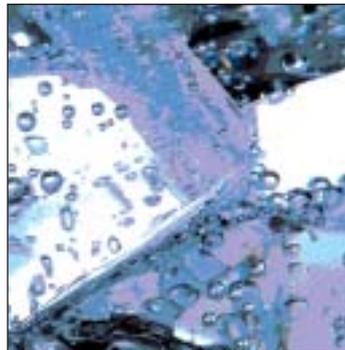


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# Street HACCP: Paving the Way for Small-Sized Retailers

We all have a favorite restaurant where we delight in the quality of the fare and trust in the establishment's pride, ability and commitment to serve wholesome and safe foods. Their offerings are both pleasing to the eye and to the palate.



We return regularly to these favorite haunts with family and friends and we recommend them to our colleagues and relations.

Regardless of their ambiance, we know that we will not be disappointed. As a patron, we instinctively have no fear of foodborne illness when we dine there.

I have always been curious as to the reason for these restaurants' popularity. What makes these establishments unique and why do they stand out from all the rest? Surely, it's not the setting. Among the potpourri of my favorites are a very modest Quonset hut diner in Woodstock, VT; a four-star restaurant in Ivoryton, CT; a mom-and-pop cheesesteak purveyor in South Philadelphia, and a burger bar in Dearborn, MI. In each case, I befriended the owner and asked to be shown the operation. Even though my visits to these eateries were social events and not inspections, I could not help but view the kitchens and their operations through the eyes of a sanitarian. Without exception, there is a commonality amongst all of them: attention to detail and pride in the quality of the food received and prepared. In each case, the word "fresh" has a very real meaning, where freshness is measured by quality and punctuated by time and temperature.

It dawned on me that these establishments have their own brand of Hazard Analysis and Critical Control Points (HACCP). The simplicity is in their consistency of operational controls. They have no formal hazard analysis decision tree; monitoring is largely confined to the receipt of foods and temperature holding times, which is dictated by the food turnover rate and meal service. Each keeps records, albeit minimal at best, such as receiving reports and temperature recovery

of their refrigeration equipment. Their verification and correctional measure procedures are certainly not formal. More often than not, these consist of righteous indignation, minced oaths and immediate corrective action—repeat mistakes are not tolerated.

In defining what they do, these operators affectionately refer to their brand of food safety strategy as "Street HACCP." The term was coined several years ago by Capt. Chuck Higgins of the Public Health Service who was assigned to the National Park Service Public Health Program. He, like many of us food safety professionals, believes that formal HACCP programs can be overkill, and therefore cumbersome, for small-sized food retail establishments. Because there are programmatic aspects of a formal HACCP program that can be quite difficult to implement on a smaller scale, we recognize the need for flexibility and common sense. Street HACCP involves modifying the seven HACCP principles such that they are easily integrated and become a natural part of the small retailer's operation, both in terms of logistics and food safety objectives.

### **The Intersection of Safety and Profit**

Street HACCP puts the emphasis on reducing the potential for foodborne illness, not necessarily preventing it. No, this is not a seditious comment when put in the context of what is expected from the program. If it is assumed that the owner is the front-line health inspector, we should expect adherence to critical control point (CCP) controls versus those of the hazard analysis. Indeed, this approach makes Street HACCP a success for those establishments that have embraced it and sustained it over a long period of time. In so doing, the retail establishments that have implemented it have realized collateral benefits, including reductions in food costs and increased profits—in addition to avoiding making people sick. Harry Grenawitzke puts it most succinctly: "If Street HACCP was

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adopted by every small retail food establishment, it could save millions as a preventive measure.”

The foundation and groundwork of Street HACCP is based on several common-sense, intuitive controls that have been so eloquently articulated in the works of Dr. Frank Bryan, retired CDC lead scientist and food safety expert:

- Control the quality and safety of the sources of foods brought into the establishment.
- Control the pathways of food contamination within the establishment to include its operations and human factors (handwashing) and environmental influences.
- Control the growth of potentially hazardous microorganisms. This relates to time and temperature and the efficacy of hot and cold-holding and cooling.
- Destroy the microbes of public health importance. This places the emphasis on cooking and reheating.

The first two rely on menu and plan review components, which incorporate a cursory hazard analysis. The latter two represent those areas of activity where the most efforts are directed in an effective, ongoing food safety program. In this context, Street HACCP adequately addresses the common causes of foodborne illness: Inadequate refrigeration, cross-contamination, improper handwashing, unclean equipment, inadequate hot holding and improper cooking.

### **Steering in the Right Direction**

To ensure that I do not misrepresent what Street HACCP is, I've asked the opinion of a panel of sanitarians whose involvement in this topic is well known. They include Capt. Charles Otto of the Centers for Disease Control and Prevention (CDC); Harry Grenawitzke, chairman of the American Academy of Sanitarians and a trainer for NSF

International; and Roy Costa, an exceptional food safety consultant in private practice. (To all my other colleagues, you have not been slighted ... I'll catch you next time.)

There is a common thread to these experts' comments. Each believes that Street HACCP, which emphasizes CCPs, is appropriate to small cook-serve operations and for temporary events where food is handled and prepared, such as carnivals, fairs and festivals. In order for this modified food safety model to work in the small retail operation, we all agree that it begins with a commitment by management that includes good staff training. In addition, experience has taught us that paying the staff a bonus for food safety is a good practice that helps ensure adherence to food safety principles and conformity in their implementation. The panel believes that essential monitoring should not take more than a minute of every hour, provided that the food safety system is set up and fully implemented.

Although the experts I consulted don't necessarily agree on the level of documentation needed—ranging from all-inclusive to serving time or one to two-hour temperature monitoring intervals—they do feel that all foods received should be monitored and the temperature logged or recorded on the invoice or receiving report. In addition, some consistent form of daily time and temperature record keeping is an essential component of the Street HACCP program. They all feel strongly, that Street HACCP begins with a critical menu review; with an eye towards design flaws and conditions contributory to foodborne hazards. Most local sanitarians would be delighted to assist in helping the owner through this aspect. As such, from our vantage point, Street HACCP would be particularly attractive as a component of the regulatory inspection.

I, for one, would like to see Street HACCP taken to the next level by formalizing its components and creating a training standard that includes sampling, monitoring and record-keeping criteria. In fact, I would like to see the Street HACCP program framework become part of retail food establishment regulations. The U.S. Food and Drug Administration (FDA) has already made an excellent start to such an effort through its grant funding program ([www.fda.gov](http://www.fda.gov)). The Florida Division of Hotels & Restaurants has developed an excellent interactive CD on Street HACCP ([www.state.fl.us/dbpr/hr/index.shtml](http://www.state.fl.us/dbpr/hr/index.shtml)).

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Dr. Powitz welcomes reader questions and queries for discussion in upcoming columns, and feedback or suggestions for topics you'd like to see covered can be sent to him directly at [sanitarian@juno.com](mailto:sanitarian@juno.com) or through his