Health Protection

Ensuring Healthy People and Healthy Environments

Summary for Child Care Facilities of the Provincial Health Officer's Report:

Listeria Outbreak: Review and Recommendations for Food Safety in Facilities



Preventing Foodborne Illness and Allergic Reactions in Child Care Facilities

Introduction

Ensuring the health and safety of children in care is one of the most important responsibilities of BC child care facilities.

In 2008 a nationwide outbreak of listeriosis (foodborne illness) resulted in five BC residents contracting the illness and the subsequent death of two. Although listeriosis is not a common infection in the healthy population, for vulnerable individuals symptoms can be severe with a mortality rate of up to 20-30%.

While healthy children do not have an increased vulnerability to listeria infection, immune compromised children and newborn babies do have an increased risk as well as an increased risk to other foodborne illnesses.

In response to this outbreak the Provincial Health Officer provided recommendations for food safety in BC child care facilities. The following is a summary of those recommendations.

Food safety

Food handling

Child care providers who supply meals and/or snacks to the children in their care should be trained in the safe preparation and handling of food. Facilities should ensure that:

- All meat products are purchased from federally registered, provincially licensed or health authority approved processing plants.
- If unfrozen foods frequently approach or exceed the expiry date before consumption, then smaller packages should be purchased. Note: throw out food after the expiry date.
- When preparing eggs (e.g. scrambled) they are cooked to a minimum of 63°C/145°F for at least 15 seconds. If this temperature will not be reached (e.g. soft boiled egg) then only pasteurized eggs or egg products should be used. Dishes containing eggs (e.g. casseroles) should be cooked to a minimum temperature of 74°C/165°F. ¹

Workers who prepare, serve or handle food

- All facilities should maintain records of staff completion of appropriate food safety training as required by legislation. ¹
- Hepatitis A vaccination should be provided to all food workers who prepare or handle food.
- Facility food preparation workers should be trained in preparing texture-modified foods for children with choking risks.

- Facility food preparation workers should be trained in preparing allergen-free meals, e.g. how to prevent cross-contamination of foods.
- Those staff responsible for providing care during meals or overseeing the activity of volunteers should maintain currency in allergy and choking response protocols.²

Foodborne illness and reportable incidents

When it is suspected that a child has become ill as a <u>result</u> of a food served, this should be reported to the Licensing Officer.

Facilities with a food premises permit should consult with Environmental Health Officers (EHOs) and follow all recommendations for outbreak response.

In the case of an outbreak of a foodborne illness, any foods that are suspect should be held for testing or discarded, and parents should be informed of the facility's actions, as well as signs and symptoms to watch for in their children.

Reminder: Foodborne illness, an allergic response to food, and choking incidents that require medical attention are "reportable incidents". ²

Canadian Paediatric Society (CPS) recommendations on foodborne infections and food safety should be followed by all child care providers, for all children in care. CPS position statement notes are reviewed, revised, or retired as need on a regular basis. See the "Position Statements" section of the CPS website (http://www.cps.ca/english/publications/statementsindex.htm) for current versions.

Vulnerable populations and food safety

Immune compromised individuals and individuals with other conditions

Immune compromised individuals have an increased risk of listeriosis ranging from 865X (under treated AIDS patients) to 2584X (transplant patients), making them an extremely vulnerable group.

Other medical conditions may also increase vulnerability to foodborne illness. Facilities should ensure that immune compromised individuals and those with other immunocompromising conditions are served a diet to reduce the risk of foodborne illness.

Immune compromised individuals include children with:

- Bone marrow transplants
- Solid organ transplants
- Oncology patients
- Haematological malignancies
- Chronic renal failure on dialysis
- Undertreated HIV/AIDS (medical assessment needed)

Immune compromising conditions include:

- Liver disease
- Iron overload disorders

The diet for these individuals should exclude "high risk foods". 2

High risk foods

- All soft cheese such as Brie, Camembert, feta, blue veined and Hispanic-style fresh cheeses
- Hot dogs, luncheon meats and deli meats should not be served unless they are reheated to 74°C/165°F and served promptly. Only reheat these foods in individual servings.
- Refrigerated pâtés or meat spreads, unless from a canned source. Only use commercially canned foods.
- Refrigerated smoked seafood and fish, unless in a cooked dish or from a canned source.
 Only use commercially canned foods.
- Store bought, pre-made sandwich fillings such as ham salad, chicken salad, egg salad (unless the ingredients have been processed to reduce the risk of foodborne pathogens.)
- Raw or undercooked meat, poultry fish and shellfish. ¹
- Raw (unpasteurized) milk, milk products or juices.

Preventing choking and allergic reactions in children

Child care facilities should:

 Ask parents if their children have food allergies/ intolerances on the registration forms when children are enrolled and annually thereafter.

If an allergic child is registered at the child care facility, the facility should:

- Ensure care providers are trained on emergency response procedures, including administration of epinephrine when indicated.
- Institute a policy of children not sharing food items if meals/snacks are supplied from home.

- For facilities where foods are brought from home and there are highly allergic children, ensure washing of hands and tables before and after mealtimes to reduce the risk of crosscontamination.
- If a highly allergic child attends the facility, it may be warranted to avoid the food of concern altogether.

Ensure all staff receive training in choking emergency response for different age groups (e.g. infant, toddler, preschooler).

¹ Related to requirements under the Food Premises Regulation.

² Related to requirements under the Child Care Regulation

For more information contact your local Licensing Officer or local Environmental Health Officer.
Reference
Office of the Provincial Health Officer. 2009. Listeria Outbreak: Review and Recommendations for Food Safety in Facilities.