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| |  | | --- | | Use this worksheet to respond to a confirmed case of a hepatitis A virus (HAV)-infected worker in a food manufacturing, processing, or serving facility. This is not a routine inspection, but an attempt to identify potential HAV contamination and transmission risk associated with an ill food worker. | | |
| **Detection and Notification:** Establish who has regulatory jurisdiction (county where establishment is located NOT the home county for the case) for the affected firm/establishment and notify appropriate local, state, federal, or multi-jurisdictional partners; and neighboring jurisdictions (if applicable). Plan to conduct a focused on-site assessment **within 24 hours** (1 business day). **Local health departments** (for food service facilities only): Please notify DPH within 12 hours of case identification. DPH is available for consultation and support. **State** (for retail or manufacturing facilities): notify LHD where the affected firm is located. | |
| Information Sharing Elements (between epi, clinical and environmental) | * Case-employee information: Name, symptoms, onset date, infectious period, dates of work while infectious, and exact job duties. * Has the employee or health department notified management at the firm of the illness? * Has the firm notified their regulatory authority as required? * Has the facility been notified by anyone else? (family, medical providers, etc.) * Food facility location details – name, address |
| **On-site Investigation:** Field investigators will complete the following components while visiting the firm: | |
| Meet with the person-in-charge | * Provide introduction and purpose for visit. Explain that immediate response and cooperation are necessary to prevent additional illnesses in employees and customers |
| Explain  Investigation Priorities | * Review records: employee roster (including permanent and temporary workers), employee work schedules, production records, etc. * Assessment of potential HAV contamination (of food and environment) and transmission risk (to employees and customers) * Discuss post-exposure prophylaxis (PEP) for employees based on exposure dates and the last time the ill worker worked. |
| Case Details | * Identification of case-employee to management and/or human resources * Verify employee notification to management regarding an HAV illness * If no notification has been made, then share minimal personal information about the case-employee - name, age and gender should be sufficient for identification. Onset date, symptoms and other details will come up during the assessment. |
| Exclusion | * Address exclusion requirements/recommendations of case-employee. Follow the regulatory requirements/recommendations for exclusion and return to work: * Exclude a food employee who is diagnosed with a hepatitis A virus infection from work involving food handling for 14 calendar days from onset of any illness symptoms, for 7 calendar days after onset of jaundice, or 7 calendar days beyond diagnosis with an infection from hepatitis A virus without developing symptoms. |
| Health Policy Review | * Check that the firm has an adequate employee health policy. * Do they educate their employees on their responsibility to report symptoms/diagnosis? Including HAV symptoms like jaundice? Is training documented? * Check that the policy adequately covers exclusion/restriction/return to work. * Does the firm promote or track HAV vaccination for employees? |
| Facility  Assessment | |  | | --- | | * Facility type (e.g., food service, retail, manufacturing, warehouse) * Products/foods typically prepared/handled; activities and operations * Note foods, practices, and processes that pose high risk potential for HAV   contamination and transmission (e.g. bare hand contact, RTE, no kill step) | |

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| Facility Assessment (continued) | * *Days of operation and daily shifts at firms (including hours)* * *Cleanup procedures and schedules; disinfectants/sanitizers used after vomit/diarrheal accidents; describe mixture concentrations* * *Describe employee / common areas* * *Employee break area? Separate employee and customer restrooms?* * *Note if handwashing stations were properly stocked with soap, water, towels, etc.* |
| Case- | * *Case-employee symptoms and reporting* * *Was the case-employee ever ill/symptomatic at work? (Ask about diarrhea)* * *If so, what symptoms were reported and when?* * *Date case-employee reported symptom/illness and diagnosis to management* * *Reported date of case-employee symptom onset (****especially jaundice****)?* * *Verify last date case-employee worked* * *Does the case-employee have any close contacts among other employees at the firm*   *(e.g. roommates, dating, close friends, family member, social events, etc.)?*   * *Provide a thorough description of case-employee duties and work location in facility* * *What kind of food(s) did case-employee handle/prepare during infectious period?* * *Is food prepared or handled by case-employee on one shift carried to the next  shift or to the next day? Any infrequent or large-batch food handling tasks?* * *Note: Observation of similar employee or demonstration by others may be helpful* * *Note: Tasks performed by the case-employee during his/her infectious period which may have differed from normal job duties* * *Assess activities impacted by case-employee (e.g. retail, dine-in, take-out, catering, bar, manufacturing, packaging)* * *Verify meals/foods prepared or handled by case-employee during infectious period* * *Determine case-employee compliance with food safety and hygienic practices to help determine risk* * *Did the employee wear gloves and proper outer garments, what were their handwashing practices, etc.? May need to speak with other employees if manager is unsure or unable to provide information.* * *Did other workers eat food prepared or handled by the case-employee (brought from home or prepared in facility)? If so, what foods, when, and with whom shared? Ask about potlucks, holiday parties, birthday celebrations, etc.*   *Does the case-employee work at any other food establishments? Check with management and other employees.* |
| employee |
| Assessment |
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| Record | * *Collect and review case-employee schedule for 14-30 days preceding last day of work* |
| Collection | *(at least two weeks prior to and including symptom onset date)* |
|  | * *Distribution list for foods handled by employee that may be in commerce* |
|  | * *Employee list (including temporary workers): name, date of birth, contact information* |
|  | * *Review employee illness records for other employees with HAV symptoms* |
| Education | * *Provide and discuss DPH guidance documents for food handlers and managers* |
|  | * *Provide and discuss DPH disinfection guidance* * *Additional Resources:*   [*https://chfs.ky.gov/agencies/dph/dehp/idb/Pages/Hepatitis%20A%20Outbreak.aspx*](https://chfs.ky.gov/agencies/dph/dehp/idb/Pages/Hepatitis%20A%20Outbreak.aspx)  [*https://www.cdc.gov/hepatitis/hav/index.htm*](https://www.cdc.gov/hepatitis/hav/index.htm)[*https://www.fda.gov/downloads/Food/GuidanceRegulation/RetailFoodProtection//UCM194575.pdf*](https://www.fda.gov/downloads/Food/GuidanceRegulation/RetailFoodProtection//UCM194575.pdf) |
| Post-Exposure | * *PEP for other workers at the firm is recommended. The determination of which workers are recommended to have PEP will depend on the environmental assessment of the facility.* * *Need for PEP to consumers and public notification will be decided in conjunction with public health nursing and epidemiology partners following the assessment. DPH and LHDs should be consulted and notified in advance of any public notification. The firm can expect to work with the LHD and DPH on public information.* |
| Prophylaxis |
| (PEP) |

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| **Reporting:** After on-site visit, debrief with supervisor and agency partners, including DPH (via phone). LHD Nursing/EPI will coordinate PEP logistics (may need to be notified). Document the findings and review with firm’s manager. Disseminate the report to Supervisor and agency partners upon request.  If patron or public notification is considered, coordinate with DPH partners. |
| **Follow-up:** Ensure correction of issues identified (e.g. deficient employee illness policy, education on HAV illness and transmission, reporting, health monitoring, hygiene practices). Work with the manager to ensure they:   * Monitor for the presence of signs and symptoms of HAV in employees * Exclude symptomatic persons and refer them to a physician for diagnosis * Investigate ill persons to determine if the illness is a potential HAV infection * Refer any suspected or newly confirmed HAV cases to the LHD with as much contact information as possible * Continue monitoring employee and customer health for at least 50 days from the end of the transmission risk period (the last day the case-employee worked while infectious, or while potentially contaminated food or environment was exposing employees and/or customers). The DPH or LHD regulatory authority may check in with the firm during or at the end of this period. Employee illness logs and customer complaint logs should be routinely reviewed.   Establish points of contact between the firm and LHD/DPH, and expectations for follow-up   * May include phone, email, site visits, sharing future employee attendance and training records, etc. |