shift leader has opted to take the Internet-based ServSafe course now offered by the National Restaurant Association Educational Foundation (NRAEF). ServSafe classroom training has been around since the 1970s and the online option was added in 2004. Operators are now discovering it's a real life saver in terms of time, money and impact.

The flow of the online course and its content are consistent with the ServSafe Essentials classroom version. The NRAEF describes it as an "anytime, anywhere food safety training option." Students may take the course at work or at home, and at their own pace.

Online lessons are presented in short videos demonstrating the food safety topics. Each video is followed by an interactive exercise. (Visit servsafe.com/FoodSafety/solutions/options/online/ to see a demo.) For instance, in the "Time and Temperature Control" section of The Flow of Food: An Introduction, the student learns the upper and lower ranges of the temperature danger zone in which microorganisms can breed and compro-

mise the food. (The range is 41° to 135° F.) On the next screen, he or she is asked to click on the lower temperature. If the selection is correct, the voiceover repeats the lesson. If not, a buzzer sounds and the student may try again. Scores are recorded and available for review at the end.

At the end of the training, the student has the option to take the final exam with pencil and paper or online. Written exams require attendance at a testing facility. Online exams are secured and proctored by the American National Standards Institute-Conference for Food Protection. Passing the exam rewards the student with the ServSafe Food Protection Managers Certification.

A number of leading chains have initiated online training for their managers. Most have worked with the NRAEF to tailor the content to their operations.

Burger King Program is a Win-Win-Win

Cost, ease and availability are key benefits of online ServSafe training at **Burger King Corp.**, according to Krista Stafford, director of global training programs and systems. She reports that the chain has saved millions of dollars by not having to send instructors across the U.S. for classroom training. "Crisscrossing the country is expensive and inefficient," she explains.

Burger King requires all of its leaders to be ServSafe certified, including assistant managers shift leaders. Stafford says that initially the company didn't know how the online program would be accepted. "The numbers shifted almost immediately, however," she says. To date, of the 13,000 exams taken, 75% were taken online at an 87% passing rate. The total is expected to reach 90% in the near future. The program will also be offered globally when it is available in more languages. It's currently available in English and Spanish.

Savings from online training have been reallocated by Burger King to educate managers in other leadership areas, from cash management to interviewing techniques. Stafford says the new program is a triple win: for franchisees, for employees and for the company.

ServSafe is Program of Choice for Sodexo USA

Brian Turner, senior manager of food safety information services, quality assurance and safety at **Sodexo USA**, says online training has been offered for more than a year as part of Sodexo University. Managers have a choice between online and classroom, but anyone who has direct oversight of employees is required to take the course in one form or the other. So far, 670 managers have completed the online version.

The training is designed to be Sodexo-specific and is linked in

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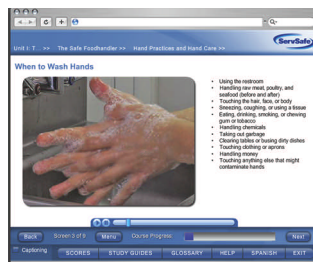
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▶▶▶ ServSafe Continued



the system to company policies and procedures such as temperature logs, product quality assurance or a list of approved vendors.

Turner says that dollar savings were one impetus for offering online training. He explains that taking the course on a computer is a cultural change and having an open-communications policy toward employees helps bring about change. "It takes some people a while to get out of the usual groove," he notes, adding that tech-savvy younger employees are very comfortable with Internet-based learning.

Chick-Fil-A Training is Customized

Dr. Hal King, manager of food and product safety at Atlanta-based **Chick-Fil-A**, worked closely with Alisha Gulden, director of market solutions at NRA Solutions, to customize the program to Chick-Fil-A's specific needs. Special emphasis was placed on the safe handling of chicken.

About 10% of Chick-Fil-A's 40,000 team members are managers and required to take the training program. King is pleased that the passing scores of the final exam are higher for Spanish-speaking managers since the training is available in their native language.

Like other training directors, King is also pleased with the savings attainable by using the online version. He estimates that the cost per trainee for an online course is about half that of the classroom version. In addition, he says, the online version saves time and cost of replacement labor while a student attends a training class off-site.

Other chains have joined the online bandwagon and are reaping the benefits. **SUBWAY**, for instance, added the online version to franchisees last year. ServSafe is included in the sandwich chain's Web-based training center, The University of Subway. Results are reported to be outstanding.

The growth of online food safety training comes at an opportune time. It allows cost savings in a challenging financial environment and provides a consistent, convenient format for training key managers in a time of increasing incidence of food-borne illness.

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▶▶ Online vs Classroom: Which is better?

With the rapid growth of Internet-based learning, a concern held by training directors is whether or not the results of online training are equal to those of the classroom version. The National Restaurant Association Educational Foundation (NRAEF) addressed this issue when it introduced ServSafe Online. The Foundation provided a grant to the Department of Food and Beverage Management of the William F. Harrah School of Hotel Administration, University of Nevada, Las Vegas, to study the effectiveness of online training.

The study compared the certification exam scores of both methods. Results showed that online training was equally effective in preparing students for the final exam. An executive summary states two key findings:

- After participants took ServSafe Online, the mean examination score exceeded 80%. Participants' average score increased by more than 22 points and was nearly six points higher than the score required to pass the exam.
- 81% of participants passed the ServSafe exam after taking the online course. This compares to 79% of all examinees who sat for the exam in 2005.

There are no downsides to implementing ServSafe Online and the upside gains are great. Students may take the course onsite or at home at their own pace. Results are equal to classroom learning. There is no disruption of schedule and the financial savings are significant.

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▶▶▶ Allies, Not Adversaries

6 ways to build rapport with your health department

Unannounced health department visits rattle even the most diligent, safety-oriented operators. That's especially true today, with new rating systems and online reporting that make inspection reports more easily accessible to consumers than ever before. A Web search for "restaurant health department inspections," for instance, turns up page after page of online county and state inspection results. And sites such as **healthinspections.com**, which posts reports from around the country and runs reality-TV-style videos of "amazing restaurant violations," underscore the need for operators to cooperate with, learn from and ultimately satisfy their health inspectors.

While many operators avoid contact with health officials, that's not the most productive route, according to public health experts. Viewing them as allies, not adversaries, and working proactively between inspections to build rapport is a better approach that can pay off for your operation and for the safety of your customers.

FSI queried three experts on how to build good health department relationships. They are James Budd, former director of public health in Atlantic City, N.J., and current partner in PrepCheck, a food safety/ risk management consulting firm; David Ludwig, division manager for environmental health in Maricopa County, Ariz.; and Pete Giesen, environmental health manager for the Olmsted County Public Health Department in Minnesota.

Together, they offer six key strategies:

1. Be Professional. Treat inspectors with professional courtesy and respect, never refuse an inspection and don't offer them food or beverages, which could be perceived as "bribes." If you disagree with an inspector's findings, ask for justification but don't be confrontational. If after an explanation you still feel the write-up is wrong, appeal it to the inspector's supervisor.

2. Be Prepared. Don't hesitate to call with questions or to report problems, but be prepared. "If you're calling about a piece of equipment, understand what you want to buy, how it will be installed and/or be able to explain what you've already done," Ludwig advises. "Likewise, if customers are reporting illness, we recommend calling the health office. But be ready to tell them how many calls you've gotten, what symptoms are being reported, what the food history is and if suspect food samples are available. Then ask them what they'd like you to do."

3. Know the Code. Following the FDA's Food Code (<http://vm.cfsan.fda.gov/~dms/foodcode.html>) is the surest route to positive inspections. Within the Code, pay special attention to operational risk factors. "We know that lapses in hand washing can cause norovirus or *Salmonella* outbreaks, for instance.



Taking a positive, proactive approach to working with health inspectors benefits your operation and your customers.

We know that inadequate cooking can spread *E. coli*. There's science to these risk factors and it's universally applicable," Giesen says. "When officials see a strong focus in these areas, their confidence in the whole operation rises."

4. Walk Along. Always walk along during an inspection. "Working off a written report is okay, but walking with them, asking questions and understanding what they're writing down and why is the best of all worlds," Ludwig says.

5. Follow Through. "If you commit to make repairs and they're not going to get done the way you said they would or within the time frame you agreed to, let the health department know why," Budd says. "You can't agree to something and then go off and change the materials, installation or timing and expect the health department not to react."

6. Tap Their Expertise. Most health departments will provide training and conduct scheduled "assessments" for training purposes. "We've asked the health department to provide targeted training," Budd says. "For example, we choose five or six areas the chefs and managers say they need help with. The officials make 10-minute presentations on each subject, plus time for Q&A. It builds a sense of community because employees can ask questions and share information in a non-threatening environment."

Building rapport with the health department won't guarantee you'll get great inspection scores – only safe practices and procedures can do that. But it will boost your confidence when the inspector comes to call because you're working together toward the same goal.

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Customers Crave Cleanliness!

When asked about factors influencing which restaurants they patronize, a 2007 HARRIS INTERACTIVE® SURVEY revealed that customers ranked restaurant cleanliness **second in importance only to food quality**.

96% Respondents feel that it's important for restaurant table tops to be **spotless**.

3:1 Respondents view disposable table cleaning wipes as being **more effective** than multi-use cotton towels.

55% Patrons would be **more likely** to choose to eat at a restaurant that used disposable table cleaning wipes.

