

Gloves should not be used by food handlers solely for the prevention of transmission of micro-organisms to food.

Separation of food preparation from nappy changing areas is essential in order to prevent the contamination of food with Shigella.

Proper disposal of faecally contaminated material is essential in order to prevent the contamination of food with Shigella.

Staff who both prepare food and change nappies need to pay particular attention to regular hand washing with a good technique.

The NHS Plus full guideline¹ specifically addresses the prevention of transmission from infected food handlers. Issues about wearing rings, dental care and nail varnish have not been included here, as they have not been shown to cause infection on their own. However, management may wish to address these and other issues to ensure quality control in production.

References

- 1 NHS Plus, Royal College of Physicians, Faculty of Occupational Medicine. *Infected food handlers: occupational aspects of management. A national guideline*. London: RCP, 2008.
- 2 Department of Health. *Food handlers: fitness to work. Guidance for businesses, enforcement officers and health professionals*. London: DH, 1995.

Further copies of this leaflet are available from NHS Plus:
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Infected food handlers

Occupational aspects of management

Evidence-based guidance for employers

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This leaflet summarises the findings of a review of current evidence and is intended to assist employers by providing advice on the management of infected food handlers and prevention of the transmission of infection from food handlers to food.¹

Definition of a food handler

Food handlers are defined as employees who fall into the following categories:

- people employed directly in the production and preparation of foodstuffs, including those in the manufacturing, catering and retail industries
- people undertaking maintenance or repairs of equipment in food handling areas, whether permanent staff, workers on contract or visitors to food handling areas.

Food handling involves all aspects of treating and storing food, from receipt of raw materials to the delivery of the final prepared product.

Transmission routes from an infected food handler

Infected food handlers are those individuals who carry an infection either with or without symptoms. Raw food and food handled frequently is at greater risk of becoming contaminated.

Symptoms

Common symptoms of food-borne illness:

- diarrhoea (with or without blood)
- abdominal cramps or pain
- nausea
- vomiting
- fever.

Key findings of the review

- Norovirus, *Salmonella enteritidis* and *Salmonella typhimurium* are responsible for the majority of outbreaks of infection caused by transmission from an infected food handler.
- Infected food handlers working while suffering from diarrhoea and vomiting have caused outbreaks of food-borne disease.
- A food handler may be infectious but have no symptoms of illness.
- Thorough hand washing with soap and water, and then drying hands with paper towels or a hot air dryer, is an effective method of preventing spread of infection from an infected food handler to food.

Employer/manager responsibilities

Managers must ensure that a risk assessment of the food being prepared is carried out to ensure that effective controls are in place and accord with current regulations.

Separation of food preparation from nappy changing areas is essential in order to prevent contamination of food.

Managers and food handlers need to be aware that household members with diarrhoea and vomiting may infect a food handler and the food handler may remain symptom free.

Managers need to emphasise to food handlers that they must report signs of ill health to management immediately.

Separate hand-washing and toilet facilities should be available for food handlers.

A competent staff member should demonstrate a good standardised hand-washing technique to staff at induction. Demonstration of this technique should be repeated quarterly.

A multifaceted approach to training, combining education and ongoing feedback on performance, is more effective at achieving behaviour change than traditional methods. Active participatory training is also superior to traditional methods.

Assessing employees' fitness to work

Some food handlers will be employed in organisations with access to occupational health services. Occupational health will be able to advise managers regarding health issues in prospective employees.

Questionnaires are the most commonly used form of health assessment and, if used, should be based on the Department of Health guidelines.²

Infected food handlers should be excluded from work for 48 hours after diarrhoea and vomiting has stopped. However, if the food handler is infected with *Salmonella typhi*, verotoxigenic *Escherichia coli* or hepatitis A, exclusion should be longer and the employer should seek specialist advice from an occupational health professional or general practitioner.

Food handlers' responsibilities

Food handlers' finger nails need to be short enough to be effectively cleaned.

Use of soap and water should be the method of choice for hand washing.

Food handlers need to thoroughly dry hands after washing, using either paper towels or a hot air dryer.