# **AFDO**

# Association of Food and Drug Officials

# ◆ Elliot O. Grosvenor Food Safety Award ◆

This nomination must be submitted by February 1 to be considered for the current year's award

### **Criteria for Nominations:**

The Elliot O. Grosvenor Food Safety Award is given to recognize outstanding achievements made by food safety programs within State Departments of Agriculture, Natural Resource Agencies, Public Health Departments or Environmental Conservation Departments in the United States or Canada. The award will go to the program that best showcases improvement, innovation or sustained high performance within a food safety program. A food safety program could include responsibility for: food safety, food protection, and food defense or food sanitation. The applications will be made to the AFDO awards committee by the deadline.

#### PLEASE TYPE

Date of nomination: 1/26/20	D12 For the year ending D	ecember 31, _	2011	
Program's Full Name:	Food Protection Program			
Nominator	Sarah Popovich			
Immediate Organization:				***************************************
Agency:	Indiana State Department of Healtl	า		
City, State, ZIP:	Indianapolis, IN 46204			
Telephone (office):	317-233-7360	(mobile):	317-517-5842	
Email Address:	spopovich@isdh.in.gov	_		
AFDO Member	Sarah Popovich			

# **Executive Summary:**

Post-harvest food, which includes food production, processing, distribution, transportation, retail, and food service, accounts for 12% of the United States economic activity and 10% of the American workforce. There are no Federal regulations in place, but many States and counties have the authority to regulate food in transport through State and/or local food safety laws. In 2005, Congress passed the 2005 Sanitary Food Transportation Act (SFTA), which in part created section 416 of the Federal Food, Drug, and Cosmetic Act (the act) (21 U.S.C. 350e). Section 416 of the act requires FDA to promulgate regulations setting forth sanitary transportation practices to be followed by shippers, carriers by motor vehicle or rail vehicle, receivers, and others engaged in food transport to ensure that food is not transported under conditions that may render the food adulterated. As a result, in April 2010, the FDA

has published Guidance for Industry: Sanitary Transportation of Food. Approximately 73% of all goods are shipped by truck and 90% of the US food supply is transported by truck. These statistics are expected to grow and truck traffic is expected to double by the year 2020.

In 2006, Indiana embarked on a project to determine the current state of food safety and defense of food in transit in interstate commerce. As a result, the Indiana State Department of Health (ISDH), Food Protection Program (FPP) has continued to monitor food safety and defense of food in transit from this initial project. Indiana conducts Indiana Food Transportation Assessment Projects (IFTAP) along with our partners including local health departments (LHDs), Indiana State Board of Animal Health, Indiana Department of Natural Resources, Indiana State Police Motor Carrier Enforcement Division, United States Department of Agriculture (USDA) Food Safety Inspection Service, USDA Animal and Plant Health Inspection Service, and the US Food and Drug Administration (FDA). The main focus areas of IFTAP are temperatures, potential cross-contamination, food sources, labeling, packaging, pest activity, sanitation, security, and driver knowledge of food safety and defense.

In 2011, ISDH conducted 11 IFTAP's, which involved inspecting 94 food trucks. Violations found included temperature issues, labeling, potential cross-contamination, and sanitation within the truck. At 7 of the 11 IFTAP's, food had to be embargoed and disposed. There were a total of 10 trucks found with food safety violations, which accounted for 11% of inspected trucks. Approximately 4,020 pounds of food was disposed. This summer was unique due to the repeat offenders resulting in court action and the media attention that the issue received.

On October 4, 2011, the Marion County Environmental Court Division found Union Broker Limited, HK Trucking, Inc., and Tak Hung Lee in contempt of court for egregious food safety violations brought forth from the ISDH and LHD inspections violating an agreed court order from April 1, 2011. The ISDH and LHDs partnered bringing five separate inspections of HK Trucking, Inc. food distribution trucks, transporting for Union Broker Limited, Tak H. Lee's company, with violations of potentially adulterated food. U & D Service, another trucking company in which Tak H. Lee is President, was also in violation. These violations involved potentially hazardous foods being transported at unacceptable temperatures, potential cross contamination of ready-to-eat foods, and the overall unsatisfactory sanitation of the trucks. Union Broker Limited and its affiliated businesses are a wholesale food establishment operation, which consists of handling, sorting, selling, and distributing food to restaurants all over Indiana and our neighboring states.

On October 17, 2011, a follow-up hearing from the contempt of court sanctions for Union Broker Limited, HK Trucking, Inc., and Tak H. Lee sentenced Tak H. Lee to 30 days imprisonment in Marion County Jail suspended and a \$100,000 fine stayed for 90 days until the next follow-up hearing. Tak H. Lee has been ordered to pay all the State's Attorney General's attorney fees and additional fines from the agreed court order. These truck inspections have resulted in a big win for public health. The ISDH, FPP stands by the agencies mission to support Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities. The ISDH FPP does so by holding those accountable who violate food safety laws in Indiana that are scientifically based at preventing foodborne illness and ultimately protect the health of Hoosiers and our neighbors. Channel 13 WTHR (NBC) conducted an investigation of the "Hot Trucks" raising a lot of publicity and their news stories may be found here: <a href="http://www.wthr.com/story/15660247/13-investigates-hot-trucks">http://www.wthr.com/story/15660247/13-investigates-hot-trucks</a>. The Today Show also gathered national attention with their story:

http://today.msnbc.msn.com/id/26184891/vp/44623239#44623239. The enforcement activities were

also a story from Channel 13 WTHR (NBC), which may be found here: <a href="http://www.wthr.com/story/16070744/restaurants-state-fighting-back-against-dangerous-food">http://www.wthr.com/story/16070744/restaurants-state-fighting-back-against-dangerous-food</a>.

☐ Agency demography (population served, age and diversity)

As of 2010, Indiana's population was 6,483,802 people, with a median age of 36.4 years. Statewide, Indiana's population grew by approximately six percent between 2000 and 2010, with the majority of the growth resulting from more births than deaths and people moving into Indiana. Indiana is a homerule state comprised of 92 counties, 93 local public health jurisdictions, and 10 preparedness districts. Nearly one-half of Indiana counties are designated as being rural, with 50% of Indiana counties having Healthcare Professional Shortage Areas (HPSA) and 61% of counties having designated Medically Underserved Areas (MUA).

Whites make up 84.3% of Indiana's population. Approximately 9% of the state's population is Black. Marion County (Indianapolis) and Lake County (Gary) have the highest concentrations of Blacks, representing approximately 25% of each county's population. At 1.6% of Indiana's population, Asians are the fastest growing minority, with the highest concentration of 5.3% in Tippecanoe and Monroe Counties. In addition, Hamilton County has 4.2% Asian representation. Indiana also has the third largest population of Old Order Amish in the nation, with 19 settlements in the state, representing a population of more than 35,000. The Pokagon Band of Potawatomi Indians, a federally recognized Indian tribe of 3,150 members that speak Algonquian, also resides in northwestern Indiana and southwestern Michigan.

The largest increase among Indiana's population has been the Hispanic/Latino ethnic group. Hispanics/Latinos make up 6% of the state's population with the greatest concentration in Lake County (15.1%), followed by Elkhart County at 14.0%. Other counties with significant Hispanic/Latino population growth include Allen, Marion, Porter, and Tippecanoe.

The median income per capita annually for residents of Indiana in 2009 was \$45,424. Between 1999 and 2002, Indiana's poverty rate increased from 8.7% to 9.6%; increased to 12.2% in 2006, and was 12.9% in 2008. LaGrange County, in northwestern Indiana has consistently had one of the highest unemployment rates in the state (greater than 17%), (Indiana Department of Workforce Development), largely due to laid off Amish workers who have now filed for unemployment. Elkhart County, in northern Indiana, where the largest Old Order Amish settlement is located, has had a consistently high unemployment rate of approximately 17-18%. Of Indiana residents, 25 years of age or older, only 78.8% have a high school diploma. The percent of adults, 25 years of age or older, with BS, BA or graduate degrees is 17.6%.

Infant mortality rates in Indiana are some of the highest in the nation. In 2006, Black infant mortality rates in Allen and St. Joseph counties were over 30 per 1,000 live births, the equivalent of rates in countries such as Honduras, Indonesia, and Nicaragua. In addition, Indiana has one of the highest smoking rates during pregnancy of all states. Likewise, almost 11% of births in Indiana are preterm and nearly 9% of infants born in Indiana are of low birth weight.

Indiana is challenged by a number of health behavior factors impacting outcomes in the state. For example, childhood and adult obesity rates in Indiana are of epidemic proportions (14.6% for children 10-17 years and 30% for adults). Over 26% of residents self-report a history of high blood pressure, and over 38% have ever been told they have elevated cholesterol, both higher than the national average.

Leading causes of death in Indiana for men and women continue to be heart disease, cancer, chronic lower respiratory infections and stroke, which can all be attributed to obesity. Counties in numerous regions of the state have spent the past three years recovering from devastating floods in 2008. Flooding displaced significant numbers of Indiana residents from their homes temporarily or permanently. In one regional hospital, the flooding led to the temporary closure of the Emergency Department, pharmacy, and laboratory as those areas were inundated. Events such as these have highlighted the need and the impact of effective preparedness training and response in Indiana for natural disasters. Indiana is also located near the Wabash Valley Fault, where the risk of earthquake in the next 20 years is a significant threat.

In 2007, the Environmental Integrity Project named 12 Indiana coal-burning power plants, including one on the Southside of Indianapolis, among the 50 "dirtiest" in the country for producing health-damaging pollutants. The report underscores the potential health threat from power company smokestacks throughout Indiana.

In an effort to improve effectiveness and capacity of preparedness planning and response in Indiana, the state moved from an infrastructure of county-level preparedness coordinators to a district-level approach and infrastructure in 2009. Governmental local public health continues to be structured at the county level, with 93 local health departments located in Indiana's 92 counties.

Enteric illnesses are prevalent yet are underreported in Indiana, as well as across the U.S. The table below describes confirmed cases of various enteric illnesses from 2007 to 2009.

Condition	2007	2008	2009	Average
Botulism	3	1	0	1
Campylobacteriosis	489	686	616	597
Cryptosporidium	149	203	278	210
Cyclosporidium	2	2	1	2
Giardiasis*	NR	NR	314	N/A
Hepatitis A	28	20	19	22
Hepatitis E	1	2	2	2
Hemolytic Uremic Syndrome (HUS)	16	1	7	8
Listeriosis	18	10	10	13
Salmonellosis	675	641	572	629
Shiga-toxin producing E. coli (STEC)	105	96	64	88
Shigellosis	296	607	77	327
Typhoid Fever	2	1	1	1
Vibriosis	3	5	3	4
Yersiniosis	14	9	7	10

<sup>\*</sup>Giardiasis was made a newly reportable disease December 12, 2008 with the release of the updated 410 IAC 1-2.3 Communicable Disease Reporting Rule for Physicians, Hospitals, and laboratories.

These enteric illnesses are identified by passive surveillance through identification by laboratory diagnosis or epidemiologic linkage. Indiana State Department of Health's (ISDH) current system is to follow-up with every reported case. Interviews are conducted by the local health department (LHD) in the county of residence to collect demographic, clinical, risk factor, and other pertinent information using a standardized questionnaire that is specific to the etiologic agent causing illness. These

interviews are not dependent on serotype or PFGE results but are conducted upon initial notification. Information collected from LHD case interviews, reference laboratories, and the ISDH laboratory (serotype and confirmatory testing) is entered into the Indiana National Electronic Disease Surveillance System (INEDSS) for review by the Enteric Epidemiologist. Local clusters with common risk factors or serotypes are identified at this time.

☐ Agency resources and budget( staff, facilities, revenues)

The effectiveness of efforts to improve health indicators in Indiana is limited by the insufficient numbers of public health workers and insufficient training of those workers in counties throughout the state. Indiana has only 46 workers per 100,000 population, compared to the national average of 138 workers per 100,000 (U.S. Department of Health and Human Services, 2000)i. Federal public health funding to Indiana now ranks 50th, with only \$12.47 per capita from the Centers for Disease Control and Prevention, compared to the national average of \$17.60. In addition, funding from the Health Resources and Services Administration (HRSA) provides \$10.32 per capita, compared to the national average of \$21.43, ranking Indiana 49th (Trust for America's Health, 2009)ii. A 2008 study concluded that an investment in evidence-based public health programs could save Indiana \$343 million dollars annually within five years, with a return on investment of \$5.52 for every \$1 invested (Trust for America's Health, 2009)ii.

The Indiana State Department of Health (ISDH) Food Protection Program (FPP) operates with a total of 18 staff. During the year 2011, the ISDH FPP had 8 field staff stationed out of their homes throughout the State. In November 2011, ISDH FPP was able to hire two field staff positions for a total of 10. The ISDH FPP Director supervises 12 of the staff, while the southern field staff supervises 5 of the field staff. Within the central office in Indianapolis, there are two inspection coordinators designated for northern and southern regions, a consumer specialist, training specialist, and a food defense program coordinator. The food defense program coordinator position is funded through the Centers for Disease Control and Prevention Public Health Preparedness grant funds. All other positions are funded through State of Indiana funds.

Program planning/self evaluation(vision, staff participation)

The ISDH, FPP stands by the agencies mission to support Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities. The ISDH FPP does so by holding those accountable who violate food safety laws in Indiana that are scientifically based at preventing foodborne illness and ultimately protect the health of Hoosiers and our neighbors.

With limited resources, it's difficult to coordinate multiple operations a year. The field staff are required to conduct two IFTAP's a year. In doing so, they coordinate with the Indiana State Police to meet at weigh stations around Indiana to conduct inspections.

Program management(staff control, community/industry/consumer support)

ISDH FPP has had overwhelming support from the community, industry, and consumers. This has been, in a large part, as a result of the Channel 13 WTHR (NBC) investigation on "Hot Trucks" raising awareness of the issue to the public. These news stories may be viewed at: <a href="http://www.wthr.com/story/15660247/13-investigates-hot-trucks">http://www.wthr.com/story/15660247/13-investigates-hot-trucks</a>. The Today Show also gathered national attention with their story:

http://today.msnbc.msn.com/id/26184891/vp/44623239#44623239. We have received support from a variety of groups including local restaurants, Indiana Restaurant Association, the Indiana Grocery and Convenience Store Association, Consumer Federation of America Food Policy Institute, Trucking Association, Pennsylvania US Representative Joseph Pitts the chairman of the food safety committee in US Congress, and Indiana Representative Bill Davis.

Program implementation(training, compliance, enforcement)

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Program outcomes(measurable outcomes)

In the year 2011, ISDH has conducted 11 IFTAP projects. In total, there were 94 food trucks inspected by ISDH and 2 of these were found to be empty. Violation types included temperature issues, labeling, potential cross-contamination, and sanitation within the truck. At 7 of the 11 IFTAP's, food had to be embargoed and disposed. There were a total of 10 trucks found with food safety violations, which means 11% of all trucks inspected had violations. Approximately 4,020 pounds of food was disposed.

57 trucks were found secure, which means 61% secure. 60 truck drivers reported food safety and/or food defense training, which means 64%. Agencies that contributed to the inspections include: Indiana State Police, Indiana DNR, USDA APHIS, USDA FSIS, FDA, and local health departments.

Since 2007, ISDH has inspected 388 trucks, 25 of them being empty. 32 trucks have been found in violation, which comes to 8.2%. 24,794 pounds of food has been disposed. 180 trucks have been secure, which is about 46%. Education of the truck driver has only started to be documented in 2010, but over the two years 121 had food safety and defense training at about 57%.

# Summary of Indiana Food Transportation Assessment Projects

	2007	2008	2009	2010	2011	Total
# Trucks	101	52	21	120	94	388
# Empty	7	5	6	5	2	25
				%		6.4
# in violation	10	3	2	7	10	32
				%		8.2
lbs. food						
disposed	4,735	112	0	15,928	4,019	24,794
Trucks secured	31	16	11	65	57	180
				%		46.4
Education				61	60	121
				%		56.5

# Goals for improvement

ISDH FPP would like to train and provide the proper resources to our LHD partners so more health inspectors may be utilized to assist Indiana State Police with food trucks. The ISDH FPP has developed an inspection form for LHDs to use to capture standard information and is in the process of producing copies on NCR paper for the LHDs use. This will allow each county and state official to document the same information that may be used for enforcement purposes or provide to the state the firm resides.

Each IFTAP conducted by ISDH FPP has provided unique learning experiences for those staff at the project. A goal would be to increase communication among staff so we may be best prepared. An example would be the firm in a court order with Indiana was to have data loggers on their trucks. At the time, field staff not directly involved with this firm were unaware this was an additional requirement to this particular firm and these trucks traveled all across Indiana. This information sharing needs to be expanded to the LHDs that may be involved in a truck stop with this firm as well.

# □ Issues/challenges/risks

IFTAP has been an ongoing learning experience that seems to have new issues, challenges, and risks at each truck inspection. In past years, ISDH would only collect carrier information and this summer, the form was revised to capture the shipment origination, carrier information, and shipment destination. This has allowed for more follow-up with the firms that are located out of state so the information may be passed along to the regulatory authority with jurisdiction. We have learned that when we do pass along information to other states that it is best to pass along any photographs, invoices, or any other supporting information with the inspection form.

At times, the Indiana State Police may pull over a food truck for another reason, such as speeding, and they then determine an apparent issue with the load so they will call ISDH or the LHD for assistance. This may put the health inspector at a higher risk due to being pulled over on the side of a road, etc. We require all ISDH inspectors wear reflective vests and proceed with extreme caution; however, due to the uniqueness of the event there may be unknown factors compounded by weather, construction, or any

other issues. We have requested the food truck drive to a more safe location before proceeding with the inspection.

A barrier we have encountered is the driver being unable to speak English so the health inspector may not continue with the inspection or dispose of food until they can speak with a company representative who can communicate. This is very challenging with a pulled over truck with issues when the driver wants to continue their route.

Other issues may be the truck driver not accustomed to being inspected by a health department so they may show resistance or be disgruntled. In these cases, having the Indiana State Police assist the health department has been very valuable. Risks that we have not encountered yet could be falsification of the load and carrying items other than food or what is disclosed on the invoice i.e. smuggling. We hope to not encounter any criminal activity, but when trucks are randomly being pulled over, it's always a possibility. Again, partnering with the Indiana State Police has proved most valuable.

Summary(improvement or innovation that merits award)

Indiana is one of the only states that have developed the partnerships to conduct food truck inspections while trucks are in transit. In 2011, truck inspections led to enforcement activities to hold an Indiana firm accountable for improper transport. Indiana has proposed legislation pertaining to the transportation of food that will give the Indiana State Police more authority. This legislation provides that a person who operates a motor vehicle for the transportation of food without complying with health rules concerning food transportation commits a Class A infraction. This authorizes law enforcement to inspect, detain, and, in certain cases, impound a motor vehicle that does not comply with the health rules. This is an ongoing issue in Indiana and definitely part of a bigger issue across the nation. The National Center for Food Protection and Defense is developing a project to help capture this data from ISDH discussions with the Great Lakes Border Health Initiative. Following these discussions, other states have requested any information ISDH could provide its programs may be implemented in their own states. ISDH also plans to discuss the topic at the Annual AFDO Conference. ISDH has been able to capture data on food safety and defense that no other state is currently doing and have been successful at holding violators accountable. Transportation is a weak link, yet extremely important one, in the farm to fork continuum. Our intent is to strengthen the program in Indiana and share our experiences with other states so we can close this gap. ISDH has been innovative and is continually improving IFTAP that has unquestionably merits the Elliot O. Grosvenor Food Safety Award.

#### Attachments

- o Testimonials(maximum of two)
  - L. Wayne Andrews, Captain
     Indiana State Police
     Commercial Vehicle Enforcement Division
  - Mark M. Reed, RS, MPA, MPH
     Manager- Kentucky Food Safety Branch
     Kentucky Cabinet for Health and Family Services
     Department for Public Health

Nominated by: Sarah Popovich Signature: Sarah Popovich

The winner of this award will identify an individual to receive travel funds (if available and pursuant to AFDO's travel policy) to attend the annual AFDO conference held in June in order to publicly receive an official plaque of recognition and will be given time on the program agenda to comment on the award. The winner will be invited to attend the AFDO Wiley Awards Banquet during the conference.

Attendance is not mandatory for receiving the award. Return this form, a photocopy of this form (both sides and submit to:

# Submit to

Dr. Joanne M. Brown Chair, Awards Committee Association of Food and Drug Officials 2550 Kingston Road, Suite 311 York, PA 17402 717-757-2888

# STATE OF INDIANA

# INDIANA STATE POLICE

100 NORTH SENATE AVENUE

INDIANAPOLIS, INDIANA 46204-2259

www.state.in.us/isp

January 18, 2012

Indiana State Department of Health Food Protection Program Attn: Sarah Popovich 2 North Meridian Street, Section 5C Indianapolis, IN 46204

## Dear Sarah:

Please accept this correspondence as a testimonial letter of support for the Indiana State Department of Health (ISDH), Food Protection Program (FPP) for nomination for the 2012 Association of Food and Drug Officials (AFDO) Elliot O. Grosvenor Food Safety Award. The ISDH FPP has had outstanding achievements in 2011, most particularly, surrounding their Indiana Food Transportation Assessment Projects (IFTAP). IFTAP has been an ever-evolving, innovative program that was a great success in 2011.

The Indiana State Police (ISP) Commercial Vehicle Enforcement Division (CVED) has been partnering with the ISDH FPP for the past 5 years on IFTAP's. This collaboration is what has led to such a successful year in removing temperature abused and adulterated food products in transport from commerce. The stopping of food trucks in transit, which result in a health department inspection, undoubtedly has increased the level of public health protection and awareness in Indiana and across the nation. The ISDH FPP provided infrared thermometers to our enforcement officers to make them more effective in determining potential out of temperature food products that may warrant a further inspection by the health department.

From the ISP and ISDH partnership in 2011, legal actions have been pursued with 10 of 94 food trucks being found in violation. Of one firm in particular, court proceedings have ensued and the company has now been found in contempt of court. Up to this point, the ISDH has aided the ISP on our truck inspections having the authority to hold a food truck, while the ISP has been forced to release them. Legislation has been proposed to close this gap in state law. Under current law, the ISP can stop any truck to check for safety violations, but has no authority to cite or detain a truck transporting food in an unsafe manner. This new legislation would allow ISP to cite a motor carrier for transporting food at improper temperatures and place the truck out of service with the health department assistance. It would also impose criminal penalties for carriers who transport adulterated food that is ordered to be condemned and make the transportation companies pay the cost of disposing of the food.

The ISP CVED would not hesitate to nominate the ISDH FPP for the AFDO Elliot O. Grosvenor Food Safety Award. The ISP CVED thanks you for such a great partnership on stopping potentially adulterated food in transit and holding unscrupulous operations accountable for putting the health of Hoosiers at risk. I believe it is through the dedication of the ISDH and the strong relationships formed with ISP over the last few years that we have closed a significant gap in consumer safety. We applaud your outstanding effort and support of this very critical mission and your visionary approach to resolving the transportation side of food safety!

Sincerely,

L. Wayne Andrews, Captain

Indiana State Police

Commercial Vehicle Enforcement Division





JAN 1 3 2012 FOOD PROTECTION PROGRAM INDIANA STATE DEPT. OF HEALTH

# CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR PUBLIC HEALTH DIVISION OF PUBLIC HEALTH PROTECTION & SAFETY

Steven L. Beshear Governor **FOOD SAFETY BRANCH** 

275 East Main Street, HS1C-F Frankfort, Kentucky 40621 (502) 564-7181 (502) 564-0398 www.chfs.ky.gov January 9, 2012 Janie Miller Secretary

Sara Popovich, MS Food Defense Program Coordinator Indiana State Department of Health 2 North Meridian Street, Section 5C Indianapolis, IN 46204

Dear Sara:

Please accept this correspondence as a testimonial and support letter for the Indiana State Department of Health Food Program with regards to your nomination for the 2012 AFDO Elliot O. Grosvenor Food Safety Award.

Our State Food Safety Branch has a rich history of working collaboratively with all of our sister states, in particular, those states neighboring Kentucky. As you know, during 2011 Kentucky was able to partner with the Indiana State Department of Health as part of your agency's Food Transportation Truck Program where temperature abused and potentially adulterated product originating from food firms in several states, including Kentucky, was identified and removed from interstate commerce. This action specifically, along with your agency's ongoing, enhanced surveillance of food product being transported in commerce, undoubtedly has increased the level of Public Health protection across the boundaries of many states. With the assistance of the Indiana State Department of Health—Food program, our KY Food Safety Branch was able to initiate enforcement action towards one of our state's offending food firms identified by your surveillance program.

The Indiana State Department of Health—Food Program efforts targeting what has often been termed the "weak link" in our farm-to-table supply chain, food transportation, are to be commended. Additionally, the regional and national media attention regarding your food transportation program has undoubtedly resulted in a heightened awareness among federal, state, and local regulatory agencies, as well as the food transportation industry, as to the potential problems of temperature abuse and cross-contamination during highway transit.

The State of Kentucky, Department for Public Health—Food Safety Branch, thanks you for your continuing efforts in Food Protection, commends your agency's diligence, and wholeheartedly endorses the Indiana State Department of Health Food Program as a worthy recipient of the AFDO Elliot O. Grosvenor Food Safety Award.

Respectfully

Mark M. Reed, R.S., MPA, MPH

Manager-KY DPH Food Safety Branch

275 East Main Street Mail Stop: HS1C-F Frankfort, KY 40601 (502) 564-7181

