The National Environmental Health Association (NEHA) represents more than 7,000 governmental, private, academic, and uniformed services sector environmental health professionals in the U.S., its territories, and internationally. This workforce represents the second largest constituent of the existing public health workforce, second only to nursing. We are the profession's strongest advocate for excellence in the practice of environmental health as we deliver on our mission to build, sustain, and empower an effective environmental health workforce.

Policy Statement on Enrollment and Conformance W ith the Voluntary National Retail Food Regulatory Program Standards of the Food and Drug Administration

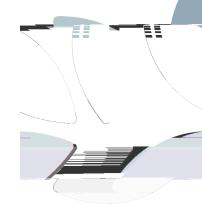
Adopted: July 2023 Policy Sunset: July 2028

The goal of all retail food regulatory programs is to reduce or eliminate the occurrence of illness and deaths from food produced at the retail level (Food and Drug Administration [FDA], 2022a). There are more than 3,000 state, local, tribal, and te Code (FDA, 2022a). The FDA Voluntary National Retail Food Regulatory

I Program Standards) is a tool available for retail food regulatory overarching goal of foodborne illness reduction nationwide through a rammatic improvement.

control and Prevention (CDC) estimates that foodborne illness causes nesses, 128,000 hospitalizations, and 3,000 deaths in the U.S. each , 2011; Scallan, Hoekstra, et al., 2011). Enrollment in the Retail elp retail food regulatory programs prevent foodborne illness and

()-a nn thl nrsanitation and operational and environmental pgerequisite programs while encouragi



NEHA recommends all federal, state, local, tribal, and territorial gover nmental agencies to enroll in the Retail Program Standards to implement current national standards that outline a process of

regulatory agencies in reaching a gold standard for retail food regulation.

The Retail Program Standards consist of nine standards of excellence for the continued improvement of retail food regulatory programs (FDA, 202 3a). The Retail Program Standards were designed to enhance the services that food regulatory programs provide to the public with the goal of reducing the incidence of foodborne illness and death from food sold or served at the retail level (FDA, 2022a). Enrollment in the Retail Program Standards aids in reaching this common goal throug the promotion of a reglatory foundation, reglatory staftrainingarisk based inspection program, a uniform inspection program, foodborne illness response and preparedness.complianceandenforcementmeasures.community enaementselfassessment of programs through the evaluation of resources, and a study of the occurrence of foodborne illness risk factors. The Retail Program Standards recognize the differing needs of regulatory agencies at federal, state, local, tribal, and territorial levels, and aim to lay a foundation for excellence in traditional and emerging food safety practices. Ultimately, the guidelines set forth in the Retail Program Standards will help regulatory agencies reduce foodborne illness risk factors by ensuring agency conformance with FDA best practices.

Today, there are 912 jurisdictions enrolled in the Retail Program Standards that work to measurably improve their existing programs through continuous improvement and better focus on reducing foodborne illness risk factors. FD A has grants and cooperative agreements available to jurisdictions to address barriers to enrollment, such as limited resources, budgets, and staffing. In cooperation with FDA, the NEHA- FDA Retail Flexible Funding Model (RFFM) Grant Program provides three grant types to provide

The Retail Progam Standards prov

on laws and regulations, public health principles, food safety, communication, and inspection protocols (FDA, 2022a). The Retail Program Standards encourage uniform training of regulatory food inspection personnel as a means to reduce variability between inspectional staff during inspection, which ensures that inspectors recognize hazards appropriately and are equipped with the tools and knowledge needed to conduct arislasedinspection.Thistrainingilaly reduces the probability of foodborne disease outbreak s and increases the overall efficiency of the regulatory program.

Enrollment in the Retail Program Standards assists regulatory agencies in reducing ri sk factors by outlining a standardized inspection program based on the HACCP system. Modeling inspection procedures on this systematic approach to prevent foodborne disease outbreaks can enable regulatory staff to easily identify risk factors and effective ly implement any necessary corrective action. Encouraging regulatory agencies to develop a standardized inspection program ensures uniformity of implementation, evaluation, and interpretation of inspections from regulatory staff (FDA, 2022a). Having an established inspection program designed to target the risk factors most associated with foodborne illness can reduce confusion associated with the inspection process, which can reduce the likelihood of overlooking a critical food safety violation during an inspection.

In a key informant interview conducted by NACCHO, jurisdictions enrolled in the Retail Program Standards reported improving the quality and consistency of the service s provided by environmental health specialists working with retail food establishments (NACCHO, 2014). Jurisdictions also reported that using the tools provided by the Retail Program Standards, such as sample documents and training materials, saved valuable time and resources (NACCHO, 2014). The guidance and foundation provided by the Retail Program Standards allows retail food safety programs to operate more efficiently while simultaneously ensuring quality improvement of services focused on reducing the occurrence of foodborne illness.

While enrollment in the Retail Program Standards is not legally mandated, NEHA encourages enrollment and conformance with all the standards. The b enefits of enrollment in the Retail Program Standards include enhancing relationships with industry, improving quality and consistency of services, using existing resources more efficiently, adopting technology to keep better records of inspections, and affecting change at the state level through advocating for changes to the Food Code (NACCHO, 2014). Using a standardized set of guidelines for retail food regulatory programs to be built on will reduce consumer exposure to risk factors associated with foodborne illness.

References

Angelo, K.M., Nisler, A.L., Hall, A.J., Brown, L.G., & Gould, LH. (Epidemiolog) of estaurant associated foodborne disease outbreaks, United States, 1998–2013. Epidemiology & Infection, 145(3), 523–534. https://doi.org/10.1017/S0950268816002314

Centers for Disease Control and Prevention. (2018). Estimates of foodborne illness in the United

States. https://www.cdc.gov/foodborneburden/index.html

Conference for Food Protection. (2023