Date of Committee Report: July 26, 2007

Submitted By: Dale Yamnik, Committee Chair, and Keith Winkler, Vice Chair

Committee Charge:

Issue 2006-I-029 stated:
The Conference recommends that the FDA continue the charge issued by the 2004 CFP (2004-I-011) to completion and:

1. Remove the term "critical item" from the Food Code and replace it with a more appropriate term or terms;
2. Redesignate Food Code provisions in terms of their relationship to the risk factors most likely to contribute to foodborne illness and the public health interventions and good retail practices that result in safer food and protect the consumer; and

Work with all stakeholders including a committee created by CFP on draft proposals and submit an issue at the 2008 Conference for Food Protection.

Issue 2006-I-030 stated:
The Conference recommends that a Committee be formed under Council I made up of CFP Stakeholders to provide feedback to the FDA Criticality Work Group regarding:

- Removal of the term "critical item" from the Food Code and replacement with a more appropriate term or terms;
- Provision of clear and defensible definitions for each of the new terms created;
- Development of an objective process, based on sound science and epidemiological data related to the prevention of foodborne illness, that can be used by multiple individuals to come to a consistent, logical conclusion; and
- Re-designation of Food Code provisions regarding their relationship to the risk factors identified by CDC or where epidemiological data indicates they are most likely to contribute to foodborne illness.

Committee Membership:

A list of the Committee Membership is attached.

Progress Report/Committee Activities:

To date the Committee has had several conference calls.

1. Our primary objective has been to review the FDA Criticality Work Group's assessment of the Food Code.
2. We have been having conference calls every four to six weeks.
3. We have reviewed Chapters 2, 3, 4 and 7 so far and have submitted our recommendations to FDA regarding sections and paragraphs that members have felt may be incorrectly labeled. In our recommendations we list the specific section/paragraph in question, what we feel its rating should be and why. In addition we have sent out ballots to our committee membership so that they could vote on the sections we brought up in our discussions. This gives FDA a perspective on how many members are in agreement with a change.
4. An interesting side note in regards to committee votes is that there is usually a wide range of votes, with all categories receiving votes (priority, priority foundation and core). It is seldom that one category has a simple majority.
5. This committee process has been beneficial and Shirley Bohm, as our Committee's FDA representative, has been very receptive to our thoughts and has been very helpful in explaining FDA's thought processes behind why sections were categorized as they were.
6. FDA has made changes to some of their ratings based upon committee recommendations and others are under consideration.
7. The committee agrees with FDA's definitions for the three categories, priority, priority foundation and core. However, there has been discussion on the second and third tier category terms:
   a. Priority Foundation: There is concern that by using the term 'priority' in two categories that it may be confusing to people when there are discussions with operators and others. We are currently voting on who prefers just "Foundation" for the second term, as opposed to "Priority Foundation".
b. The term 'Core' has been mentioned to be very similar to 'Foundation', so we have asked committee members if they have any other suggested terminology. So far there does not seem to be any agreement on a new term.

8. The committee was wondering what we should do with committee members who have not participated in any of our conference calls. Should they be left on the committee in an inactive status, or deleted from the committee. We will be sending them a notice that if they need to remain on the committee they need to participate in our conference calls.

Our next call is scheduled for September 5, 2007.