

The Society of Food Hygiene and Technology, Yorkshire & North East Branch

**Update on Foodborne Pathogens &
Plans for business continuity during a Swine Flu Pandemic**

11th November 2009, Highfield House, Doncaster

Dr Nicola Elviss, the Lead Scientist at the Health Protection Agency Food, Water & Environmental Microbiology Network Leeds Laboratory provided an update on the current trends of the most prevalent foodborne pathogens.

Campylobacter was reported as the commonest bacterial cause of infectious intestinal disease in England & Wales with two species accounting for 99% of human infections; *C. jejuni* & *C. coli*. Campylobacter infection is mainly associated with point-source outbreaks, such as large wedding parties. Work is currently being performed on farms to reduce the incidence in poultry flocks & associated cross-contamination during slaughter thus aiming to subsequently reduce the level of contamination in food preparation areas.

Regarding Salmonella infection, imported eggs were still regarded as a problem but vaccination of laying flocks has significantly reduced the Salmonella in eggs incidence in the UK.

Dr Elviss outlined the results of a 2007 sampling programme of the Local Authorities Co-ordinators of Regulatory Services (LACORS) & HPA Co-ordinated Food Liaison Group, this was a microbiological study of fresh herbs on retail sale across the UK. Eighteen of 3,760 (0.5%) Ready to eat (RTE) fresh herb samples contained *Salmonella* spp and were thus legally unsatisfactory. All samples were pre-cut herbs; 14 pre-packaged & 4 open loose bunches. The presence of *Salmonella* spp. in the herbs contravened the food safety requirements (Article 14) of Regulation (EC) No 178/2002.

Eight of the 18 unsatisfactory samples were found to be contaminated with *S. seftenberg*. This organism was discovered to have a profile indistinguishable from 32 *Salmonella* cases involving fresh basil in England and Wales and 19 additional cases in Scotland, Denmark, the Netherlands & the USA reported between January to June 2007. The international contamination was linked to single grower in Israel who exported fresh basil to the USA, North Europe & Russia. The UK FSA, local authority environmental health departments & UK retailers were fully informed. Retailers withdrew all potentially affected basil products and the FSA advised consumers who may have bought contaminated product not to consume it. Full investigations undertaken in response to the outbreak revealed no further contaminated product in the UK. The cause of the problem was not fully identified.

Contamination of sandwiches by *Listeria monocytogenes* is still a concern, particularly in hospitals. Doubts were expressed regarding the suitability of the accepted contamination guideline (100 cfu/g) when considering the higher risk associated with hospital patients.

Dr Elviss concluded her presentation with a detailed account of an *E.coli* O157 food poisoning outbreak in 2006 involving a butcher in Leeds. Evidence from the detailed laboratory investigation and the outbreak investigation of Leeds City Council resulted in a successful prosecution. The Food Examiner provided a statement & certificates to support the legal action resulting in a £15,000 fine & £5,000 costs. The business has since ceased trading.

Dr Wendy Phillips, the Consultant in Communicable Disease Control for Barnsley and Doncaster and the Director of the South Yorkshire Health Protection Unit provided guidance on a common sense approach to appropriate measures to be taken by the food industry to reduce the risk of transmitting the swine flu virus. A common approach was outlined for all negative impacts on business.

A Business Continuity plan was considered essential for the following reasons:

- 70% of companies suffer system downturn at least once per year
- 20% of companies suffer major disaster every 5 years
- 80% experiencing a major disaster go out of business if they don't have a Business Continuity management plan

A Business Impact Analysis was identified as a precursor to the Business Continuity plan to assess the critical functions and potential impacts of a negative impact upon these functions. An acceptable level of performance must be determined to ensure continued functioning. Critical to the analysis is an understanding of the business interdependencies – upstream and downstream, particularly in relation to essential services that the business must perform. The Impact analysis should be followed by a risk assessment to determine the Strategy for the Business Continuity Plan which must then be tested and maintained.

A Business Continuity Culture was encouraged for continuous planning and updating of contact details – ‘planning’ was considered more important than ‘the plan’ to ensure that systems developed are readily activated. The Business Continuity Culture needs to be incorporated into everyday work and involve all staff; it needs to be part of every organisational change.

Useful sources of information for planning against any negative impacts on business were identified:

- Local authority emergency planning department
- UK Resilience www.ukresilience.info
- Business Continuity Institute www.thebci.org
- Home Office www.homeoffice.gov.uk

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