

# Medical Screening

## Definition

Medical screening is the process of detecting, reporting and controlling foodborne disease that can be transmitted by infected employees, visitors and/or contractors to food products and food contact surfaces

## Applicable Code Requirements

1. Personnel Hygiene within the applicable SQF Food Safety Codes (3.3.1.1, 4.3.1.1, 9.3.1.1, 10.4.1.1, 11.4.3.3, 12.4.1.1, 13.3.1.1, 17.3.1.1).

## Review Glossary Terms

1. Pre-requisite Program

## Implementation & Audit Guidance

### What does it mean?

The requirement for medical screening is a clarification of the infectious disease policy within the Personnel Welfare clause in the SQF Food Safety Codes. In the SQF Food Safety Code: Food Manufacturing, 11.3.1.1 states: "Personnel who are known to be carriers of infectious diseases that present a health risk to others through the packing or storage processes shall not engage in the processing or packing of food or enter storage areas where food is exposed."

Medical screening of staff and contractors must be undertaken to detect carriers of infectious diseases. Staff identified as carriers of infectious diseases are not to be permitted to handle raw materials, work in progress, exposed finished product, or food contact surfaces.

SQF released Code Amendment #1 to clarify that the site is required to develop and implement a medical screening procedure that is risk based, i.e. dependent on the exposure of employees to high risk products and/or product contact surfaces. The expectation is that site has a dedicated, written procedure that meets the legal requirements in the country of operation and contains instructions regarding how the site will identify the product risk, the types of reportable illnesses or symptoms, the reporting mechanism, and the response from management to ensure food safety is not compromised. The procedure applies to all site employees, visitors, and contractors.

The medical screening requirement must recognise the communicable disease legislation and individual privacy rights in the country of operation and the risk of transmission to food products.

The requirement is specific to pathogens transmitted by food. While other non-foodborne pathogens, such as COVID-19, can be a part of the procedure, it is not required.

### Why is it in the Code & why is it important?

Employees, including casual or seasonal workers, contractors, and visitors must be aware of risks to the food products from the potential transmission of pathogens from ill employees. The site's hygiene plan should address both the prevention and control of product exposed to ill employees and bodily fluids. An example of a control program could be the removal of an employee from direct food contact to non-food contact activities when the employee reports potential illness or injury. Ideally, an employee will not be penalized for reporting illness to the site. This will be supported by introductory training with all employees, temporary workers, contractors, and visitors on reporting illnesses and injury and a questionnaire on illnesses for visitors. Procedures and training will outline how to address exposure and contact of ingredients, packaging, and product.

See RIO Chart on following page.

### RIO Road to Audits (Records, Interviews, and Observations)

Records	Interviews	Observations
<p>The following are examples of records and/or documents to assist in the implementation and review of this topic:</p> <ul style="list-style-type: none"> <li>▪ Medical Screening Procedure</li> <li>▪ Training procedures for site personnel, temporary workers, contractors, and visitors</li> </ul>	<p>The following are examples of people to interview to assist in the implementation and review of this topic:</p> <ul style="list-style-type: none"> <li>▪ SQF Practitioner/ Back-up Practitioner.</li> <li>▪ Human Resources or personnel responsible for staffing and training.</li> <li>▪ Site personnel, contractors, temporary workers, visitors.</li> </ul> <p>The following are examples of questions to ask to assist in the implementation and review of this topic:</p> <ul style="list-style-type: none"> <li>▪ What risk factors were considered when developing the procedure?</li> <li>▪ How are staff notified / trained on the procedure?</li> <li>▪ Describe the last instance in which this procedure was enforced?</li> </ul>	<p>The following are examples of observations to assist in the implementation and review of this topic:</p> <ul style="list-style-type: none"> <li>▪ Training for new and temporary employees.</li> <li>▪ Visitor and contractor agreements.</li> </ul>

### Additional References

- FDA Model Food Code: 2017, Annex 7, forms 1-A through 1-C Employee Health Information <https://www.fda.gov/media/110822/download> (In particular section 2-201.11 Responsibility of Permit Holder, Person in Charge)