



ABSTRACT

Introduction: A 2010 FSIS risk assessment found over 80% of listeriosis illnesses associated with ready-to-eat meat or poultry products (i.e., deli meat) were attributed to product sliced or handled at retail.

Purpose: Ongoing surveillance assesses whether there is a continued increase in retailers following recommendations from the "FSIS Best Practices Guidance for Controlling Listeria monocytogenes (Lm) in Retail Delicatessens".

Methods: During routine surveillance of retail delis (n=1750/year), FSIS Compliance Investigators observe whether retailers are following 33 recommendations from the guidance. Observation results were documented by answering a series of yes and no questions and recording the results in the Public Health Information System (PHIS). The results were then entered into Tableau, a data visualization tool. Observations were evaluated based on the percentage of recommendations followed by category and the percentage of delis following the top 8 recommendations FSIS identified as most important in preventing contamination with Listeria monocytogenes.

Results: The percentage of recommendations followed increased from second quarter FY2016 to second quarter FY2018 in all four categories. Specifically, product handling increased from 85% to 90%, cleaning and sanitizing 80% to 83%, facility and equipment controls 96% to 98%, and employee practices 95% to 96% (n=127,258 practices observed). The percentage of delis following all top 8 recommendations increased from 58.5% in FY16-Q2 to 65.3% in FY18-Q2. The recommendations least likely to be followed are (i) clean and sanitize equipment every 4 hours; (ii) cover RTE foods promptly; and (iii) separate RTE products from raw products. The percentage of delis following all top 8 recommended practices is highest in jurisdictions which have adopted more recent versions of the Food Code. In states under the 1995, 1997, or 1999 Food Codes, only 55.6% of delis (n=288) were following all top 8 recommendations, compared with 69.5% in states which had adopted the 2013 Food Code (n= 811).

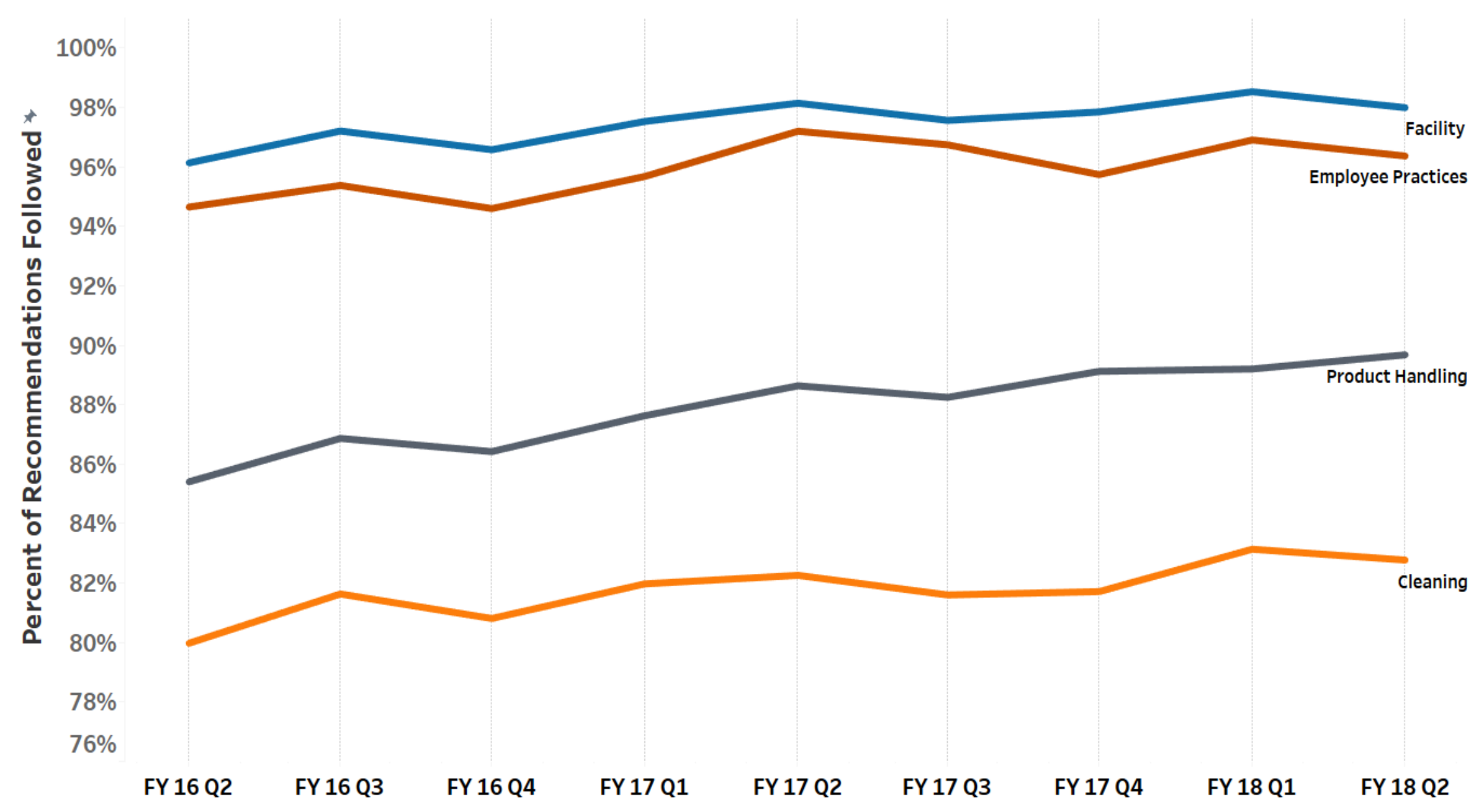
Significance: Increasing adoption of those recommendations which were found to significantly decrease the likelihood of illness in the "Interagency Risk Assessment - Listeria monocytogenes in Retail Delicatessens" would help protect public health by increasing retailers following the FDA Model Food Code and reducing risk of listeriosis from RTE meats handled at retail.

The CDC estimates listeriosis causes about 1,600 illnesses, 1,500 hospitalizations, and 260 deaths in the United States each year.2 Historically, listeriosis cases were often attributed to RTE meat or poultry product sliced or handled at retail stores (e.g. delis).

"FSIS Best Practices Guidance for Controlling Listeria monocytogenes (Lm) in Retail Delicatessens" can be found at: https://www.fsis.usda.gov/wps/portal/.../index/compliance-guides-delicatessens

The "FSIS Best Practices Guidance for Controlling Listeria monocytogenes (Lm) in Retail Delicatessens" (80 FR 33228; June 11, 2015), was developed based on the 2013 Interagency Risk Assessment-Listeria monocytogenes in Retail Delicatessens1 and the 2013 FDA Model Food Code to provide guidance for controlling Lm in the retail deli environment. FSIS began evaluating industry adoption of these recommendations as a pilot project in January 2016 (FY16-Q2), based on observations made by FSIS investigators. An increase in recommendations followed from FY2016 Q2 to FY2018 Q2 was seen in all categories. FSIS has extended the pilot project until the end of Fiscal Year 2021 as part of the FSIS Strategic Plan FY 2017-2021.

Percent of Recommendations Followed by Category (FY2016-FY2018)



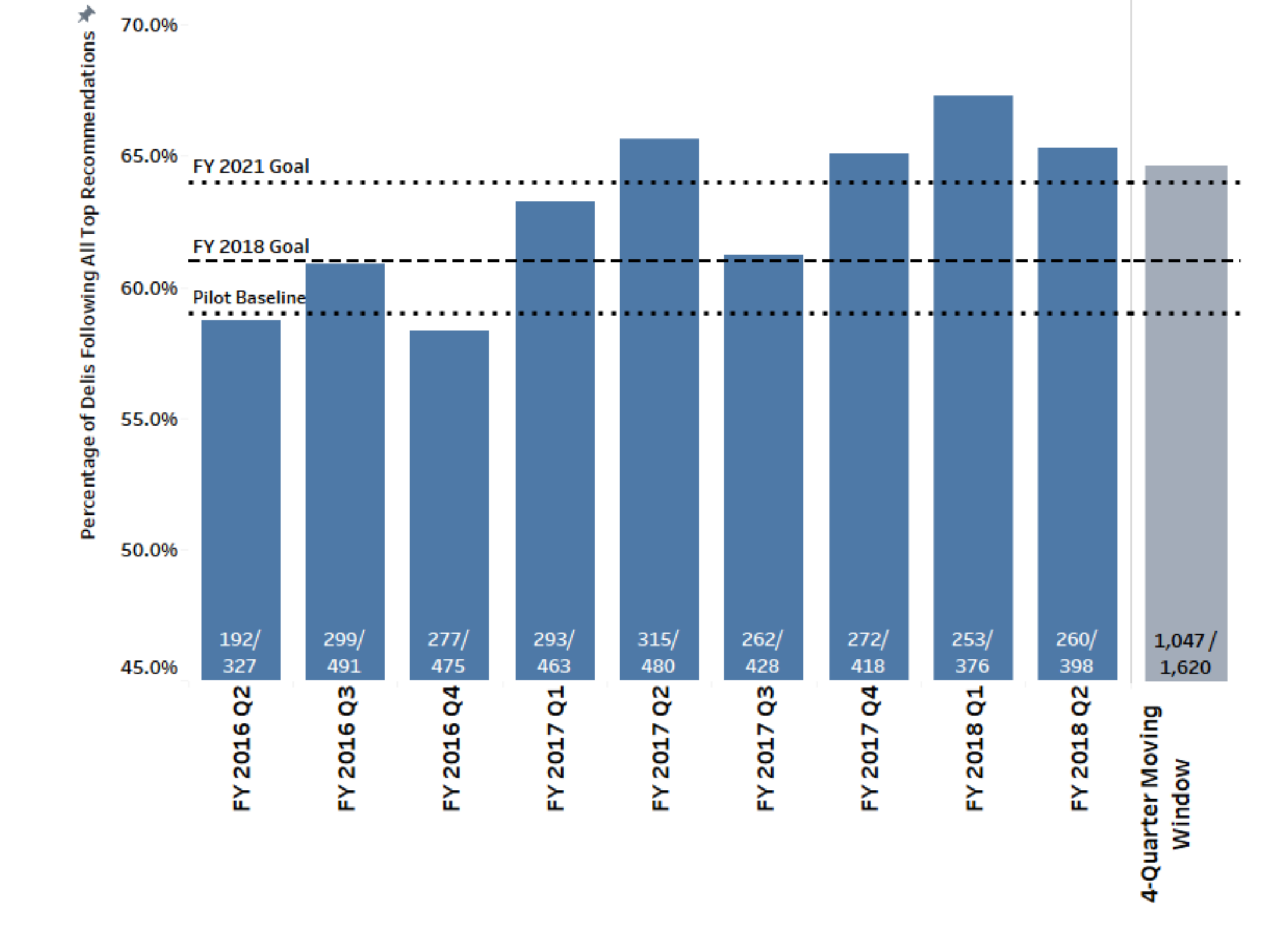
- Facility and Equipment Controls - from 96% to 98%
Employee Practices - from 95% to 96%
Product Handling - from 85% to 90%
Cleaning and Sanitizing - from 80% to 83%

FSIS encourages retailers and public health officials to review the guidance and evaluate their retail practices and interventions for reducing the risk of listeriosis to consumers from RTE meat and poultry deli products. Increasing adoption of these recommendations would increase compliance with the FDA Model Food Code and reduce risk of listeriosis from RTE meats handled at retail.

USDA-FSIS Fiscal Year (FY) is October 1st - September 30th

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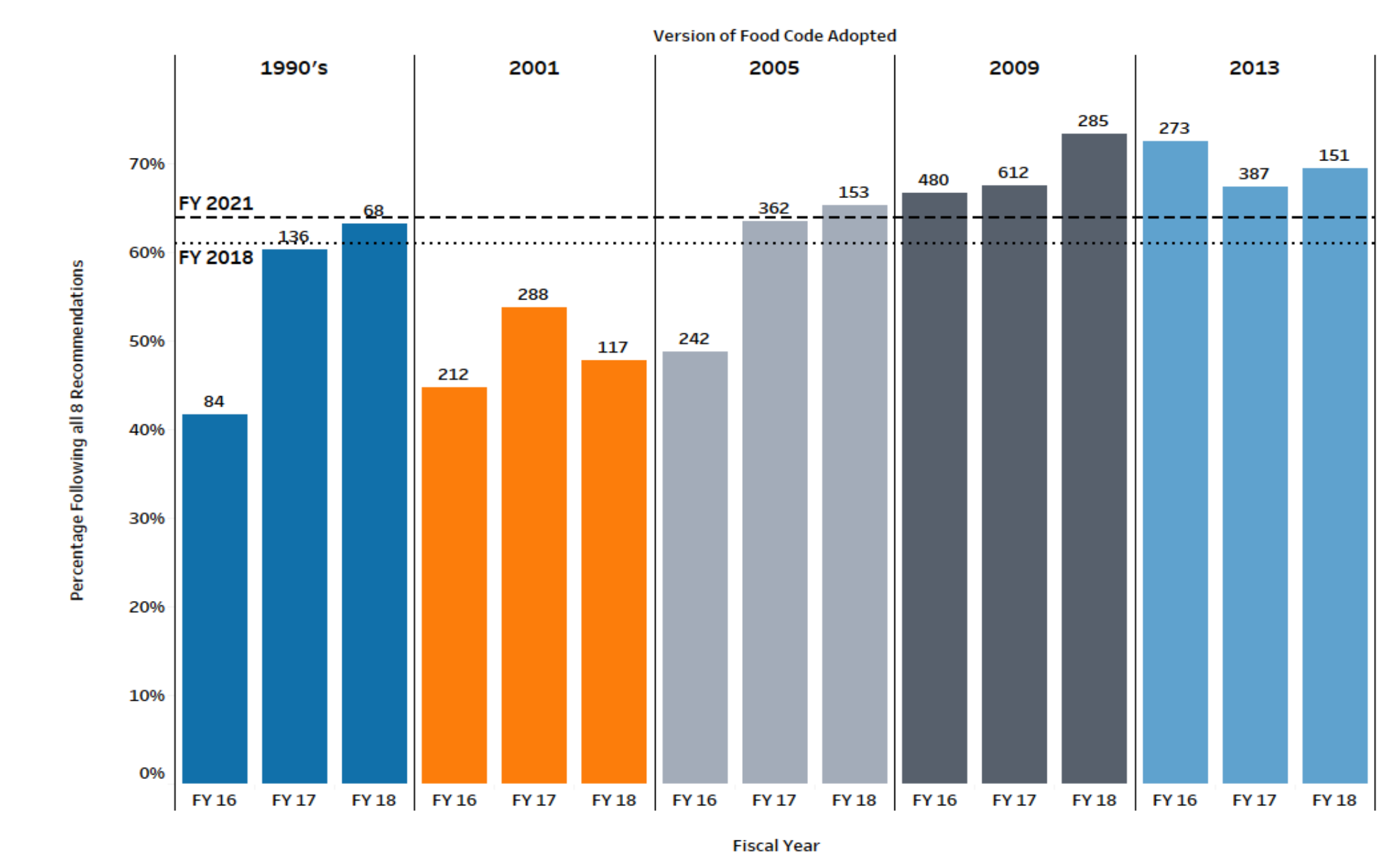
Percentage of Delis Following All Top 8 Recommendations by Quarter



- FY 2016 Quarter 2 - 58.5%
FY 2018 Quarter 2 - 65.3%
FY17-Q3 through FY18-Q2 - 64.6%

The percentage of delis following the top 8 recommendations during the ongoing pilot project was evaluated. FSIS selected these 8 recommendations because they were: 1) found to significantly decrease the likelihood of illness (according to the Interagency Risk Assessment--Listeria monocytogenes in Retail Delicatessens1), 2) identified as FDA Food Code recommendations, and/or 3) from the Federal Meat Inspection Act (FMIA) and the Poultry Products Inspection Act (PPIA).

Percent of Delis Following All Top 8 Recommendations by Food Code Version

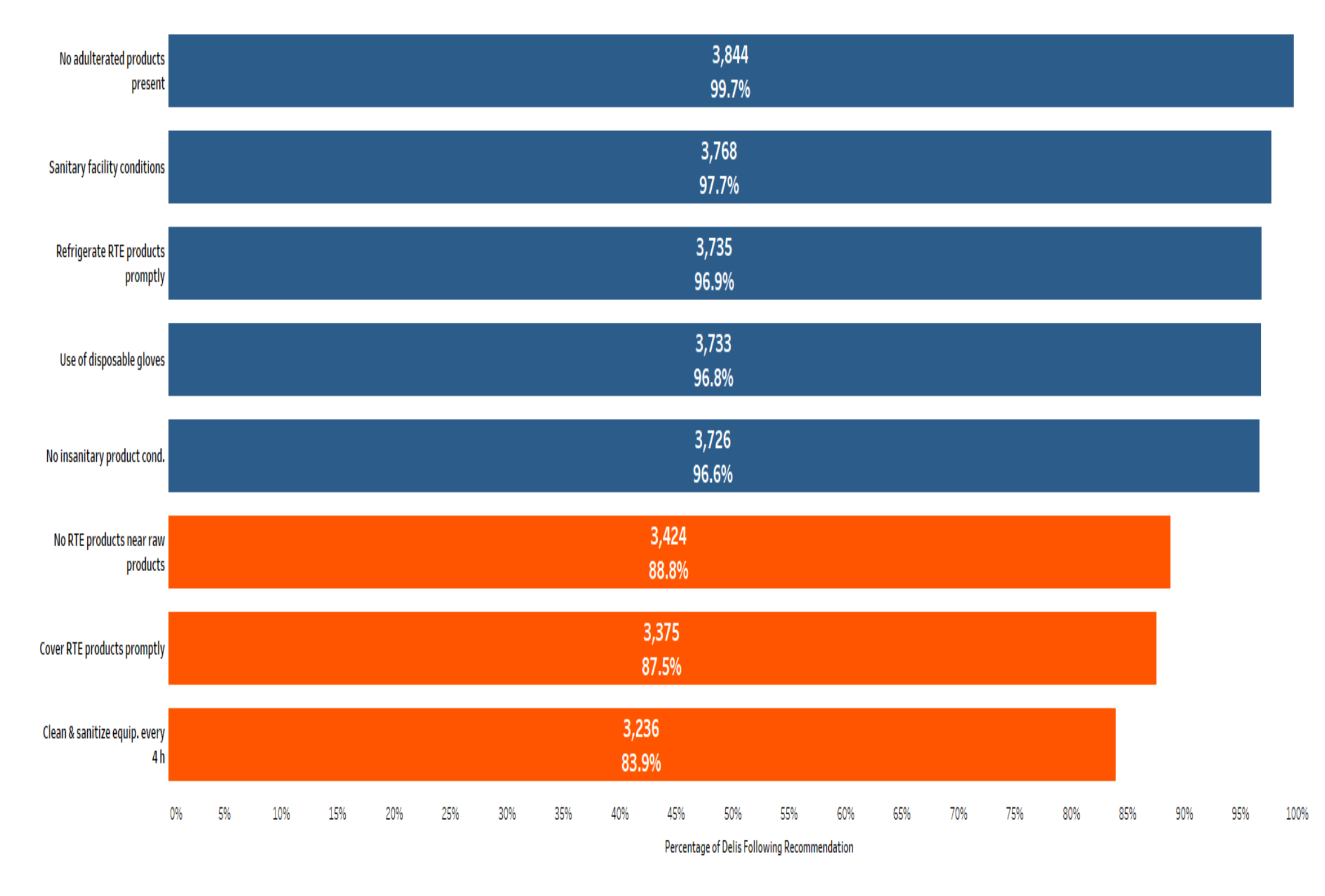


\* 1990's category includes the 1995, 1997 and 1999 versions of the FDA Food Code
\*\* No Food Code Adopted - American Samoa and Northern Mariana Islands

States following the 2013 Food Code were more likely to be following all top 8 recommendations:
- If the state had adopted the 2013 Food Code - 69.5% of delis
- If the state had adopted the 1995, 1997, or 1999 Food Codes - 55.6% of delis

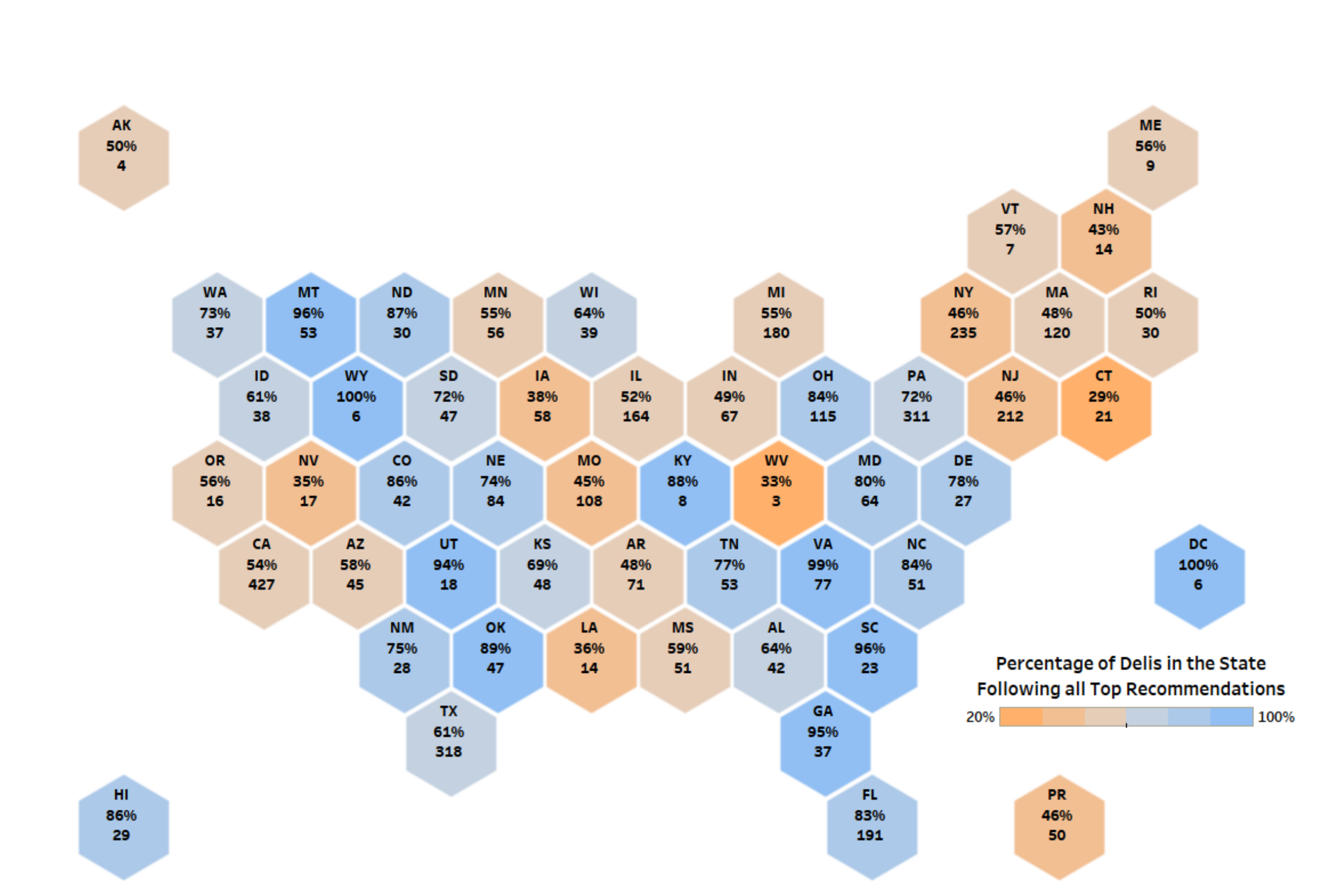
1. USDA/FDA, Interagency Risk Assessment: Listeria monocytogenes in Retail Delicatessens, 2013. United States Department of Agriculture, Food Safety and Inspection Service and U.S. Food and Drug Administration, Center for Food Safety and Applied Nutrition.
2. Centers for Disease Control and Prevention website, found at http://www.cdc.gov/listeria/

Percentage of Delis Following Each of the Top 8 Recommendations (FY 2016-FY2018)



Three of the top 8 recommendations are less likely to be followed.

Percentage of Delis Following All Top 8 Recommendations by State



Percentage of delis following all top 8 recommendations varies by state.