

Scoring Form Committee  
Committee Report

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Submitted By: Chuck Catlin

Committee Charge(s):

The CFP recommends the creation of a Scoring Ad-Hoc Committee charged with the following:

- Develop a research proposal to determine the most effective scoring system.
- Identify possible funding sources and researchers to conduct the research.
- Report the committee's findings back to the conference at the 2010 Biennial meeting.

Committee Members:

See attached spreadsheet

Progress Report/Committee Activities:

**Abstract:**

The Conference for Food Protection created an Ad hoc Committee to explore the effects of health inspection scoring on the reduction of the risk factors identified by the CDC as the leading causes of foodborne disease. The Committee performed research and found a direct correlation between effective scoring, and the reduction of the behaviours associated with foodborne disease. However, the associated health jurisdictions must perform consistent inspector training, inspector performance standardization, and industry training. In addition, the effective scoring must be easily understood by the regulated industry, inspector and general public. The selected scoring system must be effectively communicated in advance to the general public allowing them to factor sanitation into their decision on where to dine.

**Introduction:**

The CFP Inspection Form Scoring Sub-committee (Committee) was asked to evaluate if current scoring methodologies have impact on food safety by reducing the Risk Factors or other violations. The Committee was charged with working with the FDA to assess how relevant scoring systems can be used with the current recommended Food Establishment Inspection Report Form and Food and Drug Administrations (FDA) Food Code.

**Methods:**

The Committee combined a literature review with a questionnaire of local health departments. The literature review was intended to help the team identify studies or articles that highlighted successful scoring systems with strong correlations to reducing the risk factors associated with foodborne disease. While the questionnaire was intended to identify scoring systems that have been effective at reducing the risk factors associated with foodborne disease.

During the literature review the Committee found only a limited number of relevant studies and articles.

Since the Committee was charged with using the current recommended inspection form. Therefore, the Committee constructed a survey designed to determine what type of effective scoring systems are being used by jurisdictions that used the Food Establishment Inspection Report Form (Inspection form) and using a risk based approach.

## **Survey**

The Committee created a two-part questionnaire. Part one of the survey determines what type of scoring systems are being used in conjunction with the Inspection Form. It also asked which jurisdictions were evaluating their scoring systems and its effect on public health. Part two of the survey was a phone interview with the health department personnel that had food inspection programs that met the following criteria:

- Using the current Inspection Form or their own form that is substantively similar,
- Using a risk based food code that features the CDC risk factors and interventions,
- Using a scoring system,
- Regularly evaluating of the effects of their program on the reduction of risk factors and other violations,
- Willing to talk about their programs and methodology.

Part one of the survey was administered to using the National Restaurant Association's Zoomerang survey tool. The survey was sent to 1031 health departments throughout the country. The health department contact information was provided by the FDA.

The findings were analyzed by the Committee. Eight health departments met all of the Committee's criteria and were chosen to be phone interviewed.

Part two of the survey was created to evaluate what scoring systems are currently in use by health departments that are employing a consistent methodology to evaluate the effectiveness of their scoring system. The second part of the survey was administered by a recent graduate of a masters program in public health. The Committee chose only one person to administer the survey to reduce the chance of introducing any bias into the answers.

The Committee used the NRA sponsored Wiki Site for information storing and reviewing. They also used numerous phone conferences throughout the year.

## **Results:**

Scoring can have a positive impact on public health by reducing the risk factors associated with foodborne disease if:

- The health departments program includes inspector and industry training.
- The scoring system is easy for the health inspector, the public and regulated industry to understand.
- The inspector's performance is standardized on an ongoing basis.
- The jurisdiction is using a risk based food code that requires effective control of CDC risk factors.
- The health department regularly evaluates their inspection program results using a consistent and effective methodology.
- Thee public receives the sanitation scores in a way that allows them to make informed decisions about where they would like to eat.

# Conference for Food Protection Scoring Sub-committee Questionnaire Part One

1. Do you use the "Food Establishment Inspection Report Form" from the FDA?
  - a. Yes (go to question 3)
  - b. No (go to question 2)
2. If no, then does your form capture the essential elements of the CFP form (i.e. risk factors, public health interventions and GRPs)?
  - a. Yes (continue)
  - b. No (end survey)
3. Does your agency conduct inspections of retail food establishments?
  - a. Yes (continue)
  - b. No (end survey)

4. Please indicate the number of establishment(s) you regulate and/or audit by type

\_\_\_\_\_ Restaurants  
\_\_\_\_\_ Institutions (Foodservice in Jails, Schools, Hospitals, Nursing Homes, etc.)  
\_\_\_\_\_ Grocery Stores  
\_\_\_\_\_ Supermarkets  
\_\_\_\_\_ Convenience Stores  
\_\_\_\_\_ Bakeries (not part of any other type establishment)  
\_\_\_\_\_ Meat Markets (not part of any other type establishment)  
\_\_\_\_\_ Fish / Seafood Markets (not part of any other type establishment)  
\_\_\_\_\_ Confectionary Store  
\_\_\_\_\_ Mobile Food Establishments

5. Please indicate the total number of inspections completed annually for each establishment type:

\_\_\_\_\_ Restaurants  
\_\_\_\_\_ Institutions (Foodservice in Jails, Schools, Hospitals, Nursing Homes, etc.)  
\_\_\_\_\_ Grocery Stores  
\_\_\_\_\_ Supermarkets  
\_\_\_\_\_ Convenience Stores  
\_\_\_\_\_ Bakeries (not part of any other type establishment)  
\_\_\_\_\_ Meat Markets (not part of any other type establishment)  
\_\_\_\_\_ Fish / Seafood Markets (not part of any other type establishment)  
\_\_\_\_\_ Confectionary Store  
\_\_\_\_\_ Mobile Food Establishments

6. Please indicate the average length of a typical inspection for establishment type:

\_\_\_\_\_ Restaurants  
\_\_\_\_\_ Institutions (Foodservice in Jails, Schools, Hospitals, Nursing Homes, etc.)  
\_\_\_\_\_ Grocery Stores  
\_\_\_\_\_ Supermarkets  
\_\_\_\_\_ Convenience Stores  
\_\_\_\_\_ Bakeries (not part of any other type establishment)  
\_\_\_\_\_ Meat Markets (not part of any other type establishment)  
\_\_\_\_\_ Fish / Seafood Markets (not part of any other type establishment)  
\_\_\_\_\_ Confectionary Store

\_\_\_\_\_ Mobile Food Establishments

7. Which FDA region does your agency conduct inspections?
  - a. **NE:** RI, ME, MD, NH, VT, CT, NY
  - b. **Central:** IL, MI, WI, MN, ND, SD, IN, KY, OH, DC, VA, MD, WV, PA, NJ, DE
  - c. **SE:** MS, TN, PR, VI, FL, GA, LA, NC, SC, AL
  - d. **SW:** OK, AK, NM, TX, NE, UT, CO, WY, KS, IA, MO
  - e. **PACIFIC:** CA, HI, AK, OR, AZ, NV, WA, ID, MT
  
8. How many food borne illnesses and outbreaks have been linked to the retail & foodservice establishments in your jurisdiction within the last 5 years? (group needs to qualify)  
\_\_\_\_\_ Illnesses  
\_\_\_\_\_ Outbreaks
  
9. What type of scoring measurements does your agency use to evaluate a facility? (group needs to qualify)
  - a. Risk Factors
  - b. Critical Violations
  - c. GMPs or GRPs
  - d. Combination (Describe) \_\_\_\_\_
  - e. Other (Describe) \_\_\_\_\_
  
10. What type of final inspection score and/or rating method does your agency provide to establishment? (group needs to qualify)
  - a. Pass/Fail
  - b. Satisfactory vs. Not
  - c. Letter Grade
  - d. Numerical Score
  - e. Combination (please list) *open end response*
  
11. Does your agency provide an inspection score and/or rating to the establishment that is available to the public?
  - a. Yes
  - b. No
  
12. Does your agency collect data which captures inspection report and/or rating information?
  - a. Yes (continue)
  - b. No (end survey)
  
13. Does your agency conduct trend analysis studies for the establishments regulated and/or audited?
  - a. Yes (continue)
  - b. No (end survey)
  
14. Have any of the studies verified that your **inspection rating or scoring method** has contributed over time to a reduction in risk factors or critical violations?
  - a. Yes (continue)
  - b. No (end survey)
  
15. If yes, please explain? (open ended response)
  
16. Would you be interested in being contacted to discuss your scoring methodologies further?
  - a. Yes (continue)
  - b. No (end survey)

17. If yes, please provide information on the appropriate person to contact to obtain this information and data.

## **Conference for Food Protection Scoring Sub-committee Questionnaire Part Two**

Please ask each participant the same questions without variation. Please keep careful notes and try not to lead the participant in any way.

- 1. What is your current scoring system?**
  - a. Follow-up questions: How long have you been using this system?
  - b. What systems have you used to for scoring in the past? If the respondent has trouble answering the question you can prompt them with:
    - i. Pass/Fail
    - ii. Satisfactory/Unsatisfactory
    - iii. Letter grade
    - iv. Numerical Scoring
  - c. Do you require public posting of the score for public viewing?
  - d. If they have recently changed their scoring system please ask them why they decided to change.
  
- 2. Do you feel that your current scoring system has impacted public health by encouraging the reductions of the risk factors that cause disease?**
  - a. Follow-up Questions If yes to question 2: What has guided you to this conclusion?
  
- 3. Do you feel that other variables in your program could be responsible for the reductions in the risk factors?** Note; If the respondent has trouble answering the question you can prompt them with the following:
  - a. Have you modified/improved your inspector training or standardization?
  - b. Have you instituted any restaurant operator training/ Food handler cards?
  - c. Could it be caused by a random event?
  
- 4. Can you briefly describe the methodology your agency used to evaluate the rating system?**
  - a. How did you assess pre and post conditions?
  - b. Were there any specific risk factors that you were focused on when you were evaluating your system?
  - c. How did you measure the improvements that you feel resulted from your scoring system?
  
- 5. Do you feel that your scoring system has resulted in a reduction in Foodborne illness?**
  - a. What has guided you to this conclusion?
  - b. Have you explored any supporting data for your position?
  
- 6. What else would you like to share with our Committee regarding scoring and the reduction of the risk factors that cause foodborne illness?**



# BIBLIOGRAPHY

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Paul A Simon "Impact of Restaurant Hygiene Grade Cards on Foodborne Disease Hospitalizations in Los Angeles County" Journal of Environmental Health vol 67 Number 7

Dr, Phillip Leslie, Personal Interview October 3, 2007

Conference For Food Protection Forms Committee Scoring Sub-group, Two part questionnaire 2007

## Requested Actions:

The Committee recommends that CFP create a Scoring Ad Hoc to continue to facilitate the identification of a recommended scoring system that can be highlighted in the FDA food code. Scoring has been shown to positively impact public health by helping facilitate the reduction of the risk factors and other violations. Therefore, the Committee also recommends that CFP providing funding for academic research to determine the most effective scoring system. The research must also determine the most effective way to communicate restaurant sanitation scores to the general public, in advance of them choosing where to dine. By communicating sanitation scores to the public "... powerful economic incentives are created for restaurants to improve hygiene, leading to significant improvements in public health outcomes." (Jin and Leslie 2005)

Finally, the Scoring Committee, Standardization Committee and Criticality Committee must work closely together to assure continuity in their recommendations.