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No Reservations

No Reservations **is a monthly newsletter published by RQA Inc. for the restaurant industry.**

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Crisis Management Response For Restaurants

Everyday restaurants are faced with issues that require immediate attention. Management and staff often react quickly to correct the problem as rapidly as it developed. This is accomplished through sound planning and training of the management and staff of the facility. When management and staff are not adequately trained, a small issue often develops into a larger issue which may cause an injury, illness, or even death. It is important for the staff at all levels to quickly and properly identify and classify a critical issue or crisis.

What is crisis management? Crisis management is the process by which a business or other organization deals with a sudden emergency situation. Typically, the emergency situation for a restaurant is a fire, flood, earthquake, robbery, etc.; or it may be an allergic reaction from a guest, a physical contaminate in the food, sewage backflow in the kitchen, loss of water and/or electricity in the facility, or a foodborne illness. Regardless of which type of emergency arises in the restaurant, the success of your response to the issue is dependent upon your crisis management plan.

The safety of your guests and employees must always be a top priority in the operation of your business. That said, the ownership/management of the restaurant needs to put together a plan that will address the different types of crises that may occur in the restaurant. This may be impacted by where the facility is located geographically, what climate the facility is in, or what other types of businesses (industry) are in the area. The plan should address who, what, where and when action must be taken per the given crisis.

Once the plan is completed, management must train the entire staff on their roles for crisis response. For example, the plan should include the title of the position, the name of the person who is in that role, and what responsibilities that person has in response to the crisis. The plan should also describe what equipment and/or tools must be available to staff during the response. The location of the equipment and tools need to be addressed in the plan as well.

Like any plan, it must be tested to determine if it is successful. Waiting for an actual crisis to occur before testing the plan may lead to an injury, illness, or death. This may lead to potential lawsuits, bad publicity and loss of customers/income. Scheduling drills or mock emergencies and evaluating staff on how they performed during the drill will strengthen the plan, as it will point out opportunities for improvement and enhance the strengths of the team. This is a critical component of the plan because when individuals are put into a stressful and/or life threating environment they may panic unless they are properly prepared/trained.

Even the most basic crisis management plan is better than no crisis management plan. Creating a plan and testing the plan will help mitigate serious consequences. It will also demonstrate to your employees, guests and neighbors that you are concerned for their well-being and the importance of being a good business citizen within your community.

Pathogen Spotlight: Vibro parahaemolyticus

<u>Vibro parahaemolyticus Gastroenteritis:</u> Onsite time: 2-48hrs, Duration of illness: 2 to 5 days

Vibrio parahaemolyticus is a bacterium in the same family as those that cause cholera and *Vibrio vulnificus*. It lives in brackish saltwater and causes gastrointestinal illness in humans. *V. parahaemolyticus* naturally inhabits coastal waters in the United States and Canada and is present in higher concentrations during summer; it is a halophilic, or salt-requiring organism.

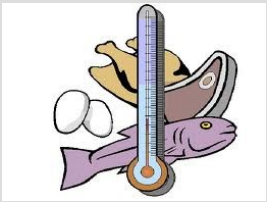
An estimated 4500 cases of *V. parahaemolyticus* infection occur each year in the United States. However, the number of cases reported to Center for Disease Control (CDC) is much lower because surveillance is complicated by underreporting. Laboratories rarely use the selective medium that is necessary to identify this organism, and it is likely that many cases are undetected.

Food most commonly associated with the pathogen is raw or partially cooked oysters. Vibro parahaemolyticus is naturally found in the waters of the Gulf of Mexico, as well as the Atlantic and Pacific Coasts. This type of bacteria can grow very rapidly at temperatures in the middle of the temperature danger zone.



The symptoms associated with Vibro parahaemolyticus gastroenteritis are diarrhea, abdominal cramps, nausea, vomiting, low grade fever and chills. Usually these symptoms occur within 24 hours of ingestion. Illness is usually self-limited and lasts 3 days.

The critical prevention measures are to purchase oysters from approved reputable suppliers, and to cook oysters to the required minimum internal temperatures (145°F for at least 15 seconds).



Thai Restaurant, Ithaca, NY. — July 2014

The Thai Restaurant has been closed by the Tompkins County Health Department due to a public health hazard. The restaurant owner will need to show that faulty plumbing has been repaired before the eatery can reopen.

The restaurant is closed by Health Department order until plumbing repairs can be made. A senior public health sanitarian from the Health Department's Division of Environmental Health placarded the restaurant "because of an imminent public health hazard observed by our inspectors. This particular health hazard is the result of faulty plumbing."

Sewage or liquid waste was not being properly disposed of due to the plumbing issue, according to the order closing the restaurant. "It is their responsibility to make sure that their facility is properly maintained, and to correct problems immediately if they present a health concern to the customers or employees."

The health department will return and perform an inspection once the issues have been corrected. At that time the permit may be re-instated.

http://dining.14850.com

Mexican Restaurant, Fort Collins, CO. — June 2014

A Mexican restaurant in Fort Collins, CO, will not reopen until August 9 because of the Hepatitis A scare that the restaurant faced at the end of June, according to the Coloradoan.

The Larimer County Health Department has advised the owners to keep the restaurant closed that long due to the virus' relatively long incubation period, which averages 28 days but can last up to 50 days in some cases.

The restaurant originally closed on June 27, a day after an employee tested positive for the virus, which has a high risk of being spread when an infected person handles food. In total, the restaurant will be closed 43 days.

The only way the owners could legally open before that would be to hire an entirely new staff.
The county health department administered roughly 800 vaccines to restaurant patrons following the incident, but many did not opt to receive a vaccine. No other cases of Hepatitis A have been reported in connection to the restaurant.

The restaurant received an "inadequate" rating after an inspection in late May, a month before the incident. In two follow-up inspections, the restaurant earned "good" and "excellent" ratings. The owners say that the closure time will allow them to address the remaining concerns presented by the inspections.

http://www.foodsafetynews.com

Oyster Bay, Samish Bay, WA. — August 2014

Confirmation that shellfish from Samish Bay in northwest Washington state was the source of at least one illness, and possibly three others, caused by the bacterium Vibrio parahaemolyticus, has prompted the state's health department to close commercial oyster harvesting in the bay until Sept. 30.

http://www.foodsafetynews.com

For more information about these topics and others, please contact:

Dan Cahill
RQA, Inc.
Phone: 602-331-9151
Email: d.cahill@rqa-inc.com

Please visit: www.rqa-inc.com

RQA® Providing Solutions from Concept to Consumption

Insurance Contact:

Ian Hughes

Phone: 914-242-7812

Email: crisismanagement@catlin.com