



SB 338 Proponent Testimony
Presented by Steve Ruckman, President
Ohio Environmental Health Association
Senate Agriculture and Natural Resources Committee
Chairman Tim Schaffer
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Chairman Schaffer, Vice Chairman Huffman, Ranking Member Fedor and members of the Senate Agriculture and Natural Resources Committee. My name is Steve Ruckman and I am the President of the Ohio Environmental Health Association (OEHA). OEHA represents nearly 500 Registered Environmental Health Specialists (REHS, although commonly called health inspectors) and other environmental health industry partners and practitioners, and we are strong proponents of SB 338 sponsored by Senator George Lang.

Local health department food safety programs are required to be evaluated by the Ohio Department of Health (ODH) and the Department of Agriculture (ODA) at least once every three years in a process we call a Food Survey. ODH is required to review the Food Service Operation (facilities who provide food to customers that eat in the facility) portion of the program, and ODA is responsible for the Retail Food Establishment (facilities who serve a majority of their food in “to-go” orders) portion. These surveys are supposed to determine if local health department food safety programs are operating within rules and guidelines, and to evaluate the local REHS’ food program expertise and knowledge of the food code.

For nearly a decade there have been a variety of concerns with the survey process, particularly the field survey, of Local Health Departments performed by ODA and ODH. There has been a lot of dialogue on this issue over the years, and the state departments undertook efforts to address *some* of the concerns with the field survey process. However, the primary concerns with the ODA and ODH field surveys have never been sufficiently and appropriately addressed. The field survey should be focused on how to best work with local REHS’ and operators to protect the public from foodborne illness. Instead, it has devolved into a counting game where the objective is to issue as many food code violations as possible to demonstrate REHS’ mastery of the food code while sacrificing productive working relationships with the business community. We need the legislature’s help to fix this problem.

We believe the Food Surveys conducted by ODA and ODH of local health departments have two significant flaws:

1. Number of Violations Cited

In order for sanitarians to achieve a passing score on their evaluation, they must cite 80% of the violations that the state survey officer identifies. This means the ODA-ODH food survey methodology requires the local REHS to cite at least 80% of *every critical and non-critical violation* of the food code the state surveyor cites which directly correlates to the local REHS score. Although non-critical violations may be verbalized instead of written in an inspection report, nearly all REHS’ document both critical and non-critical violations on inspection reports during food surveys. Why? If a state surveyor does not hear or record the REHS verbalizing observed violations, or forgets that the REHS verbally stated the violation, this would be considered a “miss” and will negatively impact their score. The ODA-ODH survey methodology is

essentially a process for the local REHS to cite every violation a sanitarian observes and compare it to the list of every violation the state surveyor observes. With this food survey process, it is not uncommon to have over 50 violations in a single inspection. In some cases, 100+ violations or more have been cited. While it is the REHS knowledge of the food code that is being evaluated, this process removes a REHS' professional judgement and ability to apply common sense.

2. Amount of Time for Survey Inspections

Food Survey Inspections conducted during the REHS evaluation process are *significantly longer than standard inspections*. The *ODA-ODH survey methodology policy is the root cause of the problem of exceptionally long inspection times*. Under the ODA-ODH survey methodology a REHS ability to cite every critical and non-critical violation of the food code directly correlates to their score. This score is interpreted by the state to show the REHS knowledge of the Food Code. This unwarranted increase in time is a burden for the local REHS and food license operators such as restaurants and grocery stores where the food surveys are conducted.

It is OEHA's belief that the current methodology does not accurately reflect a REHS' knowledge of the food code or their ability to apply the code. Currently, if a local sanitarian cites 79 violations during an inspection, and the state survey officer cites 100, the local sanitarian would be deemed as not knowledgeable of the food code. Furthermore, OEHA believes that this process is a burden for our industry partners. REHS should not conduct inspections using one set of criteria for their normal day to day activities and a different set of criteria when a state surveyor is there to evaluate their work. In order to consistently apply the food code in a manner deemed acceptable by ODH and ODA, inspection times and the number of violations cited will increase during all standard inspections, which may even result in increased license fees for operators.

The bill before you today will replace the current field survey method to evaluate sanitarian knowledge of the food code via a flawed field food survey process, and replace it with a written or electronic assessment just like we do for many other professions. The assessment would be no more than 50 questions and still require a passing score of 80% or above. The test would be developed by ODA and ODH in consultation with the Ohio Environmental Health Association and the Association of Ohio Health Commissioners. This important change would eliminate the problems of the ODA-ODH food survey process and allow REHS' to work with operators in a productive way in order to exercise their professional judgment and expertise during standard inspections in an even-handed way to prevent foodborne illness.

Thank you for allowing me to testify today on this important legislation. On behalf of OEHA, I ask for your support and favorable vote on SB 338. At this time, I will answer any questions the members of the committee may have.