



# The State of the Plate

Spring 2007  
Volume 1 Issue 1

Rhode Island Food Safety Task Force, University of Rhode Island Cooperative Extension,  
3 East Alumni Avenue, Kingston, RI 02881

Web: <http://www.uri.edu/ce/ceec/foodsafety.shtml> E-mail: [foodsafes@etal.uri.edu](mailto:foodsafes@etal.uri.edu) Phone: 401-874-2960

## *Introduction*

*By Martha Smith Patnoad*

### INSIDE THIS ISSUE

- 1 [Introduction](#)
- 2 [Office of Food Protection Update](#)
- 3 [Spot the Violation](#)  
[Reporting Foodborne Illness](#)
- 4 [Spot the Violation Answer](#)
- 5 [Ask the Task Force](#)
- 6 [Professional Development Opportunities](#)
- 7 [Pathogen Page](#)
- 8 [Food Safe Schools](#)  
[Task Force Member Spotlight](#)
- 9 [Personal Hygiene Training Resources](#)  
[ALERT – Food Defense Training](#)
- 10 [Why Do I Have to do That? \(Handwashing\)](#)
- 11 [Food Safety Information Survey](#)
- 12 [Task Force Members and Newsletter Contributors](#)

Welcome to the first issue of the Rhode Island Food Safety Task Force's Newsletter, *The State of the Plate*. The Task Force plans to publish four issues each year. The purpose of the newsletter is to provide food safety information to consumers, food service and food safety professionals and educators. In order to help us to provide the kinds of information that you would find useful, we ask you to take a few minutes to complete our survey. This may be done on-line at <http://www.surveymonkey.com/s.asp?u=905453030670> or completed on [page 11](#) and mailed to the Task Force.

This issue contains what we hope will become regular features including: an update from the Office of Food Protection; professional improvement opportunities; spot the violation; an article on a specific microorganism and an "Ask the Task Force" question and answer column. The "Q and A" column provides an opportunity to ask questions of food safety regulators and educators.

The Rhode Island Food Safety Task Force was formed in the early 1990's with the goal to reduce the risk of foodborne illness. Since 2000 The Food and Drug Administration has provided funding to support the Task Force. The Task Force is an informal network of state regulatory agencies, academia, community based agencies and industry. Over the years, task force activities have included an annual conference, which many of you may have attended. One of the most successful activities of the Task Force has been the sharing of ideas and the joint educational outreach activities that have resulted from the connections made during Task Force meetings.

If you are interested in becoming involved with the task force, please call me at 874-2960 or email me at [mpatnoad@uri.edu](mailto:mpatnoad@uri.edu).

Best regards,

Martha Smith Patnoad, MS, CFSP  
URI CE Professor, Food Safety Education Specialist  
Department of Nutrition and Food Sciences  
Coordinator, Rhode Island Food Safety Task Force

## Office of Food Protection Update

By Ernest Julian and Susan Wallace

### Status of Foodborne Illness Outbreaks in RI

Two viruses that can be transmitted by foodservice workers have recently been in the news. Over 20 nursing homes and schools have reported Norovirus-type illness in the last several months. Also, a foodservice worker employed at two RI restaurants tested positive for Hepatitis A. Excluding ill food workers is key to preventing the transmission of illness via food. This is the responsibility of both management and the employees. Good personal hygiene, especially thorough handwashing, is a measure everyone can take to prevent the spread of illness. It is also important to remember that bare hand contact of ready-to-eat foods is prohibited. Appropriate utensils such as single use gloves or deli tissue should be used to handle ready-to-eat foods.

### Manager Certified in Food Safety Required Before Obtaining a Food Establishment License.

As of January 1, 2007, all new food businesses that require a manager certified in food safety must have one employed before opening for business. Knowledge of foodborne disease prevention, application of the Hazard Analysis and Critical Control Point principles and the Food Code requirements are essential to the preparation and service of safe food to the public.

### New RI Food Code coming in September 2007

The Health Department's timeline for adaptation of the FDA 2005 Model Food Code is September 1, 2007. The adaptation of the FDA 2005 Food Code will help provide consistency and uniformity in Rhode Island between the application of regulations by the Health Department and the information provided in manager certification programs. The significant changes between the RI 1994 and the revised RI Food Code include the following:

- Addition of Norovirus as a reportable illness.
- Exclusion of food employees symptomatic with vomiting and diarrhea from working in any food establishment regardless of whether the population served is highly susceptible.
- Decrease in the cooking temperature of pork from 155 °F to 145 °F.
- Decrease in hot holding temperature from 140°F to 135°F.
- Change in cooling time/temperature requirements:
  - from 140°F to 70 in 2 hours **to** 135°F to 70°F in 2 hours
  - from 70°F to 41°F in 4 hours **to** within a total of 6 hours from 135°F to 41°F
- Requirement for the Person in Charge to have knowledge of the major food allergens and symptoms of an allergic reaction.
- Change in the microwave reheating temperature requirement for potentially hazardous foods to 165°F.
- Reduction in the length of time, after preparation, that ready-to-eat potentially hazardous foods can be held under refrigeration (at 41°F) from 10 to 7 days.

For the official Rules and Regulations Pertaining to Certification of Managers in Food Safety go to [http://www2.sec.state.ri.us/dar/regdocs/released/pdf/DOH/DOH\\_173\\_p](http://www2.sec.state.ri.us/dar/regdocs/released/pdf/DOH/DOH_173_p)

## Can you Spot The Food Code Violation?

Answer on page 4



## Reporting Foodborne Illness

By Kim Langelo

### What is foodborne illness?

Foodborne illness is any illness that may result from eating a contaminated food or drinking a contaminated beverage. Food may be contaminated with bacteria, viruses, parasites, toxins and chemicals. Typical symptoms include vomiting, diarrhea, and abdominal cramps. The elderly, very young, and immunocompromised (weakened immune system) are more at risk of foodborne illness.

The common myth regarding foodborne illness is that the last meal one ate made them sick. However, some symptoms are not present until days or even up to a couple of months after consuming the food in question. This is why it is important that you provide the Health Department with at least a 3-day food history if you suspect you have a foodborne illness.

### Who should I call if I suspect I have a foodborne illness?

If you suspect that you have a foodborne illness, contact the Rhode Island Department of Health, Office of Food Protection at (401) 222-2750. After hours, please call (401) 272-5952. You will be asked questions regarding your illness and the foods that you ate within the last 72 hours. This may require up to 10 minutes of your time, and the information that you provide is kept confidential.

Continued. See *Illness* page 4

### Food Law History

<http://www.fda.gov/opacom/backgrounders/miles.html>

**1862 President Lincoln** appoints a chemist, Charles M. Wetherill, to serve in the new Department of Agriculture. This was the beginning of the Bureau of Chemistry, the predecessor of the Food and Drug Administration.

**1883 Dr. Harvey W. Wiley** becomes chief chemist, expanding the Bureau of Chemistry's food adulteration studies. Campaigning for a federal law, Dr. Wiley is called the "Crusading Chemist" and "Father of the Pure Food and Drugs Act." He retired from government service in 1912 and died in 1930.

**1902** Congress appropriates \$5,000 to the Bureau of Chemistry to study **chemical preservatives and colors** and their effects on digestion and health. Dr. Wiley's studies draw widespread attention to the problem of food adulteration. Public support for passage of a federal food and drug law grows.

**1906** The original Food and Drugs Act is passed by Congress on June 30 and signed by President Theodore Roosevelt. It prohibits interstate commerce in misbranded and adulterated foods, drinks and drugs. The Meat Inspection Act is passed the same day. Shocking disclosures of insanitary conditions in meat-packing plants, the use of poisonous preservatives and dyes in foods, and cure-all claims for worthless and dangerous patent medicines were the major problems leading to the enactment of these laws.

---

*"The common myth regarding foodborne illness is that the last meal one ate made them sick."*

---

*"If you suspect that you have a foodborne illness, contact the Rhode Island Department of Health, Office of Food Protection at (401) 222-2750. After hours, please call (401) 272-5952."*

#### For additional information on foodborne illness:

- **CDC's Foodborne Illness:**  
[http://www.cdc.gov/ncidod/dbmd/diseaseinfo/foodborneinfections\\_g.htm#riskiestfoods](http://www.cdc.gov/ncidod/dbmd/diseaseinfo/foodborneinfections_g.htm#riskiestfoods)
- **FDA's Bad Bug Book:**  
<http://www.cfsan.fda.gov/~mow/intro.html>
- **FDA's Foodborne Illness:**  
<http://www.cfsan.fda.gov/~mow/foodborn.html>

*Illness. Continued from Page 3.*

#### What happens next?

The Office of Food Protection will review the information provided to determine if it is necessary to conduct an investigation, which would include visiting the food establishment in question. If an investigation is warranted, the Office of Food Protection will work closely with the Office of Communicable Diseases and the Division of Laboratories to determine what was responsible for the illness.

#### Should I contact my physician?

Because vomiting and diarrhea can lead to dehydration if fluid loss exceeds the intake of fluids and salts, the Centers for Disease Control and Prevention (CDC) recommends contacting your physician if any of the following are present along with diarrhea:

- High fever (temperature over 101.5 F, measured orally)
- Blood in the stools
- Prolonged vomiting that prevents keeping liquids down (which can lead to dehydration)
- Signs of dehydration, including a decrease in urination, a dry mouth and throat, and feeling dizzy when standing up.
- Diarrheal illness that lasts more than 3 days

#### What are the responsibilities of food service operators?

The Rhode Island Food Code requires food service operators to immediately report to the Department of Health any alleged foodborne illness. In addition, establishments must immediately cease operations when an imminent health hazard may exist, including an apparent foodborne illness outbreak.



#### Spot the violation answer from page 3

1. **Violation:** The handwashing lavatory (sink) is not accessible.

#### RI Food Code Regulation 5-205.11, Using a Handwashing Lavatory

A handwashing lavatory (sink) shall be maintained so that it is accessible at all times for employee use.

2. **Violation:** A means for drying hands is not provided at the handwashing lavatory (sink).

#### RI Food Code Regulation 6-301.12, Hand Drying Provision

Each hand washing lavatory (sink) shall be provided with individual disposable towels; a continuous towel system that supplies the user with a clean towel or a heated-air hand drying device.

## Ask the Task Force

By Linda Kender and John Rogers

**Q: I am a licensed caterer in Rhode Island. With the wedding season just around the corner, should wedding cakes be covered and refrigerated?** (*Anne T., Westerly, RI*)

**A:** It is important to remember to keep all foods covered to protect them from contamination during transportation and storage. Cakes with any dairy cream or custard fillings must be kept cold (less than 41 degrees Fahrenheit) at all times.

**Q: I think I got sick from a meal I ate at a local restaurant. What should I do?** (*Susan W., Exeter, RI*)

**A:** Contact the Health Department at (401) 222-2750 and call your health care provider if you have any health concerns. For more information see the article titled "Foodborne Illness" on Page 3.

**Q: Is my restaurant required to maintain refrigerator temperature logs?** (*Ted S., South Kingstown, RI*)

**A:** There is presently no specific regulation requiring the use of refrigerator temperature logs in Rhode Island restaurants, however, it is always a good idea to do so. Certified Food Safety Managers are required to have a plan to assess, monitor, and control foodborne disease hazards. Refrigerator temperature logs are an important part of a monitoring plan.

**Q: My Food Safety Manager Certification has expired, what is the procedure for recertification?** (*Kathy J., North Providence, RI*)

**A:** If your certification expired more than 6 months ago you are required to take a Health Department approved 15 hour Food Safety Manager Certification Course and achieve a passing score of 75 or above on the exam. If it is less than 6 months since your certification expired, you are required to take a six-hour recertification course. For information regarding Food Safety Manager Certification you may visit the Health Department website at <http://www.health.ri.gov/environment/food/cfm/cfmhome.php>.

**Q: Do Easter eggs require refrigeration?** (*Kim L., Lincoln, RI*)

**A:** Although the R.I. Food Code does not consider hardboiled eggs with intact shells to be a potentially hazardous food, USDA recommends that consumers store hardboiled eggs under refrigeration. For tips on Easter and Passover egg safety for consumers visit USDA's website at [http://www.fsis.usda.gov/News\\_&\\_Events/NR\\_032105\\_01/index.asp](http://www.fsis.usda.gov/News_&_Events/NR_032105_01/index.asp)

*The Food Safety Task Force wants to be your resource for answers to food safety questions. Please email questions to [foodsafe@etal.uri.edu](mailto:foodsafe@etal.uri.edu)*



## Professional Development Opportunities February-June 2007

April 10, 2007 3:00-5:00 PM

### **Food Safe School Inservice Training**

Warwick, RI

Sponsored by Kids First

Contact Elizabeth Bugden at (401) 751-4503

April 16-17, 2007

### **HACCP Meat and Poultry Training**

Contact Diane Wright Hirsh at (203) 407-3163 or [diane.hirsh@uconn.edu](mailto:diane.hirsh@uconn.edu)

May (Date TBA)

### **School Food Safety Policy Workshop**

Contact Elizabeth Bugden at (401) 751-4503

May 8 -11, 2007

### **Northeast Food and Drug Officials Annual Training, Workshop and Conference**

Warwick, RI

Contact Eugene Blake at 603-230-3639 or [eblake@ci.concord.nh.us](mailto:eblake@ci.concord.nh.us)

May 15, 2007

### **Seafood HACCP Training (Segment 2)**

Narragansett, RI

Contact Lori Pivarnik at (401) 874-2972 or [pivarnik@uri.edu](mailto:pivarnik@uri.edu)

June 5, 6, and 7, 2007 (Three day course)

### **Seafood HACCP Training**

Narragansett, RI

Contact Lori Pivarnik at (401) 874-2972 or [pivarnik@uri.edu](mailto:pivarnik@uri.edu)

June 18-21, 2007

### **National Environmental Health Association Annual Education Conference and Exhibition**

Atlantic City, NJ

For more information visit [www.neha.org](http://www.neha.org)

#### Online Opportunities

### **Centers for Disease Control Epidemiologic Case Studies**

Interactive exercises based on real-life outbreaks developed to teach epidemiologic principals.

<http://www2a.cdc.gov/epicasestudies/>

### **ALERT, FDA Food Defense Awareness Initiative**

[www.cfsan.fda.gov/~dms/alerttoc.html](http://www.cfsan.fda.gov/~dms/alerttoc.html)

## Pathogen Page: Norovirus *By Kim Langello*

### What is norovirus infection?

Norovirus infection is an intestinal illness that often occurs in outbreaks. The virus was first identified in 1972 after an outbreak of gastrointestinal illness in Norwalk, Ohio. Later, other viruses with similar features were described and called Norwalk-like viruses.

### How do people get norovirus infection?

Norovirus is found in both the stool and vomit of infected people. The virus can be spread in many ways, including the following: Swallowing food or water that has been contaminated with norovirus; Swallowing airborne droplets created by the vomitus of an infected person; Touching surfaces or objects contaminated with norovirus, and then placing one's hand in their mouth; Having direct contact with another person who is infected, e.g. caring for someone who is ill with the virus, or sharing food, beverages or utensils with an ill person.

Food and drinks can easily become contaminated with the norovirus because the virus is so small. Some foods can be contaminated with norovirus even before they are delivered to a restaurant or store. Raw oysters harvested from contaminated waters have been responsible for past outbreaks. Produce such as salads and frozen fruit may also be contaminated at the source.

### Why is norovirus infection important for food handlers?

Food handlers infected with norovirus can unintentionally contaminate the food and/or beverages they prepare and serve to the public. Many of those eating the contaminated food or drinking the contaminated beverages can become ill, causing an outbreak. Even if the food handler no longer feels ill, they can still carry the virus in their stool and potentially infect others. Therefore, the RI Department of Health requires that food handlers not work for 2 days after they feel better.

**Who is at risk for norovirus infection?** Anyone can get norovirus infection. Dehydration, the most serious health effect from infection, can be more common in young children, the elderly, and immunocompromised individuals.

### What are the signs and symptoms of norovirus infection?

Symptoms, which include nausea, vomiting, diarrhea, and stomach cramps, usually appear in 1 to 2 days after exposure to the virus. Severe illness or hospitalization is uncommon. Infected persons usually recover in 2 to 3 days without serious or long-term health effects.

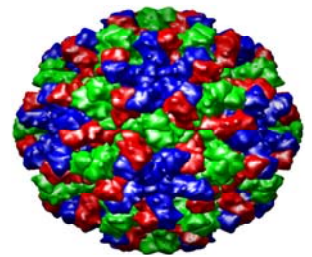
### How is norovirus diagnosed and what is the treatment for Norovirus infection?

Currently, 47 state public health laboratories, including RI, have the capability to test stool samples of infected individuals for norovirus by reverse transcriptase polymerase chain reaction (RT-PCR). No specific treatment is available. Persons who are severely dehydrated might need rehydration therapy.

### How can norovirus be prevented?

- Wash hands with soap and warm water after toilet visits, changing a diaper, blowing your nose, sneezing or coughing, caring for a sick person, playing with a pet, and also before preparing or eating food. (For additional information, refer to "Things to Do to Prevent Infectious Diseases" at URL: <http://www.health.state.ri.us/disease/communicable/prevent.php>)
- Dispose of sewage in a sanitary manner
- Thoroughly clean and disinfect contaminated surfaces immediately after an episode of illness by using a bleach-based household cleaner. Wash and wipe down the toilet area, faucets and similar hard surfaces with a mixture of one tablespoon of bleach to 3 cups of water. If cleaning up vomit or stool, use two tablespoons of bleach to 1 cup water.
- Cook all shellfish thoroughly before eating
- Wash raw vegetables and fruits before eating
- No bare-hand contact of ready-to-eat food by food handlers
- Food handlers with symptoms of Norovirus illness should not prepare or touch food

For more information on norovirus visit The Centers for Disease Control website at URL: [http://www.cdc.gov/ncidod/diseases/submenus/sub\\_norwalk.htm](http://www.cdc.gov/ncidod/diseases/submenus/sub_norwalk.htm)



*An electron micrograph of the Norovirus*

## COME TO TERMS WITH GERMS! .....Become a Food-Safe School

By Elizabeth Bugden



Kids First in cooperation with the Departments of Health, Education, the CDC and URI is sponsoring a free Food-Safe School In-Service Training TUESDAY, APRIL 10, 2007 from 3:00 - 5:00 pm at Warwick Library. To register, call Elizabeth at (401) 751- 4503

Stopping the spread of illness is foremost on the minds of school administrators and educators in Rhode Island. We all want to keep students safe while they strive for high academic performance. An excellent way to achieve this goal is for a school to become a Food Safe School.

In a Food-Safe School, administrators, school lunch personnel support staff, teachers, students and parents learn about key principles of food safety when purchasing, preparing, storing and eating food. Whether foods are prepared and served in the cafeteria, brown-bagged from home, purchased from vending machines, or served at any school event if not handled properly a foodborne illness can result.

Becoming a Food-Safe School will:

1. Increase awareness of food safety
2. Decrease risks of foodborne illness
3. Support wellness efforts
4. Work to minimize risks of other diseases like the flu, meningitis, and norovirus.

To learn more about how your school can become a Food-Safe School, and obtain a free copy of the Food- Safe School Action Guide call Elizabeth or Marti at (401) 751-4503, or e-mail [elizabethb@gis.net](mailto:elizabethb@gis.net).

## Task Force Member Spotlight

*Each Newsletter issue will recognize a member of the Rhode Island Food Safety Task Force. In this issue we are pleased to introduce Dr. S. Samuel Wong.*



Dr. S. Samuel Wong

Dr. S. Samuel Wong came to the United States for his graduate studies at the University of Rhode Island in the late 1980s. After earning his doctoral degree in food science, he started working in the field of food safety and regulatory compliance.

Sam founded his own food safety consulting firm eight years ago, focusing on Asian food establishments. His clients include international restaurant chains, supermarkets chains, small to medium size food processors, state and local health agencies, attorneys, and numerous independent food establishments. Sam also helps out at a local health department in Massachusetts as an inspector.

Sam is a certified lead instructor with the International HACCP Alliance, as well as a certified FDA Food Code trainer. He has been working with the Educational Foundation of the National Restaurant Association on updating the ServSafe Food Manager Certification Program for the past 5 years.

## Personal Hygiene Training Resources

By Carol S. Mier

Food Safety Music - including “We are the Microbes”, and “You’d Better Wash Your Hands”(ala the Beatles) - on a \$10 CD  
<http://foodsafety.ucdavis.edu/music.html> or [www.FoodTunes.com](http://www.FoodTunes.com)

Articles and information on why hand washing is important  
[www.foodsafety.gov/~fsg/handwash.html](http://www.foodsafety.gov/~fsg/handwash.html)

Videos, information, resources: [www.handwashingforlife.com](http://www.handwashingforlife.com)

Activities, lesson plans, posters for children - from NSF: [www.scrubclub.org](http://www.scrubclub.org)

Glo-Germ materials for hand washing training - Powder, oils, ultra-violet light demonstrate the effectiveness of proper hand washing: [www.glogerm.com](http://www.glogerm.com)

Products similar to Glo-Germ. Also free informational sheets and hand washing signs.  
[www.GermJuice.com](http://www.GermJuice.com)

Tools for hand washing and gloves training, including free downloadable signs and factsheets: [www.foodhandler.com](http://www.foodhandler.com)

Video on hand washing by the National Restaurant Association: [www.nraef.org](http://www.nraef.org)

Food Safety Resources for Non-English Speakers with information available in 42 languages: [www.foodsafetyweb.info/resources/NonEnglish.php](http://www.foodsafetyweb.info/resources/NonEnglish.php)



## FDA Announces New Food Defense Web Training

In 2006, the U.S. Food and Drug Administration (FDA) announced its new food defense awareness initiative **ALERT (Assure, Look, Employee, Report, and Threat)**. The goal of this initiative is to heighten the awareness of state and local government agencies and the food industry regarding food defense issues. ALERT also provide guidelines on decreasing the risk of an intentional food contamination at their facility.

A web-based training module was recently developed to provide key stakeholders access to the ALERT message. The objectives of this training include:

- Describe the five parts of the ALERT initiative
- List examples of preventive measures that can be taken to protect business and industry from intentional food contamination
- Identify several elements that can become part of a continuous improvement plan
- Increase awareness among personnel in the food industry and encourage them to adopt practices that help protect the food supply

Completion of the training should provide the tools necessary to implement a food defense plan in your facility. The training module can be accessed at the following:  
<http://www.cfsan.fda.gov/~dms/alerttoc.html>

If you have any questions regarding food defense or the training module, please contact Kim Langello at the RI Dept. of Health at 222-7719 or [Kimberly.langello@health.ri.gov](mailto:Kimberly.langello@health.ri.gov)

## Why Do I Have to Do That?

By Sam Wong

“That’s too much!” “We’ll have no time to do other work!” “Do we have to do that every time?” “You want me to do what?” These are some of the proclamations by my ethnic Chinese students in my Food Safety Manager Certification classes. This is especially true when I am teaching the importance of handwashing. During the class we discuss the handwashing requirements of the Food Code, but many people are resistant to change. In order for handwashing practices to change, students must fully understand the public health rationale behind the regulations. The students’ attitude regarding the need for proper handwashing has no ethnic or racial boundary. I get similar responses from my English-speaking students.

The results of survey after survey indicate that inadequate or inappropriate handwashing is one of the major contributing factors in causing foodborne illnesses. All of us as food safety educators and public health officials agree that proper handwashing is crucial in preventing foodborne illness. Then why aren’t more food employees properly washing their hands? In my opinion, for food employees to initiate a behavioral change they need to have completely “bought into” the need for proper handwashing.

As more food service managers and employees are participating in food safety training these days, the information and knowledge on when and how to properly wash hands is readily available. However, the “why” part of the handwashing education seems to be “missing in action.” Without complete understanding of the “why wash my hands,” what do you think the food employees are doing when nobody is watching? Somehow, I’m not betting that they are following the 20 seconds lathering requirement in RI!

Case in point: The Center for Disease Control and Prevention (CDC) launched a “Clean Hands Campaign” a while ago. They have a dedicated website for this campaign, with an extensive list of handwash-related links. The campaign slogan is “Clean Hands Save Lives!” This is all nice and dandy. However, the entire campaign is focused on the “when” and “how.” The “why” part of the campaign consists of just one single sentence: “Keeping hands clean is one of the most important steps we can take to avoid getting sick and spreading germs to others.” That’s not very informative. Even the popular ServSafe Food Safety Manager Certification Coursebook does not provide enough information on the “why.” If I don’t know and understand the importance of washing hands already, I would probably not follow the CDC recommendations. If I were being told to do something that is not my usual habit, I would want to know and understand the reasons behind the change. Wouldn’t you?

Handwashing is such an important public health preventative tool that we need to make sure it is done properly. From pandemic influenza to the “germ-of-the-moment” a.k.a. Norovirus, proper handwashing could be the most important preventive measure. So next time you teach handwashing principles spend more time on the “why.” Explain to your students how bacteria and viruses cross-contaminate surfaces via our hands. Also, why using toilet paper will not prevent bacteria and viruses from getting to your fingertips. Tell them why is it necessary to use warm water and soap to wash their hands.

---

*“In my opinion, for food employees to initiate a behavioral change they need to have completely “bought into” the need for proper handwashing”*

---

See [page 9](#) of this newsletter for a list of free and low-cost personal hygiene educational resources

## Food Safety Information Survey

1. Where do you look to find current food safety information (Check all that apply)?
  - the Internet
  - professional newsletters
  - textbooks
  - established curricula
  - participating in professional development activities
  - other professionals, please describe:
  
2. What method of obtaining good food safety information best meets your needs, taking into consideration your schedule, your organization, and financial support for professional improvement activities that are available to you?
  - professional newsletters
  - attendance at professional meetings

If you checked professional meetings, what topics would you like to see presented at a food safety annual conference (Check all that apply)?

- state and national regulations
- current food safety issues
- sources for food safety curriculum materials
- information on foodborne illness outbreaks
- other, please describe:

If you checked professional meetings, what time of day fits best into your schedule for a food safety annual conference (Check all that apply)?

- morning (8am to 12 noon)
- early afternoon (12 noon to 3pm)
- late afternoon (3-6pm)
- evening (after 6pm)

If you checked newsletters what types of information would you like to see included in a newsletter?

- state and national regulations
- current food safety issues
- sources for food safety curriculum materials
- information on foodborne illness outbreaks
- other, please describe

3. What is your profession?
  - dietitian
  - foodservice manager
  - school foodservice director
  - family and consumer sciences teacher
  - culinary arts teacher
  - food safety manager certification instructor
  - school nurse teacher
  - quality control/ assurance manager
  - food safety educator/consultant
  - other, please describe
  
4. How would you prefer to receive this newsletter?
  - electronically
  - through the mail
  
5. Please provide your email address if you would like to receive notification when new issues of this newsletter are released. \_\_\_\_\_

Please complete this survey online at: <http://www.surveymonkey.com/s.asp?u=905453030670> or print this page and e-mail it to: RI Food Safety Task Force  
CE Education Center  
3 East Alumni Ave  
URI, Kingston, RI 02881

## Task Force Members & Newsletter Contributors

### RI Department of Health- Office of Food Protection (401) 222-2750

Steve DiMaio, President, RIEHA  
Ernest Julian, Ph.D., Chief  
Kimberly Langello, Food Defense Coordinator  
Thomas Nerney, Compliance Officer  
Susan Wallace, Training Officer

### RI Community Foodbank (401) 942-6325

Bill Flynn, Director of Community Programs

### RI Department of Education (401) 222-8955

Kathy Kendall, Nutrition Program Specialist

### RI Department of Corrections (401) 462-5142

John Rogers, Administrator, Food Processing and Distribution

### Johnson and Wales University

Linda Kender, Associate Professor & Food Safety Liaison  
Fred Faria, Associate Professor, Hospitality College  
Suzanne Vieira, Associate Professor and Department Chair of the Culinary Nutrition Program in the College of Culinary Arts

### Rhode Island College (401) 456-8477

Carol Mier, Dietitian and Food Safety Instructor

### University of Rhode Island (401) 874-2960

Martha Patnod, CE Professor/Food Safety Specialist  
Lori Pivarnik, PhD, Coordinator, Food Safety Education/Research Programs

### RI Hospitality and Tourism Association (401) 223-1120

Dale Venturini, President/CEO

### RI Department of Environmental Management/Division of Agriculture (401) 222-2781

Ken Ayars, Chief, Division of Agriculture  
Peter Susi, Agricultural Products Inspector

### Kids First (401) 751-4503

Elizabeth Bugden, School Food Safety Specialist

### Meals on Wheels (401) 351-6700

Pauline Asprinio, Nutrition Director

Sam Wong, Ph.D., Food Safety Consultant, Educator

Ken Collins, Foodservice Management Professional

#### Rhode Island Food Safety Task Force

URI Cooperative Extension  
3 East Alumni Avenue  
Kingston, RI 02881

Phone:  
(401) 874-2960

Fax:  
(401) 874-2259

E-mail:  
foodsaf@etal.uri.edu

