

# **Regulatory Oversight of Food Service in Washington State Child Care Programs Briefing Paper**

**Authored by the Washington State Child Health and Safety Advisory Committee**

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## **Scope**

Every day in Washington State tens of thousands of children are served food in child care operations. Child care providers are focused on meeting the early education needs of children in their care. However, most do not have the necessary food safety knowledge to ensure food prepared and served to children is safe. Applied food safety procedures and practices are essential in preventing disease transmission in child care programs, particularly because children ages birth to five are a highly susceptible population.

Washington State possesses the expertise, knowledge, and experience to effectively address food safety concerns in all child care programs. Through evidence-based public health oversight and support, food borne illnesses can be successfully minimized in child care programs to promote an optimal early learning environment.

Local health jurisdictions (LHJs) routinely permit and inspect K-12 school kitchens as required in the Washington Food Code Chapter 246-215 WAC. In addition to schools, there are many more food operations that serve children including child care centers, before and after school programs, family home child cares, Head Start, ECEAP (Early Childhood Education and Assistance Program), and preschools. While many of these operations meet the definition of a 'food establishment' in the Washington Food Code, the regulation is not being applied to the vast majority. Therefore, they are not regularly inspected and do not receive food safety education support as directed by the Food Code. Some child care programs are exempt from the Food Code, but still need food safety oversight.

This inattention to food safety regulation and support is significant due to several factors:

- Children ages birth to five years are considered a highly susceptible population, meaning they are more likely than the general population to experience disease.
- Child care programs serve meals and snacks that often contain potentially hazardous foods and use complex food handling procedures.
- Normal child care activities, such as diapering and toilet training, increase the risk of fecal-oral disease transmission.
- Communicable disease in child care detracts from the early learning environment, curtails school-readiness skills, and has adverse economic effects for the child care program and the family of the ill child.

Conflicting and vague regulations, along with jurisdictional uncertainty, are factors that need to be resolved. The Department of Early Learning (DEL), the Department of Health (DOH), and the local health jurisdictions (LHJs) each have regulations and resources that can be rallied to address regulatory conflicts.

In most states, local or state health departments have routine regulatory oversight of child care food service operations. During a recent questionnaire administered by Washington State Child Health and Safety Advisory Committee members, 18 states were asked about the regulatory oversight of child care food operations. Of those, 94% reported that food service in child care operations were regulated by local or state health, 83% required child care food service to follow some version of their state food code, and 72% stated that child care kitchens were inspected at least annually.

## **Background**

In Washington State, DOH and LHJs are charged with the primary responsibility for ensuring food safety in food establishments. Accordingly, food safety regulations are routinely enforced by inspections and educational outreach to food service establishments at the local level. However, DOH and LHJs do not currently maintain regulatory authority in child care programs including child care homes, child care centers, Head Start, Early Child Education and Assistance Program (ECEAP), preschools, school-age programs, and summer care programs.

DEL is the regulating authority for licensed child care programs and assumes the responsibility for ensuring the overall health and safety of children in care. However, DEL does not enforce the Washington Food Code in licensed child care programs. Instead, it has developed an abbreviated set of food safety standards which are described in the child care licensing regulations. The DOH and DEL food safety requirements are inconsistent. Child care licensors visit licensed child care programs annually and perform relicensing inspections once every three years. Currently DEL health specialists evaluate food safety compliance only when a license is initially granted, or on a complaint basis thereafter. The DEL child care food service regulations and their implementation are not congruent with the risk level and susceptibility of the population being served.

## **Regulatory Gaps & Challenges**

- DEL is experienced in working with child care programs to promote health in early learning environments. DOH and LHJ's have the technical expertise to oversee child care food service. Each agency's individual strengths present an opportunity for collaboration in addressing food safety challenges.
- Due to licensing exemptions, some child care programs, such as preschools operating four hours or less, are completely unregulated and therefore unsupported and unmonitored.
- Current regulations are incongruent and do not meet the food safety needs of child care programs. The Food Code targets restaurants, schools, grocers, and other food establishments and does not provide specific guidance to child care programs. Some Food Code requirements may not be practical in child care settings.
- The food preparation equipment in most child care operations does not meet Food Code requirements. Upgrading equipment, including sinks, may be costly or not possible.
- LHJs typically charge permit fees which may be considered unduly burdensome for child care programs.
- Some child care providers believe they are over-regulated.
- Many child care providers are professionals in early education and child development and have not created a foundation of food safety knowledge.
- Gastrointestinal illnesses are common and have come to be considered a normal part of operating a child care program. Many child care providers do not realize that most gastrointestinal illnesses can be prevented in child care environments through implementing safe food handling practices.

## **Conclusions and Recommendations**

Our current situation has left child care programs without consistent oversight, educational support, and resources to protect children from foodborne illnesses. Due to the high susceptibility of children ages birth to five and the nature of child care environments, evidence-based practices that can mitigate public health hazards should be implemented. The Food Code includes up-to-date food safety standards and should be a minimum requirement for all food establishments, especially those that serve a highly susceptible population, such as child care programs. However, the Food Code contains some restaurant-inspired requirements that may not be practical in child care settings. To rectify current inconsistencies, fill regulatory gaps, and better protect the health of children, DEL DOH, and LHJs must work together to catalyze overdue changes in a timely manner. Washington State has the food safety expertise to offer children in care a healthier, safer environment and should not hesitate to achieve that goal.