

1. Haringey Council Procedure

1.1 This procedure **outlines the Council's intentions regarding** food handling while suffering from certain infections.

1.2 People who work around open food while suffering from certain infections (mainly from bacteria and viruses) can contaminate the food or surfaces the food may come into contact with. This can spread infection to other people through the food.

1.3 Annex II, Chapter VIII of Regulation (EC) 852/2004 requires that:

- **"No person suffering from, or being a carrier of a disease likely to be transmitted through food or afflicted, for example, with infected wounds, skin infections, sores or diarrhoea is to be permitted to handle food or enter any food-handling area in any capacity if there is any likelihood of direct or indirect contamination."**
- **"Any person so affected and employed in a food business and who is likely to come into contact with food is to report immediately the illness or symptoms, and if possible their causes, to their manager or supervisor."**

1.4 Haringey Council accepts its legal duties to protect food from contamination, to prevent the spread of infection and to comply with the above legal requirements.

This procedure aims to help managers and staff prevent the spread of infection by advising which illnesses and symptoms staff should report and what managers should do in response. This document will also advise on any other action that may be required to prevent the spread of infection.

This procedure has been produced in conjunction with the Food Standards Agency "Food Handlers: Fitness to Work - Regulatory Guidance and Best Practice Advice For Food Business Operators 2009" guidance document.

1.5 In summary:

- **Diarrhoea and/or vomiting are the main symptoms of illnesses that can be transmitted through food.**
- **Staff handling food or working in a food handling area will need to report these and certain other symptoms to management immediately.**
- **Managers must exclude staff with these symptoms from working with or around open food, normally for 48 hours from when symptoms stop naturally.**

1.6 The Council aims to promote positive policies regarding health and safety concerns at work. Each employee, regardless of status, is responsible for strictly adhering to the Council's policies and procedures that are available on the Council's staff intranet.

1.7 In carrying out its responsibility, the Council will recognise that it will be necessary to bear in mind that there may be certain employees who may share characteristics which may render them more vulnerable than others and for whom special accounts may need to be taken when carrying out risk assessment and making safety provisions. This additional vulnerability may be because of their age, disability, gender including gender reassignment, or their ethnicity or because of their religion and belief or non belief or because of their sexuality.

1.8 The procedure will be kept under constant review and amended when necessary.

## 2. Scope of Procedure

2.1 This procedure applies across all Haringey Council buildings and schools and applies to all food and drink provided by the Council to staff and visitors.

Although this procedure does not apply to services contracted out to external providers who are contract caterers and retailers, such as school meal providers and cafeterias, the Council would still expect them to apply similar principles.

2.2 This procedure shall apply to all employees, students, non-employees such as temporary and agency staff and visitors handling food and drink.

2.3 The procedure and above regulations do not apply to food or drink brought in by staff for their own consumption, although the Council expects the standards in this document to be followed in relation to staff kitchen areas.

## 3. Key Terms and Summary Information

### 3.1 Key Terms

Food	Any substance or product, whether processed or unprocessed, intended to be or reasonably expected to be consumed by humans. This to include drinks and water or any substance incorporated into the food during its preparation or treatment.
Food handler	Mainly refers to people who directly touch open food as part of their work. They can be employed or agency staff. However, it also includes anyone who may touch food contact surfaces or other surfaces in rooms where open food is handled. This is because they can also contaminate food by spreading microorganisms, for example to surfaces that food will come into contact with, e.g. work tops and food packaging before it is used. They can also contaminate other surfaces such as door handles which can then contaminate the hands of people who handle food directly for example. The term can therefore apply to managers, cleaners, maintenance contractors and inspectors for example. It is the effect of their presence that is important, not the

	reason for them being there.
Food handling duties	Include directly handling open food or touching surfaces that will come into direct contact with food, such as primary food packaging before use and food equipment.
Food handling areas	Are where food handling duties take place.

## 4. Responsibilities

### 4.1 Directors

- 4.1.1 Bring to the attention of all their managers/head teachers and staff the contents of this procedure and monitor its implementation.

### 4.2 Managers/Head Teachers

To minimise the risk of food becoming microbiologically contaminated by premises/food handler by:

- 4.2.1 Informing staff, contractors and those under their control of this procedure and ensure they comply with it and any other supporting arrangements.
- 4.2.2 Explaining good hygiene practices to employees/visitors.
- 4.2.3 Training/instructing and supervising employees in safe handling of food at start of placement and regular refresher training.
- 4.2.4 Ensuring employees have a good working understanding of the principles of food hygiene and that this is constantly monitored.
- 4.2.5 Advising employees of their legal obligation to report any infectious/potentially infectious condition at their induction.
- 4.2.6 Requiring all food handlers to read and sign the 'Food Handlers Information and Declaration Form' in Appendix 3 before they start work.
- 4.2.7 Excluding any person from food handling duties and food handling areas if they have confirmed or have symptoms of foodborne illness/or if they have an area of infected skin that cannot be covered (as described in Section 6).

The length of the exclusion is usually 48 hours from when their symptoms stop and is explained fully in Section 6, but there may be some exceptions to this.

- 4.2.8 Following the requirements set out in the 'Management of Ill Health for Food Handlers – Information for Management' summary in Appendix 2 should an individual become ill.

- 4.2.9 Assessing the risk to food safety of anyone found to have been working with or around food whilst ill. Action taken should be in line with this procedure. Any food that is suspected to be contaminated must be disposed of immediately. If in doubt, Haringey Council's Food Safety Team can be contacted for advice.
- 4.2.10 Requiring all new food handlers, visitors, staff returning from abroad to complete the 'Food Handlers Pre-Placement / Visitor / Returning from abroad' form in Appendix 1. This will help provide information about the individual's fitness for employment as a food handler or for specific task within or near a food handling area.
- 4.2.11 Ensuring any visitors to food premises or food handling areas while food is being prepared are asked to wear appropriate protective clothing (e.g. hair covering, disposable coat) and given the 'Food Handlers Pre-Placement / Visitor / Returning from abroad' questionnaire to complete prior to admittance to a food handling area.
- 4.2.12 Supplying employees with the 'Health, Safety & Hygiene Rules For Food Handlers' leaflet in Appendix 4 to remind them of the basic rules when working in food handling areas.

#### 4.3 Food Handlers

Food handlers must familiarise themselves with this procedure, and:

- 4.3.1 Practice good personal hygiene.
- 4.3.2 Maintain good hygiene standards in the workplace.
- 4.3.3 Report infectious/potentially infectious conditions to management prior to work or immediately if taken ill at work, or if becoming ill after returning from abroad.

Reportable conditions will include:

- Diarrhoea or vomiting.
- Stomach pain, nausea, fever or jaundice.
- Household member with diarrhoea or vomiting.
- Infected skin, nose or throat.

The 'Health, Safety & Hygiene Rules For Food Handlers' leaflet in Appendix 4 contains a simple summary of the symptoms and requirements that anyone working in a food handling area needs to be aware of.

- 4.3.4 Leave the food handling area if you fall ill at work (particularly if you have diarrhoea or vomiting) and tell the Manager what has happened.
- 4.3.5 When returning to work after an illness:
- Take extra care when washing your hands.
  - Tell the Manager if they do not know you were ill, for example if you were ill on holiday.

4.3.6 Attend training/health surveillance if requested.

5. Other documents you may need to consider

#### 5.1 Legislation and Guidance (hyperlinks)

5.1.1 [Food Handlers: Fitness to Work 2009 - Food Standards Agency regulatory guidance](#)

5.1.2 [Personal hygiene and fitness to work guidance - Food Standards Agency](#)

#### 5.2 Forms and Procedures (hyperlinks)

5.2.1 [Haringey Council Occupational Health intranet link](#)

5.2.2 [Haringey Council Environmental Health Team \(Food safety\) intranet link](#)

5.2.3 [Haringey Council accident and incident management procedure](#)

5.2.4 [Haringey Council food safety procedure](#)

#### 6. Action to Take

This guidance is based on the Food Standards Agency 'Food Handlers: Fitness to Work' regulatory guidance 2009.

##### 6.1 Why infections are a problem

6.1.1 Food, when contaminated by harmful micro-organisms, e.g. bacteria or viruses, can cause illness. In spite of increased legislation, inspection and education, the **notification of "food poisoning" continues to rise. The majority of these episodes** result from inappropriate food preparation or cooking in the home. However, a small proportion of these cases result from food being contaminated by food handlers or by poor practice. This procedure aims to prevent the introduction of infection into the workplace and subsequently into food by food handlers and is to be applied at pre-employment, transfer to food handling work and in the development of **new** health problems in existing food handlers.

##### 6.1.2 Notification of food poisoning disease - background

The Public Health (Control of Disease) Act 1984 requires medical practitioners and laboratories to notify their local authority and/or public health team of suspected cases of certain infectious diseases including food poisoning diseases (some of which are listed below). The local authority environmental health team (food safety team), where the patient usually resides, will carry out an investigation, often in consultation with Public Health England. The environmental health team have legal powers to prevent the spread in infection, which includes excluding the patient (food handler) from work for a set period of time and disclosing the exclusion to the food business operator (for example, Haringey Council), although this is not usually necessary. A food handler confirmed to have had food poisoning will only be permitted to return to food handling activities by the local environmental health team. The Manager must obtain written

confirmation from either the investigating environmental health team or the employee's GP confirming that the food handler can return to work.

The main purpose of this notification system is to enable prompt investigation, risk assessment, and response to cases of infectious disease that present (or could present) a significant risk to health.

## 6.2 Gastro-intestinal Illness

### 6.2.1. Symptoms of gastrointestinal illness includes:

- Diarrhoea
- Vomiting
- Stomach cramps or pain
- Nausea
- Fever

### 6.2.2 If a food handler suspects that they are suffering from gastrointestinal illness or food poisoning (i.e. sickness and diarrhoea) it is recommended that they visit their medical practitioner (GP) as soon as possible who might ask them to submit a faecal/urine sample for examination. They must also inform their Manager of their symptoms immediately.

## 6.3 Returning to work

### 6.3.1 After a gastro-intestinal illness, management should:

- Continue to exclude food handlers for 48 hours from the time that symptoms stop of their own accord or from the end of any treatments of the symptoms. with medicine such as anti-diarrhoeal drugs (if they are used). For example, symptoms end from 5pm Monday, so the person can safely resume work from 5pm Wednesday. The time can be counted from the first normal stool if it's not clear when symptoms ended.
- Where an individual has had a single bout (e.g. one loose stool) or incidence of vomiting and 24 hours have elapsed without any further symptoms and this is not accompanied by fever, it is unlikely the individual is infectious. In this case, if there is no other evidence to suggest an infectious cause, the individual can resume work before the 48-hour limit. Extra care should be taken over personal hygiene practices on return to work. A different approach may be needed if their work requires extra precautions to protect vulnerable consumers, such as people who are already ill or young children. These are elderly people, people who are ill or immuno-compromised or children under the age of five.
- It is important to carry out good hand washing and good hygiene practices when returning to work in a food handling area.
- Where an individual is diagnosed with a specific infection, this may require different action. See section 6.4 below for further guidance on the action that should be taken by management. If the cause has been confirmed as non-infective after they were excluded, then they can also return.

6.3.2 Falling ill after returning from holidays or workers new to the UK, management should:

- Complete the 'Food Handlers Pre-placement/Visitor/Returning from abroad' questionnaire in Appendix 1 to gather information from any new staff and existing staff returning to work from visits or holidays abroad.
- Ensure that anyone falling ill after coming to the UK to work or just returning from a visit abroad seek medical advice quickly.

#### 6.4 Action to take for the following gastro-intestinal illness

6.4.1 The following diagnosed infections will require the action below:

- Salmonella (except Salmonella Typhi and Salmonella Paratyphi A, B or C)
- Campylobacter
- Vibrio (except Vibrio cholerae O1 and O139)
- Yersinia
- Bacillus
- Staphylococcus aureus
- Clostridium perfringens
- Protozoa, e.g. Cryptosporidium, Giardia lamblia (except Entamoeba histolytica)
- Shigella sonnei (but not Shigella dysenteriae, flexneri, and boydii)
- Worms (except Threadworm and Taenia solium)

Other infections may require different action. Those requiring different action are also covered below. If the infection is not covered in this procedure, then it is advisable to exclude the food handler and seek medical advice.

6.4.2 For the infections listed in section 6.4.1 above, management should take the following action:

- Exclude any person from food handling duties and food handling areas for 48 hours if individuals have a gastrointestinal illness (demonstrated by them having the symptoms described in section 6.2 above) and/or if they have an area of infected skin that cannot be covered (as described in section 6.5.6 below).
- Where there is uncertainty about whether to exclude someone, it is advisable to take into account the nature of the likely consequences of something going wrong should the wrong decision be made. Factors to consider include the nature of their duties and the food, processes that will be applied to the food and whether vulnerable people will be consuming the food, e.g. young children or people who are already ill. If necessary, advice can be obtained from the Corporate Health and Safety Team, or the Council's Food Safety Team (Environmental Health) and/or the individual's medical practitioner.

- Take steps to ensure other people in rooms and areas have not been contaminated by infected workers. The 'Health, Safety & Hygiene Rules For Food Handlers' in Appendix 4 contains a simple summary for managers to give to anyone working in a food handling area, to help them understand what health, safety and hygiene measures they should take.
- 'Management of Ill Health for Food Handlers – Information for Management' in Appendix 2 contains a simple summary of the requirements that managers and headteachers should follow should an individual become ill.

#### 6.5 Action to take for other specific infections

Managers/Head Teachers should follow the action below for the following diagnosed infections:

##### 6.5.1 Acute Diarrhoea & Vomiting

- Exclude food handlers for 48 hours. This is counted from the time that symptoms (mainly diarrhoea) stop of their own accord or from the end of any treatment of the symptoms with medicine such as anti-diarrhoeal drugs (if they are used). For example, symptoms end from 5pm Monday, so the person can safely resume work from 5pm Wednesday. You can count from the time of the first normal stool if you **aren't sure when symptoms ended**.
- Reassess 48 hours after symptoms have settled, to ensure that no more instances of diarrhoea and vomiting have occurred and formed stools are now being passed – this excludes *E.coli* which requires two consecutive negative stool samples, the second sample being taken 48 hours after the symptoms have stopped naturally.
- If the individual is diagnosed with a specific infection, this may require different action as specified further on in this procedure. If the cause has been confirmed as non-infective after they were excluded, then they can return to work.

##### 6.5.2 *Salmonella* Typhi and *Salmonella* Paratyphi A, B or C (Enteric fever)

- Anyone who suspects they are suffering from this illness or has had it in the past, or who has a lot of contact with someone who has it shall be excluded from food handling and food handling areas until cleared to return to work (in writing) by a medical professional.
- If the person is confirmed as being infected or is a carrier of the bacteria, the exclusion period could be lengthy, three months or more, to allow for treatment and confirmation of clearance of infection through faecal testing.

The Manager/Head Teacher should refer the case to the food handler's local Environmental Health Team who should investigate and manage the case with the assistance of Public Health England.

##### 6.5.3 Hepatitis A



- Exclude from food handling and food handling areas immediately for at least 7 days after the onset of jaundice and/or other symptoms. Any food handler who develops jaundice for an unknown reason should be excluded immediately and seek medical advice. Symptomless contacts do not require exclusion.
- Exclusion is not required for people who are in household contact with infected people, as long as they follow good hygiene practice.
- If someone is found to be infected, any food that may have become contaminated must be disposed of and thorough cleaning and disinfection must be carried out over the work area.

#### 6.5.4 Shiga toxin-producing *Escherichia coli* (*E. coli*)

- Exclude from food handling and food handling areas until written medical clearance is obtained by a medical professional. This will usually require two consecutive negative faecal samples.
- Anyone who has household contact with someone infected with *E. coli* O157 must inform their manager. They should be excluded from any work that involves direct handling or serving of open ready to eat foods until microbiological clearance is obtained in the same way as above.
- If Management are not confident in the worker's personal hygiene practices, or if they are unable to protect themselves from the infected person, e.g. if they are a parent, they should also be excluded from all food handling duties and areas.

#### 6.5.5 Norovirus

- Exclude symptomatic food handlers from the entire food business site and not just food handling duties and areas for 48 hours from when symptoms stop, even if Norovirus is only suspected. If their symptoms do not develop, return to work is possible after 24 hours from contact with the infected person.
- If Norovirus is confirmed and someone has vomited anywhere on the premises of the food business, food should be destroyed where it has become unsafe.
- Thorough cleaning and disinfection should be carried out over a wide area after someone has vomited in or near a food handling area using sodium hypochlorite disinfectants where possible. Soft furnishings must be steam cleaned or cleaned with other liquid disinfectants or if necessary, destroyed to ensure the complete elimination of the virus from the food handling area.
- Anyone who has household contact with someone infected with Norovirus should inform their Manager.

#### 6.5.6 Skin Conditions (including skin infections and injuries)

- Individuals with staphylococcal skin infections such as boils and septic cuts affecting areas of the skin which cannot be covered such as the face including eyes, ears, mouth and gums, should be excluded until the condition is fully treated. For areas of the skin where the infected area can be completely covered, it is usually acceptable to continue working with food as long as the infected area is covered, e.g. by use of a blue waterproof dressing. Covering any dressings on hands with a rubber or a disposable non-latex glove can be considered as an additional layer of protection.
- If an infected lesion cannot be effectively covered, then the person should be excluded from any work likely to lead to the contamination of food. Lesions that may not be possible to cover adequately would include weeping lesions of the eyes, ears, mouth and gums.

Non-infected skin lesions are not a bar to food handling work but should be covered by a clean blue waterproof plaster.

- Individuals with a history of skin disease (including eczema) should not be barred purely because of this. An assessment of the condition should be made to determine whether gloves should be worn or whether food handling should be ruled out should flare-ups of the condition occur.

Each individual should be assessed case by case, taking into account the microbiological risks likely from secondary infected skin conditions and food contamination with skin scales in certain skin conditions.

#### 6.5.7 *Entamoeba histolytica* (Amoebic dysentery)

- Exclude those handling and serving open ready to eat foods for 48 hours and seek written medical clearance before returning. This usually involves a single negative stool sample taken at least a week after the end of treatment.

#### 6.5.8 *Shigella dysenteriae, flexneri, and boydii*

- Exclude from food handling and food handling areas for 48 hours for those handling and serving open ready to eat foods. Written medical clearance will be required before returning. This usually involves two consecutive negative stool samples taken at intervals of at least 48 hours.
- Anyone who has household contact with someone infected should inform their Manager. They should be excluded from any work that involves direct handling or serving open ready to eat foods until written medical clearance is obtained in the same way.

#### 6.5.9 Worms – Threadworm and *Taenia solium* (tapeworm)

- Threadworm – exclude from direct handling and serving of open ready to eat foods until the infected person is treated.

- *Taenia solium* – exclude from direct handling and serving of open ready to eat foods until two negative stool tests at 1 and 2 weeks post treatment. If Managers are not confident in their personal hygiene practices, exclude from all food handling duties and areas as well.

#### 6.5.10 *Vibrio cholerae* O1 and O139

- Exclude from food handling and food handling areas for 48 hours with those handling and serving open ready to eat foods and seek written medical clearance which normally involves two consecutive negative stool samples taken at intervals of at least 24 hours.

### 6.6 Factors not associated with microbiological contamination of food

6.6.1 Disorders and non-infective causes such as morning sickness during pregnancy, some medicines and medical treatments, **Crohn's disease**, coeliac disease, ulcerative colitis, diverticulitis, cystic fibrosis, inflammation of the bowel, cancer of the bowel, irritable bowel disease or dietary indiscretion (e.g. consuming too much alcohol or spicy food) which can cause non-infective diarrhoea and vomiting do not give cause for exclusion. The presence of a colostomy/ileostomy should not be a bar to food handling. Care with personal hygiene should be stressed. If in doubt, it is best to assume that the cause is an infection and to exclude the person until there evidence to show it is safe for them to return to work.

6.6.2 It is highly unlikely that chest and other respiratory diseases lead to food borne infections. However, it is quite common for people to have bacteria such as *Staphylococcus aureus* in their nasal passages, mouth or throat, which can contaminate food if they sneeze or cough on it. Therefore, coughing and sneezing over food, as well as being unhygienic, should be avoided and individuals should be excluded until they are no longer coughing or sneezing. Assess each situation, case by case (e.g. bronchiectasis, chronic bronchitis) and seek confirmatory reports from their medical practitioner before excluding such cases.

A history of tuberculosis is not a reason to exclude a food handler for food safety reasons. However, the disease may affect an individual's general health in such a way as to make them unfit for work or they may pose a risk of infection to others in the workplace. Health professionals can provide further advice if it is needed.

6.6.3 Blood borne infections such as HIV, hepatitis B or C, do not themselves present a risk to food contamination. As long as these individuals are generally well, there is no reason not to employ people with these infections as food handlers.

**Importantly** the most effective method of reducing contamination risk by food handlers to the product is:

1. Good personal hygiene by food handlers.
2. Reporting of illness by food handlers immediately to management as detailed in this procedure.

3. Maintenance and monitoring of food hygiene training (refer to Food Safety procedure for further information).

#### 6.6.4 Household contact

A food handler who has someone in their household suffering from diarrhoea and vomiting does not always require exclusion, but they should inform management and take extra precautions, such as more stringent personal hygiene practices. If they start to feel unwell at work, they should report this immediately to Management. Cases that may require exclusion are where the contact has enteric fever (Typhoid), *E. coli* O157 and Norovirus.

### 7. Record Keeping

- 7.1 Individual questionnaires, health checks and medical notes must be retained by the Manager/Head Teacher for a minimum of 6 years.

Managers/Head Teachers must be mindful of the confidential/private nature of the information on individual health questionnaires and other similar documents. The documents should be securely stored in the individual's personnel file.

### 8. Monitoring and Review

- 8.1 Managers/Head Teachers should regularly check that this procedure is being followed by staff. **If it isn't, managers/head teachers** must find out why not and put measures in place to ensure it is.
- 8.2 This safety procedure must be reviewed by the **Council's** Corporate Health, Safety and Wellbeing Board within a period not greater than 26 months and where necessary, it will be revised as soon as practicable where changes in statute or industry best practice deem the content out of date.

### 9. Approval of the Procedure

- 9.1 This safety procedure was reviewed by the Corporate Health, Safety and Wellbeing Board and approved by the Council's Head of Organisational Resilience on 10th November 2020. Any required variations from this safety procedure should be brought to the attention of the Council's Head of Organisational Resilience.

**Approved by (print name): Andrew Meek, Head of Organisational Resilience**

**Signature:**



**Date: 27<sup>th</sup> November 2020**

Appendix 1

Food Handlers Pre-Placement / Visitor / Returning from abroad

This form should be completed by the individual and used by Management to establish the health status of new food handling staff, visitors and staff returning from abroad. This form will be retained by the Manager/Head Teacher and within the employee's personnel records.

Personal information generated by completion of this form provides a medical view of your fitness for employment as a food handler or for a specific task within or near a food handling area. Without this information, your assessment of fitness will not proceed further. The Manager/Head Teacher may require further information about your health before coming to a view on your fitness. Your consent to further reports from your medical professionals may be sought in these circumstances before a working with or around food. All such medical information will be kept in strict medical confidence by the Manager/Head Teacher.

Please complete all sections and return to the Manager/Head Teacher

\* Please delete where necessary

<b>SECTION 1 – Personal details</b>	
Surname:	Sex: M/F*
Forename:	Date of Birth:
Address:	Home/Mobile telephone number
Job Title:	Directorate: Dept:
No. of hours worked/week:	Do you have a basic Food Hygiene certificate Y/N* If YES, year certificate issued

<b>SECTION 2 – Health Details</b>	<b>YES</b>	<b>NO</b>	<b>If Yes, please give details with dates: (Continue on additional sheet if necessary)</b>
Have you ever had: Typhoid, paratyphoid fever, OR are you now known to be a carrier of <i>Salmonella</i> Typhi or Paratyphi?			
Are you a carrier of any type of <i>Salmonella</i> ?			
In the last 21 days, have you had contact with anyone, at home or abroad, who may have been suffering from typhoid or paratyphoid?			
At present or in the last 7 days, are you suffering from: i) Diarrhoea and/or vomiting? ii) Stomach pain, nausea or fever?			
At present, are you suffering from: i) Skin infections of the hands, arms or face, e.g. boils, styes, septic fingers, septic fingers, discharge from eye / ear / gums / mouth. ii) Jaundice.			

## Health and Safety Procedure

### HSP17 Food Handlers: Fitness to Work Procedure



Do you suffer from a recurring bowel disorder?			
Do you suffer from recurring infections of the skin, ear or throat?			
Countries visited in the last 6 weeks			

I hereby declare that all-medical information given by me is true and accurate to the best of my belief and knowledge. I consent to the use of my confidential medical data by the Manager/Head Teacher for the purpose of assessing my fitness for employment as a Food Handler or as a visitor to a food handling area.

**Any 'YES' answer will require Management to assess the individual's suitability to work. This procedure, or health professionals (including the Council's Occupational Health Service), or the Corporate Health and Safety Team, or the Council's Food Safety Team can also provide advice.**

<u>Signature of individual:</u>		<u>Date:</u>	
<u>Management to describe action taken:</u>			
<u>Action taken by [insert name]:</u>			

## Appendix 2

### Management of Ill Health for Food Handlers – Information for Management

Food handlers who become ill **must** report this to Management to comply with the “Food Handlers Information and Declaration” in the Food Handlers: Fitness to Work Procedure as signed by all food handlers. All food handling areas should display the criteria for reporting in “prominent positions”, outside the kitchen/food handling area.

Once reported, a food handler with an infection should remain excluded from any work that involves direct handling or serving of open ready to eat food until written medical clearance is obtained. This will be decided by the medical professional who should provide a written medical clearance certificate before returning to work – this should be kept in the individual’s personnel file.

#### Summary information for Managers and Headteachers:

- The law requires you to exclude anyone from work if they have an infection that can be passed on through food and there is any likelihood of them contaminating food directly or indirectly.
- This would apply to people employed as food handlers or to other staff or visitors working in areas where open food is handled.
- Diarrhoea and vomiting are the main symptoms of infections that can be transmitted through food.
- Other symptoms can include stomach cramps or pain, nausea and fever. Skin infections are also a problem too.
- This is because some infections, mainly from bacteria and viruses, can spread in faeces and vomit. This can contaminate infected persons’ hands when they have diarrhoea or vomiting. Vomiting can also spread it directly. If an infected person contaminates food or food contact surfaces, in many cases the infection can spread to people who eat the food.

#### **Action to take:**

- Ensure that all staff handling food and anyone working in a food handling area knows to report the symptoms of infection and if they have close contact with someone with these symptoms.
- Exclude staff with these symptoms from working with or around open food.

#### Returning to work:

- The exclusion period is normally 48 hours from when symptoms stop naturally. Different action is required in special cases – please refer to Section 6 for action to take.
- When excluded staff return to work, ensure that they take extra hygiene precautions, particularly hand washing.



- Not all cases of diarrhoea or vomiting are infectious, e.g. morning sickness, so exclusion is not always needed.

#### Other facts:

- People can have infections without symptoms, so it is important that Managers/Headteachers try to ensure that everyone washes and dries their hands regularly at work, especially after using the toilet.
- Managers/headteachers should assess the risk to food safety of anyone found to have been working with or around food whilst infectious and take the appropriate action to ensure that unsafe food is not released.
- If you are not sure what to do in any situation, you can seek advice from the [Corporate Health and Safety Team](#), the [Council's Food Safety Team](#) and/or the [Occupational Health Service](#).

#### Protocol For Assessing Fitness To Work As A Food Handler

1. The Manager/Headteacher must ensure that the 'Food Handlers Pre-placement/Visitor/Returning from abroad' questionnaire (Appendix 1 in the Food Handlers: Fitness to Work Procedure) is completed for:
  - Individuals being considered for food handling work, whether new employees or transfers from other roles,
  - Visitors working in or around areas where open food is handled, including maintenance staff and contractors, and
  - Staff returning from abroad

Completed questionnaires are then assessed by the Manager/Headteacher and any necessary action taken prior to commencement of work in or around a food handling area. This record is retained by the Manager/Headteacher in their personnel records for 6 years.

2. Individuals considered suitable for food handling work then complete a "Food Handlers Information and Declaration" Form (Appendix 3) which is retained by the Manager/Headteacher in their personnel records for 6 years.
3. Appropriate Food Hygiene Training is then organised by the Manager/Headteacher – please refer to the Food Safety Procedure for more information.
4. The Manager/Headteacher will give the individual the 'Health, Safety & Hygiene Rules for Food Handlers' (Appendix 4 in the Food Handlers: Fitness to Work Procedure) to read.



Appendix 3

Food Handlers Information and Declaration

Your Responsibilities

You can pass on illnesses when you work with or around food. To prevent this:

- Tell the Manager or Headteacher immediately if you are ill
- Wash and dry your hands with soap and warm water before working with any food, especially after going to the toilet

- You can affect the safety of food when working with or around food.
  - Your hands and clothes can spread harmful bacteria or viruses to food or surfaces that will come into contact with food.
  - These bacteria or viruses can come from you if you are ill.
- Wash and dry your hands after handling anything that might be contaminated and throughout the day.
- Where practical, try not to touch things that might require you to then wash your hands.

Declaration

1. I agree to report to the Manager or Headteacher before commencing work if I suffer from, or have returned from sickness absence with any of the following:
  - a) Diarrhoea and/or vomiting, skin infections (e.g. boils, septic spots, nail infections, rashes).
  - b) Infected ears, nose, throat, gums or eyes
  - c) Stomach pain, nausea, fever or jaundice.
  - d) i) If, after returning from holiday I suffer from any diarrhoea and/or vomiting.  
or,  
ii) If any member of my household or close contact is unwell with diarrhoea and/or vomiting lasting more than 48 hours.
2. If I fall ill at work, I will seek to leave the food handling area and tell my Manager/Headteacher what has happened.
3. When returning to work after illness, I will:
  - a) Take extra care when washing my hands.

- b) Tell my Manager/Headteacher if they didn't know I was ill, for example, if I was ill on holiday.
4. If I am found to be suffering from/or become a carrier of typhoid, paratyphoid or any other salmonella infection, amoebic or bacillary dysentery, cholera, staphylococcal or any infection likely to cause food poisoning.

I understand that Regulation (EC) No 852/2004, Annex II, Chapter VIII requires me to report any of the above conditions and that it is a condition of my employment as a food handler to comply with the above requirements.

I understand that I must, as a food handler:

- a) Practice good personal hygiene.
- b) Maintain good hygiene standards in the workplace.
- c) Wear the appropriate clothing, no artificial nails, nail varnish or jewellery other than a **plain wedding band ring (no stones)** and **"sleeper"** earrings in the ear lobe only.
- d) Ensure nails are clean and reasonably short.
- e) Hair coverings must be worn by all food handlers working in areas where open food is handled. They should cover all the hair and be put on before protective clothing. If the hair is long, it should be tied back under the hair net.

Signed: .....

Name: .....

Date: .....

Documents given:

- "Health, Safety & Hygiene Rules for Food Handlers" Yes / No
- "Food Handlers Pre-Placement / Visitor / Returning from abroad" Yes / No / NA  
(for individuals new to role, or visitors, or those returning from abroad)

## Appendix 4

### Health, Safety & Hygiene Rules For Food Handlers

All food handlers must complete the 'Food Handlers Information and Declaration' form (Appendix 3 of Food Handlers: Fitness to Work Procedure) and should be adhered to at all times.

#### TRAINING

Training needs will be established with management to enable you to undertake your job effectively and safely.

#### DEPARTMENTAL SAFETY

Everyone is responsible for departmental safety and accident prevention.

- Do you know your First Aiders and position of First Aid kit and eye irrigation bottle?
- Report any accidents immediately to Manager/First Aider.
- Only blue plasters to be worn in a food handling area.
- Use “wet floor” signs during cleaning or after a spillage and clean and dry the area as soon as possible.
- Be vigilant and observant for potential hazards (reporting to Manager or the appropriate person as necessary).
- Report any faulty equipment to the Manager/Headteacher.

#### FIRST AID

- Report to First Aiders all injuries.
- Burns – cool as soon as possible under cool or lukewarm running water for at least 10mins, when cool temporarily cover with cling film or clean plastic bag (never use adhesive dressing). Seek first aid treatment if necessary.
- Cuts – apply pressure using a clean dry absorbent material for a few minutes, clean and cover the wound with a blue waterproof covering. If a deep, large cut, inform the Manager, and complete accident report. Seek first aid treatment if necessary.

#### ILLNESS & PERSONAL HYGIENE

Management has a clear responsibility to ensure food handlers maintain high standards of personal hygiene and wear the correct protective clothing.

You can pass on illnesses when you work with or around food. To prevent this:

- Tell the Manager or Headteacher immediately if you are ill.
- Wash and dry your hands with soap and warm water before working with any food, especially after going to the toilet.
- Hands should be washed using liquid soap and thoroughly dried:

➤ before starting work

- each time the area is entered
  - after returning from breaks
  - changing a dressing or touching open wounds
  - after using the toilet
  - after handling raw meat, eggs, fish or poultry and before handling other food
  - after handling refuse or waste food
  - if sneezed or coughed into hands
  - after smoking
  - after eating
  - any contact with other people's faeces or vomit, e.g. changing nappies
  - touching animals / pets
- After hands are washed, they must be dried hygienically, e.g. using disposable paper towels or a hand dryer.
  - Nails must be clean and short – no nail varnish.
  - Nail extensions are NOT allowed.
  - No eating, spitting, chewing or smoking in food areas.
  - Keep hair fully covered. Hair coverings (e.g. hair nets or hats) must be worn by all food handlers where open food is handled but is not necessary when handling pre-packaged food and drink. They should cover all the hair and be put on before protective clothing. If the hair is long, it should be tied back under the hair net. Men with facial hair may be required to wear a snood.
  - Body piercing – only one pair of small, slim sleeper earrings (not studs) are allowed in the ear lobes and tongue studs may remain in place.
  - No watches or jewellery (except plain band wedding rings).
  - No strong smelling perfumes, aftershave or heavy make-up.
  - Protective clothing, i.e. aprons or coats, should not be worn outside the unit.
  - Uniforms/work clothes must be kept clean and changed into at work and not worn on the way into work.
  - Sensible, low heeled, closed-in shoes should be worn.
  - Cuts and grazes must be covered with a blue waterproof covering that is changed as necessary.
  - The workplace, especially surfaces and utensils, must be kept clean.
  - If you visit the doctor, remember to tell them you are a food handler.

If you have any concerns regarding Health, Safety and Wellbeing, please discuss them with the Manager/Headteacher and/or Corporate Health and Safety Team.