



SUSQI NEWS

Susquehanna Conference

October 2006

SPECIAL ANNOUNCEMENT: DUE TO AN E-MAIL PROBLEM, I DID NOT RECEIVE EARLY REPLIES SENT TO ME AFTER THE TRAINING ANNOUNCEMENT WENT OUT. PLEASE REGISTER AGAIN!! SEE BELOW.
TED VERESINK

Dear Susquehanna CASA Members:

I can't believe that fall is upon us. The temperature has sure changed recently and the kids are back in school. My youngest is starting her senior year in High School - Where have the years gone. I do hope everyone had a lovely summer in spite of the dry and hot weather and now it is time to return to our normal schedules.

Our July 20 meeting was held at Cabela's Restaurant and was very well attended. The topic of the program was Avian Influenza Update, Voluntary Meat Inspection and Acidified Foods. The speakers were tremendous and I want to thank everyone who helped plan such a wonderful and informative day for everyone.

Our upcoming meeting will be a TWO DAY SESSION HELD AT SYSCO'S at 3905 Corey Road. **The dates for the meeting are WEDNESDAY, OCTOBER 11 AND THURSDAY OCTOBER 12.** Some of the topics include: FDA Food Defense Initiative, FDA's response to Hurricane Katrina, Water Supply and Public Health in Afghanistan, Donated Food Protocol for Schools. The second day will include a discussion about the Central Pennsylvania Food Bank followed by a tour of the facility. Please plan to join us for one or both of the days. This sounds like quite an informative two-day session and Sysco's always provides a nice atmosphere for our meetings.

Please also mark your calendars for the last meeting of this year and that will be on Thursday, December 14, 2006. More information will be forthcoming. The meeting will be held at Kline Plaza in Harrisburg. I look forward to seeing all of you at one or both of our two day session. Remember October 11 and 12. Hope to see all of you then!

Lynn Roche, President

Susquehanna Conference Quarterly Meeting – October 11 and 12, 2006

Sysco Foods Services of Central PA, LLC, 3905 Corey Road, Harrisburg, PA

Pre-registration deadline October 10, 2006

Name _____

Agency/Firm _____

Email _____

Phone _____

Registration fee: \$10 payable at training

Email to: tveresink@easton-pa.gov FAX to: 610-250-6607

Mail to: CASA c/o Easton Health Bureau, 1 S. Third Street, Easton, PA 18042

Questions: contact Ted Veresink at 610-250-6765

Something to think about

Sometime on or about March 1, 2007, "Mother CASA" will be holding an election for the position of Executive Officer. Our own Ted Veresink currently holds that position. He has agreed to have his name on the ballot for another three year term. As chairman of the Nominations and Election Committee for CASA, I am asking that if anyone is interested in having their name listed as a possible candidate, to please inform me. You must meet the membership requirements to be listed. The ballot will be posted on CASA's web site.

Also, our own Susquehanna Conference will be holding an election next spring. The positions available will be for vice president, secretary/treasurer and a representative to the CASA Executive Board.

Our next president will be Barbara Allerton from the Pennsylvania Department of Health. The vice president position is for a two year term. Ted Veresink will again be a candidate for the Secretary/Treasurer position. We have to replace Sue Yeager as our Representative to the CASA Executive Board. This is an eight (8) year commitment, with the final year as President of "Mother CASA". So please give these positions some thought and let me know your wishes.

Thank you.
Ken Hohe

Ready to Cook" is NOT the same as "Ready to Eat"

A important food safety message from The Partnership for Food Safety Education

You might enjoy the convenience of the variety of frozen poultry products that are available today. Many of these products are stuffed with cheese and other delicious fillings. Pay attention to the labels on frozen products! Some of these frozen products are raw -- even though they may have breading on the outside or may appear pre-cooked or browned.

Pay attention to the label!

If a product is labeled "cook and serve," "ready to cook" or "oven ready," *you must cook it to a safe minimum internal temperature of 165° F* in order for the food to be safe to eat. Poultry products stuffed with additional ingredients may take longer to reach this safe minimum internal temperature than poultry products that do not contain filling. Remember, use a food thermometer to measure the internal temperature of foods! Stuffed chicken breasts, such as "chicken cordon bleu," should be cooked to a safe minimum temperature of 165° F.

If you use a microwave oven to cook these products, be sure to follow the directions on the product package and the directions for your microwave. Take multiple temperature readings with a food thermometer in different locations throughout the product and allow for the recommended stand time.

For consumer safe food handling tips visit www.fightbac.org
FSIS has issued a [public alert](#) for frozen, stuffed, raw chicken products.

Statewide Food Safety Certification Training

The Penn State Cooperative Extension, Division of Continuing Education, has scheduled a number of Food Safety Certification training courses for September through November 2006. The locations, dates, contact persons, phone numbers and e-mail addresses are listed below.

<u>Location</u>	<u>Dates</u>	<u>Contact Person</u>	<u>Phone Number</u>	<u>E-Mail</u>
Carlisle	9-18 & 29	Karen Karnes	717-948-6536	ksk1@psu.edu
Chambersburg	11-6 & 20	Judy Mellott	717-709-0778	jam5@psu.edu
Gettysburg	10-16 & 26	Judy Mellott	717-709-0778	jam5@psu.edu
Lancaster	9-13 & 20	Debbie Rubin	717-299-7667	dpr5@psu.edu
“ “	10-2, 9, 16	“ “	“ “ “	“ “ “
“ “	10-31, 11-7, 14	“ “	“ “ “	“ “ “
“ “	10-23,30, 11-3	“ “	“ “ “	“ “ “
Lebanon	11-8 & 15	Karen Karnes	717-948-6536	ksk1@psu.edu
McConnellsburg	9-28 & 10-5	Judy Mellott	717-709-0778	jam5@psu.edu
Middletown	11-6 & 20	Karen Karnes	717-948-6536	ksk1@psu.edu
New Bloomfield	10-30, 11-6, 13	Karen Karnes	717-948-6536	ksk1@psu.edu
Schuylkill Haven	10-20 & 21	David Holden	570-385-6221	deh18@psu.edu
York	10-3 & 10	Annie Haines	717-771-4197	azh2@psu.edu
“	9-8, 22, 29	“ “	“ “ “	“ “ “
“	11-14, 21, 28	“ “	“ “ “	“ “ “

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 Membership Renewal – IF YOU HAVEN’T RENEWED FOR 2006, GO TO: www.casafdo.org, print a renewal form, mail as instructed, or bring to the 10/11 – 10/12 meeting. WE NEED YOU AND YOU NEED CASA !!!

ALERT: The Basics

The ALERT initiative is intended to raise the awareness of state and local government agency and industry representatives regarding food defense issues and preparedness. It is generic enough to apply to all aspects of the farm-to-table supply chain and is designed to spark thought and discussion with a variety of stakeholders. ALERT identifies five key points that industry and businesses can use to decrease the risk of intentional food contamination at their facility.

Select each link below for additional background information in support of each letter of the ALERT acronym.

In today's world it is important to be ALERT to protect your business.

A How do you **ASSURE** that the supplies and ingredients you use are from safe and secure sources?

L How do you **LOOK** after the security of the products and ingredients in your facility?

E What do you know about your **EMPLOYEES** and people coming in and out of your facility?

R Could you provide **REPORTS** about the security of your products while under your control?

T What do you do and who do you notify if you have a **THREAT** or issue at your facility, including suspicious behavior?

AFDO APPLAUDS THE FORMATION OF THE COALITION FOR A STRONGER FDA

The food safety network in the United States can only be as strong as its weakest link. For many years FDA has been compelled to operate with fewer and fewer funding resources, while their responsibility continued to increase. Shortly after September 11, 2001, FDA was given increased funding to fill much-needed full time field positions. However, as time passed, these new positions as well as funding began to evaporate to a level that once again forced cutbacks in many very important functions of the FDA. As a result, state and local agencies have been forced to shoulder more of the load than ever before - particularly for food safety. State and local agencies currently account for 99% of food establishment inspections.

Consumer protection, particularly in the food safety arena is and will continue to be, a **shared** partnership with many entities at the Federal, state and local levels, in cooperation with Industry and Consumers. Each group brings unique perspectives, resources, capabilities and capacities to the table. Only through a combined effort can we hope to ensure that our products are as safe and secure as humanly possible.

The FDA is a key partner. As the federal agency charged with regulating a large portion of the nation's food supply, it is critical that the FDA has the resources to be an effective partner in the nation's food safety and consumer protection network. AFDO joins in encouraging Congress and the Administration to immediately step forward to increase FDA funding to a level that will allow the agency to be a more effective partner in fulfilling its critical leadership and coordinative roles.

The Coalition for a Stronger FDA is a broad and diverse coalition calling for a renewed public commitment to the Food and Drug Administration and its unique role in protecting American consumers and patients. The Coalition is designed to be a multi-year effort with the following goals: (1) making sure the FDA has sufficient resources to protect patients and consumers and (2) maintaining and building public confidence and trust in the FDA. Visit their website for more information: <http://www.fdacoalition.org/index.php>

STATE & LOCAL FOOD SAFETY OFFICIALS ISSUE

CONSUMER ALERT

“Beware of last minute efforts by Industry Lobbyists as Congress returns for final session of 109th Congress”

York, PA--- **The National Uniformity for Food Act [S3128] has been deceptively marketed** by the Grocery Manufacturers of America and allied groups as simply and solely an attempt to standardize food labels. It’s not that simple. S3128 affects issues far more sweeping and important than merely requiring uniform warning labels on food. In reality, S3128 effectively removes state and local governments from the crucial role they play in ensuring the safety of the nation’s food supply.

There is no huge disagreement on uniform labeling warnings or food safety standards where standards exist. However, there is a huge concern that state food adulteration requirements and authorities will be wiped out.

Legal experts disagree about the potential impact of S3128 on state food safety programs. Just who is correct in their evaluation of this Bill – attorneys from industry lobbyists or those from the state and local public health agencies? Are the state Attorneys General wrong too? If this bill is enacted the courts will be left to decide about critical food safety and defense jurisdiction and authority issues. That’s the reality, but it seems unwise when there are so many questions and differences of opinion.

We believe it’s time to scrap the current bill and begin anew in the next congressional session to determine what changes are truly necessary if the goal truly is interstate uniformity of food product label warnings. Proponents talk about the hopeless patchwork of non-uniform state and local regulations hindering commerce and confusing consumers, but they will not speak of the concepts of federalism, unique local, or regional needs, the need for checks and balances to keep the food safety system from being captured by special interests, or the irretrievable loss of capacity if states cannot protect their citizens. And they ignore the potential threat of agro terrorism.

Greater than 80% of the food safety regulatory work done in this country is performed by employees of state or local government. This regulatory work is comprised of activities that respond to incidents where food is contaminated as well as activities that seek to prevent significant food safety problems (e.g., routine facility inspections). Whether food becomes contaminated intentionally or unintentionally, it is critical that states retain their authorities to contain and remove food from the marketplace in prompt fashion.

Why would we want to take authority away from our “first responders”? When a consumer becomes ill from food they do NOT call the FDA – **THEY CONTACT THE LOCAL OR STATE GOVERNMENT OFFICIAL.** Oftentimes, FDA will call state agencies to assist them in adulterated food cases because of the authorities the states have – why take away this authority?

The Bill as written must be stopped because it has the potential to dismantle the food safety and defense system in this country.

Consumers will lose “BIG TIME.”

We respectfully seek your opposition to this legislation.

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The Association of Food and Drug Officials (AFDO), established in 1896, successfully fosters uniformity in the adoption and enforcement of science-based food, drug, medical devices, cosmetics and product safety laws, rules, and regulations.

AFDO and its six Regional Affiliates provide the mechanism and the forum where regional, national and international issues are deliberated and resolved to uniformly provide the best public health and consumer protection in the most expeditious and cost effective manner.

“AFDO is an international leader and trusted resource for building consensus and promoting uniformity on public health and consumer protection issues related to the regulation of foods, drugs, devices, cosmetics and consumer products.”

FDA Announces Findings From Investigation of Foodborne E. coli O157:H7 Outbreak in Spinach

FDA is announcing that all spinach implicated in the current outbreak has traced back to Natural Selection Foods LLC of San Juan Bautista, California. This determination is based on epidemiological and laboratory evidence obtained by multiple states and coordinated by the Centers for Disease Control and Prevention. Natural Selection Foods issued a recall of all implicated products on September 15, 2006. Four other companies have issued secondary recalls because they received the recalled product from Natural Selections. Spinach processed by other manufacturers has not been implicated in the outbreak.

FDA, the State of California, the Centers for Disease Control and Prevention and the United States Department of Agriculture continue to investigate the cause of the outbreak. This includes continued inspections and sample collection in facilities, the environment and water, as well as studies of animal management, water use and the environment.

Although the current outbreak may ultimately trace back to a specific field(s), there has been a long history of *E. coli* O157:H7 outbreaks involving leafy greens from the central California region. Spinach processed by other manufacturers has not been implicated in this outbreak, however, based on discussions with industry, and given the past *E. coli* O157:H7 outbreaks, FDA and the State of California expect the industry to develop a comprehensive plan which is designed to minimize the risk of another outbreak due to *E. coli* O157:H7 in spinach grown in central California. While this plan is under development, FDA and the State of California reiterate our previous concerns and advise firms to review their current operations in light of the agency's guidance for minimizing microbial food safety hazards.

FDA and the State of California have previously expressed serious concern with the continuing outbreaks of foodborne illness associated with the consumption of fresh and fresh-cut lettuce and other leafy greens. After discussions with industry, FDA and the State of California, as part of a longer term strategy, now expect industry to develop a plan to minimize the risk of another outbreak due to *E. coli* O157:H7 in all leafy greens,

FDA is still reminding the public that Natural Selection Foods has recalled all spinach products under multiple brand names with a date code of October 1 or earlier. There have been four other recalls from different companies because they received Natural Selection Foods spinach

In order to protect consumers, **retailers and restaurateurs** should not sell raw spinach or blends that may contain spinach that was processed by Natural Selection Foods and all other brands subject to the recalls.

Consumers are advised that proper storage of fresh produce can affect both quality and safety. To maintain quality of fresh produce, certain perishable fresh fruits and vegetables (like strawberries, lettuce, herbs, and mushrooms) can be best maintained by storing in a clean refrigerator at a temperature of 40° F or below. All produce that is purchased pre-cut or peeled should be refrigerated to maintain both quality and safety.

Many pre-cut, bagged produce items like lettuce are pre-washed. If so, it will be stated on the packaging. This pre-washed, bagged produce can be used without further washing.

Processed spinach (e.g., frozen and canned spinach) is not implicated in this outbreak.

To date, **187** cases of illness due to *E. coli* O157:H7 infection have been reported to the Centers for Disease Control and Prevention (CDC), including **29** cases of Hemolytic Uremic Syndrome (HUS), **97** hospitalizations and one death. The 26 affected states are: Arizona (7), California (2), Colorado (1), Connecticut (3), Idaho (4), Illinois (1), Indiana (9), Kentucky (8), Maine (3), Maryland (3), Michigan (4), Minnesota (2), Nebraska (9), Nevada (1), New Mexico (5), New York (11), Ohio (25), Oregon (6), Pennsylvania (9), Tennessee (1), Utah (17), Virginia (2), Washington (3), West Virginia (1), Wisconsin (49), and Wyoming (1). In addition, Canada has one confirmed case.

There are now a total of **10** confirmed product samples that contain the *E. coli* O157:H7 outbreak strain. *E. coli* O157:H7 causes diarrhea, often with bloody stools. Although most healthy adults can recover completely within a week, some people can develop a form of kidney failure called HUS. HUS is most likely to occur in young children and the elderly. The condition can lead to serious kidney damage and even death.

The FDA developed the Lettuce Safety Initiative www.cfsan.fda.gov/~dms/lettsafe.html in response to recurring outbreaks of *E. coli* O157:H7 in lettuce. As a result of this outbreak, the initiative has been expanded to cover spinach. The primary goals of the initiative are to reduce public health risks by focusing on the product, agents and areas of greatest concern and to alert consumers early and respond rapidly in the event of an outbreak. This initiative is based on the 2004 Produce Safety Action Plan, intended to minimize the incidence of food borne illness associated with the consumption of fresh produce.

FDA continues to work closely with the CDC and state and local agencies to determine the cause and scope of the *E. coli* O157:H7 outbreak in spinach. Please check www.fda.gov for updates.

Additional information regarding safe handling of raw produce and fresh-squeezed fruit and vegetable juices can be found at <http://www.cfsan.fda.gov/~dms/prodsafe.html>.

For additional general food safety tips, go to www.fightbac.org.

Key Facts about Influenza and the Influenza Vaccine

The flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. The best way to prevent the flu is by getting a flu **vaccination** each fall.

Every year in the United States, on average:

- 5% to 20% of the population gets the flu;
- more than 200,000 people are hospitalized from flu complications, and;
- about 36,000 people die from flu.

Some people, such as older people, young children, and people with certain health conditions, are at high risk for serious flu complications.

Symptoms of flu include:

- fever (usually high)
- headache
- extreme tiredness
- dry cough
- sore throat
- runny or stuffy nose
- muscle aches
- Stomach symptoms, such as nausea, vomiting, and diarrhea, also can occur but are more common in children than adults

Complications of flu can include bacterial pneumonia, ear infections, sinus infections, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma, or diabetes.

Flu viruses spread mainly from person to person through coughing or sneezing of people with influenza. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose. Most healthy adults may be able to infect others beginning 1 day **before** symptoms develop and up to 5 days **after** becoming sick. **That means that you may be able to pass on the flu to someone else before you know you are sick, as well as while you are sick.**

The single best way to prevent the flu is to get a flu vaccination each fall. There are two types of vaccines:

- The "flu shot" – an inactivated vaccine (containing killed virus) that is given with a needle. **The flu shot** is approved for use in people 6 months of age and older, including healthy people and people with chronic medical conditions.
- The nasal-spray flu vaccine – a vaccine made with live, weakened flu viruses that do not cause the flu (sometimes called LAIV for "Live Attenuated Influenza Vaccine"). LAIV is approved for use in healthy people 5 years to 49 years of age who are not pregnant.

About two weeks after vaccination, antibodies develop that protect against influenza virus infection. Flu vaccines will not protect against flu-like illnesses caused by non-influenza viruses.

October or November is the best time to get vaccinated, but getting vaccinated in December or even later can still be beneficial since most influenza activity occurs in January or later in most years. Though it varies, flu season can last as late as May.

In general, anyone who wants to reduce their chances of getting the flu can get vaccinated. However, certain people should get vaccinated each year either because they are at high risk of having serious flu-related complications or because they live with or care for high risk persons. During flu seasons when vaccine supplies are limited or delayed, ACIP makes recommendations regarding [priority groups for vaccination](#).

Use of the Nasal Spray Flu Vaccine

Vaccination with the nasal-spray flu vaccine is an option for healthy persons aged 5-49 years who are not pregnant, even healthy persons who live with or care for those in a high risk group. The one exception is healthy persons who care for persons with severely weakened immune systems who require a protected environment; these healthy persons should get the inactivated vaccine.

Some people should not be vaccinated without first consulting a physician. They include:

- People who have a severe allergy to chicken eggs.
- People who have had a severe reaction to an influenza vaccination in the past.
- People who developed [Guillain-Barré syndrome](#) (GBS) within 6 weeks of getting an influenza vaccine previously.
- Children less than 6 months of age (influenza vaccine is not approved for use in this age group).
- People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms lessen.

If you have questions about whether you should get a flu vaccine, consult your health-care provider.

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AS A COMMUNITY SERVICE PROJECT, THE SUSQUEHANNA CONFERENCE OF CASA WOULD LIKE TO MAKE A DONATION TO THE FOOD BANK TO ASSIST THEM IN THEIR ENDEAVORS. WE ARE ASKING EACH OF YOU TO BRING 1 or 2, NON-PERISHABLE, COMMERCIALY PREPARED FOOD ITEMS, WHICH WE WILL DONATE TO THE FOOD BANK.

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