

**2004**  
**Samuel J. Crumbine**  
**Consumer Protection Award**

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THE CITY OF FORT WORTH PUBLIC HEALTH DEPARTMENT  
**Consumer Health Division: Crumbine Consumer Protection Award Application**

**Executive Summary**

The City of Fort Worth Public Health Department’s Consumer Health Division is honored to submit this application for the 2004 Samuel J. Crumbine Consumer Safety Award. Reflecting the city’s goal of becoming the “safest city in America” and the dedication of the staff to their community, the Consumer Health Division has sought to achieve an exemplary level of programming, performance and protection. Although the division has historically maintained a high level of service, a restrictive economic environment and subsequent constraints on resources and staffing added to the challenge of developing creative and innovative activities that have effectively increased coverage and ensured consumer safety. With a total of twenty-four full-time employees, the Consumer Health Division is charged with regulating 3200 facilities, inspecting 4887 inventories and providing consumer health services to a metropolitan community of over 575,000 residents. These include restaurants, mobile vendors, childcare centers, hotels, and public pools as well as the delivery of vector control and emergency response services. To meet these demands, a long-term plan was developed represented by the integration of ten strategic initiatives implemented over the past five years. This plan represents a data-driven perspective that incorporates innovations in technology, community partnerships, customer education, personnel training, special programs, enforcement activities and staff commitment to prevent rather than respond to undesirable consumer health issues. On behalf of the citizens of the City of Fort Worth, it is with great pride that the Consumer Health Division presents this document. Thank you for your consideration.

## City of Fort Worth 2004 Crumbine Award Application

### **Demographics**

Fort Worth, Texas, affectionately referred to as “Cowtown”, once known as “Panther City” and home to “Hell’s Half Acre”, has become one of America’s most desirable places to live. The continuing rapid growth of Fort Worth has necessitated the development of innovative programs and interventions to adequately provide health and safety services to the burgeoning population. The Fort Worth Consumer Health Division (CHD) is responsible for developing and maintaining a safe consumer environment. This is accomplished through a commitment to risk reduction, education, enforcement, and cultivation of interagency collaboration and community cooperation.

The development of innovative programming has been spurred by the brisk expansion of the city. Fort Worth is 343 square miles in size and has an estimated 2004 population of 577,500; a remarkable increase of over 9% since 2000. The population has grown due to the city’s proximity to the Mexican border, extensive academic and employment opportunities, prominent place in the North Texas metroplex, and overall environmental and residential appeal. This growth is also attributable to ongoing annexation of much of the surrounding (Tarrant County) unincorporated areas. Reflecting Texas’ rich cultural heritage, the Fort Worth population consists of 2.6% Asian, 17.8% Hispanic, 20.3% African American and 59.3% Caucasian. Educational and consumer safety services have been designed to be concordant with the demographic and socio-economic needs of both the food service industry and the general citizenry.

### **Resources**

Despite rapid municipal growth, the CHD has experienced diminished fiscal support over the past few years resulting in decreased funding, personnel and other resources. However, the CHD has succeeded in meeting and exceeding service goals despite the current economic climate by integrating innovative uses

of technology, creative programming, maximizing limited equipment resources, personnel training and staff dedication. In keeping with the City of Fort Worth’s long-term goal of becoming the “safest city in America”, the staff optimizes their effectiveness and efficiency by becoming conversant with limited technological resources and the use of cross training to support duties and assignments across traditionally defined responsibilities. Thus, providing services to meet demand required that each qualified staff person teach both Food Handler and Childcare classes, as well as being assigned to a rotating “on-call” schedule to cover special events and mobile food vendor inspections. Of the 24 full-time employees, fifteen are Consumer Health Specialists (CHSs), which are an enhanced version of the traditional “sanitarian.” Thirteen CHSs are assigned a territory and responsibility for its permitted facilities. Two Senior CHSs serve as team leaders and support quality assurance. Six Customer Service Representatives (CSRs) provide clerical and customer support, with program oversight accommodated by two supervisors and a Consumer Health Manager (Appendix 1).

**Program Planning**

Vision, Goals and Objectives

The vision of the Fort Worth Public Health Department (FWPHD) CHD is to be the healthiest city in Texas. This was formally adopted in conjunction with the city’s strategic goal of becoming the safest major city in the nation. The mission statement of the CHD is to “Protect the public from foodborne, waterborne and other communicable disease.” The goal of the CHD is to promote a safe consumer environment by ensuring the overall integrity and safety of food service, public swimming facilities, childcare facilities, hotels/motels, enforce the tobacco free ordinance and protect the citizenry from vector-borne diseases. The objective is to integrate education with inspection and enforcement activities to enhance compliance by the professional community and ensure the safety of the general public. This has been accomplished by mobilizing technology, providing training to staff and vendors, carefully managing resources, cultivating

community and political support, establishing rapport with vendors and assisting with the development of consumer-related entities from conception to fruition.

### Risk Orientation

Inspection priority and frequency for each facility is determined using an objective Hazard Analysis Critical Control Point (HACCP)-based Risk Assessment process. At the opening of all food service facilities, including childcare centers, a CHS conducts a risk assessment by completing standardized Risk Assessment instruments (Appendices 2 &3). The CHS uses these forms to quantify risk by calculating an overall score. These assessment indicators are then entered into a database to drive future inspection activities. This allows the CHD to use a scientifically based method to direct staff resources towards improving food services by ensuring proper holding temperatures, adequate cooking, sanitary equipment, safe food sources, and proper employee personal hygiene, reflective of the CDC identified risk factors. A philosophical cornerstone of the CHD is to maintain quality assurance and consistent coverage of the entire city. Towards this end, efforts are made to inspect each food service facility at least biennially with higher frequency as directed by subsequent performance and assessment of those facilities.

### Staff Participation

The CHD has developed an integrated team approach to identify and resolve problems, prioritize services and develop programs. The division fosters professional development through provision of continuing education opportunities in the food, pool, environmental and childcare safety arenas. The CHD draws on its diverse and well-trained staff; the average CHS has eleven years of public health experience and eight years inspection experience. All fifteen CHSs have bachelors' degrees and Registered Sanitarian licenses. Of those, five also have related masters' degrees and one has a doctorate. The CHD has successfully synergized this knowledge base to develop innovative initiatives such as Hardware Evolution, Statewide Environmental Evaluation and Planning System (SWEEPS<sup>®</sup>) software, Customer Service and

Partnerships, Commitment to Training, Intentional Contamination/Bioterrorism, Emergency Response, Mobile Vendors, Temporary Event Inspections, Summer Lunch Program and Childcare Kitchens. Academic and institutional recognition of CHD performance is evidenced by requests from the University of North Texas Health Science Center for guiding a graduate student-mentoring program and safety training requests by McDonald's™. A detailed description of each program is provided in the Strategic Initiatives section. The following (Table 1) provides a brief synopsis of the strategic initiatives that define the division's innovative and comprehensive consumer health program.

<b>Table 1: CHD Programming to Support Consumer Health Services</b>		
<i>Strategic Initiatives</i>	<i>Description of Program/Activity</i>	<i>Impact</i>
<b>Hardware Evolution</b>	Technological and communication development	Improved communication, inspection and monitoring of city consumer services
<b>SWEEPS®</b>	Computer-based, in-field database development and maintenance with real-time capability	Improved tracking and immediate data retrieval to drive inspections.
<b>Customer Service / Partnerships</b>	Cultivation of consumer relationships and vendor compliance through education.	Customer service satisfaction of 97-99% in each of past five years; increased vendor compliance.
<b>Commitment To Training</b>	Provide ongoing training for specific tasks and cross training to optimize staff resources.	Three VNS standards met, FDA recognition and full compliance within a year.
<b>Intentional Contamination/Bioterrorism</b>	Facility/personnel security training; coordination with emergency response entities.	Heightened awareness of food service industry re: intentional events; integration with emergency response.
<b>Emergency Response</b>	Disaster response (natural and accidental).	Protection of food and water supply following disasters.
<b>Mobile Food Vendors</b>	Inspection of mobile and seasonal vendors to ensure CHD standards.	Collaboration with Code and Police Departments has resulted in near 100% coverage.
<b>Temporary Events</b>	Ensuring consumer health standards for numerous temporary events.	98% inspection rate of all temporary events; No FBI since 2001.
<b>Summer Lunch Program</b>	Provide ancillary support to free lunch program.	Has ensured food safety for a high-risk population.
<b>Child Care Kitchens</b>	Initially grant-funded project to inspect childcare centers under uniform CHD TFER standard.	Virtually 100% TFER compliant within year. No confirmed childcare FBIs since inception of program.

### Self Evaluation

The CHD is enrolled in the Food and Drug Administration (FDA) Voluntary National Standards (VNS) program. The baseline assessment was initiated in 1999 and resulted in developing a comprehensive system of setting goals, pursuing objectives and evaluating progress towards the continual improvement of the CHD (Appendix 4). Regular program of customer service satisfaction surveys provide insight into needs of community and regulated industry. The VNS assessment and consumer feedback combine to direct changes and improvements to education, inspection and enforcement activities in both the field and clerical components of the program.

## **Program Management**

### Active Managerial Control

The CHD conducts inspections to ensure compliance by identifying violations in accordance with local ordinance and state codes. The primary methodologies of the CHD are education and voluntary compliance supplemented by enforcement options that include closure, citation and permit revocation, as appropriate. Retail managers are then held accountable for ensuring proper employee training, code conformance and completion of corrective actions within agreed timelines.

### Epidemiological Capability

The Fort Worth Public Health Department (FWPHD) Epidemiology and Assessment Division provides internal epidemiological response and surveillance activities. These activities are reinforced through a Memorandum of Understanding with the Tarrant County Public Health Department (TCPHD). The CHD provides the initial on-site investigation and the TCPHD conducts laboratory testing, follow-up and medical surveillance reporting. An ArcView™ Geographic Information System is used to constellate and track Food-borne Illness (FBI) outbreaks. Consequently, the CHD is able to identify outbreaks, determine suspected source, infer intentionality and coordinate needed interventions.

### Data Management and Utilization

SWEEPS® is the centerpiece of the CHD data management system. The SWEEPS® program offers the capability to retrieve reports and data immediately, greatly reducing response time in the field and improving overall efficiency. This system of data management has minimized the use of a paper-based filing system. This resulted in a pervasive improvement in the manner that the CHD conducted business by allowing instantaneous access to inspection histories, complaint data and billing records. The main benefit of this change was the ability to immediately enter data instead of having to key in a paper backlog of several months thereby allowing staff to support other activities.



## Support and Resources

The City of Fort Worth has a City Council-City Manager form of government. The FWPHD Director reports to one of six Assistant City Managers. The department has five distinct divisions that report to the Director (Appendix 5). Other than the CHD, these divisions include Epidemiology, Outreach, Health Promotions and Animal Care and Control. In fiscal year 2002-2003, the CFW allocated \$1,223,807.00 for the CHD (Appendix 6). In turn, the CHD generated revenues of \$1,449,663.00 from fees for training, permits, plan-reviews and other services. The CHD uses a variable fee schedule for the various types of food establishments permitted (Table 2).

## **External Involvement**

### Industry and Consumer Interaction

The CHD collaborates extensively with professional and educational organizations throughout the community. These affiliations include membership in numerous restaurant, food safety, environmental, hotel, childcare, and regulatory associations. To further facilitate consumer interaction, the CHD partners with local academic institutions, from elementary schools through college, as well as other organizations, such as retirement communities and neighborhood associations (Appendix 7). These partnerships increase outreach and educational interaction through activities by furnishing guest speakers, courtesy inspections (to promote appropriate facility development), and inspection internships.

Table 2: **Food Establishment Fees**

***Food Establishments*** - Base fee of \$200.00 plus \$5.00 per employee.

<u>Inventory Type</u>	<u>Description</u>
01	Restaurant
02	Snack Bar
03	Grocery Store - Retail
04	Grocery Store - Salvage
06	Lounge
13	Bakery
14	Deli - Retail
15	Fish Market - Retail
16	Meat Market - Retail

***Mobile Food Vendors*** - Each owner of a mobile unit is charged a permit fee of \$200.00, \$5.00 per employee, and \$50.00 per vehicle.

<u>Inventory Type</u>	<u>Description</u>
07	Produce Vendor
08	Snow Cone Stand/Truck
09	Corn Roaster
10	Food Vendor - Prepackaged
11	Food Vendor - Cook & Serve
12	Caterer

***Pushcarts*** - Base fee of \$150 for the first cart and \$50.00 for each additional cart. (Inventory Type 23)

## Manager / Food Worker Training Partnerships

Following the contemporary model of public health, the CHD provides food, pool, and childcare safety training and certification activities to prevent rather than respond to consumer safety problems. To ensure participation and comprehension by audiences from broad educational and cultural backgrounds, classes are presented in a multi-media format, including classes and media in Spanish. These programs are additionally supported via partnerships with local contractors and other FWPHD divisions.

## **Program Implementation**

### Enforcement

Responsibility for enforcement of food ordinances and codes is derived from the Texas Food Establishment Rules (TFER) and the Fort Worth Model Food Ordinance (Appendices 8 & 9). The city ordinance is often more stringent than TFER; for example, Fort Worth requires

“...only commercial quality equipment or utensils that meet or exceed National Sanitation Foundation (NSF) standards or their equivalent will be approved.” Municipal Code 16-122(a)

This illustrates some of the higher standards required by the city ordinance (TFER requires “...smooth and easily cleanable equipment...”). Further, provisions for enforcement of the city ordinance allow for extra flexibility towards compliance by providing additional options for citations, food condemnation, closure and suspension/revocation of issued permits.

### Formal Staff Training

In the past five years, the CHD has made tremendous strides in upgrading professional training. Needs were identified and training programs were developed for new and current CHSs (Appendix 10). State standardization of TFER guidelines in 1999 provided redirection to the development of the CHD food inspection program. In turn, this systematic approach led to regeneration of CHS training as detailed below in the “Commitment to Training” strategic initiative.

## Internal Quality Assurance

Until 2001, the CHD program assured quality of customer service through surveys and employee performance monitoring. The Quality Assurance program was expanded that year as two Senior CHSs were selected to analytically monitor and evaluate CHS inspection reports and field performance. New program enhancements since 2003, include increased oversight by the Senior CHSs via tracking of violations entered, standardization progress, enforcement activities and joint inspections. Employee performance is then formally monitored and specific goals for improvements identified during bi-annual job performance evaluations. Regular review of customer surveys guide improvements to customer service practices. The Quality Assurance program continues to evolve and improve as new insights and strategies are developed.

## **STRATEGIC INITIATIVES**

The following ten strategic initiatives represent the core activities cultivated over the past several years that have led to the success of the CHD program. These activities not only protect consumer safety but their design integrates mechanisms for ongoing and continuous improvement into the future.

### ***1) Hardware Evolution***

**Baseline History** - Prior to 2000, the CHD used borrowed phones, pagers and 2-way radios to communicate. Each CSR had a computer but the CHSs shared a handful of computers, all of which were antiquated. Inspections and violations were handwritten on a three-part form and entered into the database at least a month later. Bi-metallic thermometers used at the time required time-consuming manual calibration and posed a risk of cross-contamination. Expensive paraffin strips were used to verify dish machine water temperatures. Further, the CHD experienced a chronic lack of transportation.

**Challenges** - Although Fort Worth has grown rapidly, CHD equipment funding has remained static. Therefore, improvements to communication, inspection and support capabilities needed to be accomplished within these fiscal limitations.

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**Objectives:**

- Adapt current technology to increase field productivity and conduct accurate inspections.
  - Increase Customer Service Representative (CSR) efficiency to meet demand.
  - Improve communication capability.
  - Acquire a risk-reducing, expeditious means of collecting and maintaining inspection data.
- 

**Methods** - A meticulous self-analysis of long-term needs was conducted and structured the CHD budget over the past five years to accommodate equipment acquisition. Extensive research of available technology enabled the CHD to purchase digital stem-type thermometers, *Barnant 115*<sup>®</sup> thermocouple thermometers, *Raytek*<sup>®</sup> *Raynger*<sup>®</sup> *ST*<sup>™</sup> infrared non-contact thermometers and waterproof thermometers. Negotiations with cellular providers resulted in a lease arrangement that enabled each CHS to have a cellular phone. This cellular lease plan was renegotiated in 2003 resulting in additional savings and the 2-way radios were completely eliminated. Further, the long-term CHD plan integrated newly leased *Pentab*<sup>™</sup> tablet computers and expanded software to dramatically reduce paperwork, provide immediate data entry and streamline the overall inspection process. The plan also allowed for the purchase of an additional CHD vehicle.

**Measurable Outcomes and Achievements** - The CHD was first in North Texas to use the new thermometers. This new technology expedited accurate temperature measurements. The *Barnant 115*<sup>®</sup> and digital stem-type thermometers provide rapid temperature readings, the *Raytek*<sup>®</sup> reduces cross-contamination risks and the waterproof thermometer records accurate dish machine temperatures, allowing operators to witness immediate food contact surface sanitation results. The use of cell phones embraces the Fort Worth priorities of Diversity, Communication, and Customer Service by facilitating translation needs, improving staff communication, and enhancing responsiveness to customer demands. Further, better transportation has augmented inspection capabilities and performance. Innovations represented by the *Pentab*<sup>™</sup> hardware and the associated software (described in detail in the following initiative), resulted in a savings of 6.4 minutes per inspection and violation notice (Table 3). Extrapolating these results, for example, to the 4731 inspections completed in fiscal year 2003 a savings of 504 hours was realized. This

Fiscal Year	# Inspections	Inspection Time (Min.)	Average (Min.)	Total Savings (Min)
1997 - 2000	10,010	9142	54.8	6.4
2000 - 2003	11,115	9958	48.4	

represents a potential of 630 additional inspections, roughly the equivalent to the annual field activity of one full-time CHS. The corresponding decrease in CSR workload further impacted this strategy in effectively compensating for some of the staff shortages. By conducting the acquisition of equipment over a period of several years, the CHD was able to harness the technology needed to meet the objectives of risk reduction, improved communication, increased field productivity and improve CSR efficiency.

## 2) *SWEEPS*

**Baseline History** - The CHD had historically used paper and triplicate forms that were labor-intensive and time consuming to enter into the database. Although the Input Systems SWEEPS<sup>®</sup> program was in use, this manual orientation resulted in a substantial informational backlog. Consequently, access and usefulness of data to drive CHD services was hindered and limited the capability to respond to consumer safety needs in a timely manner.

**Challenge** - Inconsistent with the long-range plan, the CHD had not cultivated mobile office capabilities. Despite having been integrated into CHD activities, the SWEEPS<sup>®</sup> program was limited to clerical and data maintenance functions. CHD staff recognized that restricting the use of this program to the office failed to optimize the potential of the software. This issue was further complicated by the fact that SWEEPS<sup>®</sup> was still MS-DOS<sup>®</sup> driven.

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### Objectives:

- Provide a viable database maintenance system for CHSs in the field.
  - Construct a program to manage site history and generate necessary reports.
  - Eliminate need to re-enter paper data.
  - Record CHS activities and note facility violations (task tracking).
-

**Method** - The CHD partnered with Input Systems to convert the program from MS-DOS<sup>®</sup> to Windows<sup>®</sup> to create user-friendly software that would support both in-office and field operations. As part of this partnership, the CHD became a Beta test site for this program. Staff computers and software evolved towards realization of the mobile office concept whereby CHSs, using Pentab<sup>™</sup> computer devices, were able to enter data directly into the database while in the field. The CHD was the first consumer safety entity in North Texas to modernize the inspection process by developing and implementing the mobile office concept in the field. In conjunction with the software developer, the CHD tailored inspection tables by integrating both the TFER and the Fort Worth food ordinance into the computer-in-the-field food inspection program. Through careful budget management, each CHS was issued a Pentab<sup>™</sup> computer, printer and accessories, resulting in full implementation of the SWEEPS<sup>®</sup> program in August 2000.

**Measurable Outcomes and Achievements** - Concise computer generated inspection forms replaced the cumbersome handwritten inspection reports. Violation notices included both uniform corrective action and the specific applicable regulation to assist in educating facility owners (Appendix 11). The success of the food service program led to the creation of daycare, smoking and hotel/motel SWEEPS<sup>®</sup> field inspection programs. In 2001, the addition of a swimming pool

program completed this comprehensive inspection system. Inspection data is now conveniently accessible, easily updated and available for immediate upload to the computer network. Additionally, the CHS can easily retrieve educational materials, inspection results and applicable laws. As listed in Table 4, the user-friendly SWEEPS<sup>®</sup> format has a myriad of uses. The

Table 4: SWEEPS <sup>®</sup> Applications	
Field Uses	Office Uses
Owner / Contact Information	Mileage Reports
Inspection History	Time Accounting
Complaint History	Food Handler Card Generation
Closure History	Food Manager Card
Billing Inquiry	Accounts Receivable
On-Site Compliance Monitoring	Process Payments
Violation Documentation	Report Generation
Notice Form	Complaint Form Generation
'Out of Business' Registry	Food Handler Card Tracking
Repeat Violation Documentation	Food Manager Card Tracking
Call-Back Date Ability	Field Coordination

CHS can review site, violation and billing history as well as illustrate these to the facility operators along with the applicable laws to provide on-site education. Operators have reacted positively to this system, as evidenced by improved overall compliance and cooperation. Since 2001, the CHD has continued improvement to the system by transferring from Pentabs to laptop computers that are more ergonomic, have greater power and a broader range of capabilities. Fort Worth is proud to have been integral in the development and implementation of this modernized system of inspection.

### 3) *Customer Service and Partnerships*

**Baseline History** - Prior to 2000, consumer safety services were not fully monitored, key functions were not organized, and integration of CHD activities was underdeveloped. Access to the inspection status and other information regarding food service and other consumer entities was not readily available to CHD staff nor to the consumer and news media, all of which expected convenient up-to-date access to facility information. Further, out of town customers, a key component of the Fort Worth economy, were limited to obtaining consumer information regarding food establishments only during regular working hours on weekdays through phone/fax contact.

**Challenge** - Operators were resistant to discussing their procedures and many were not amenable to the prospect of having their performance (specifically, their violations) available to public scrutiny. Rapport had not been fully established with the operators and the CHD was not sought out for information and guidance. Many facility operators employed a “don’t ask, don’t tell” policy hoping that the CHS would not find violations during an inspection. This was a major obstacle in the CHDs ability to fully inspect facilities, educate operators, develop constructive relationships and provide responsive customer service.

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#### **Objectives:**

- Increase food safety awareness through partnerships.
  - Build a closer working relationship and understanding with the industries regulated by the CHD.
  - Increase the level of Customer Service satisfaction.
  - Provide reliable and current access to consumer safety information to the public and media.
-

**Methods** - The foundation of safety in the food service industry involves dieticians and other academically trained personnel. Therefore, the CHD purposely cultivated relationships with local academic institutions by providing presentations on food safety, offering opportunities to accompany staff during inspections (“ride-alongs”), and sponsoring internships. The CHD also pursued community contacts to promote consumer safety activities through numerous education events such as career day activities, holiday food safety seminars, health fairs and community events to heighten visibility, build relationships and engender trust. The CHD has increased collaborations with other city departments to optimize internal resources. Some notable examples include the following:

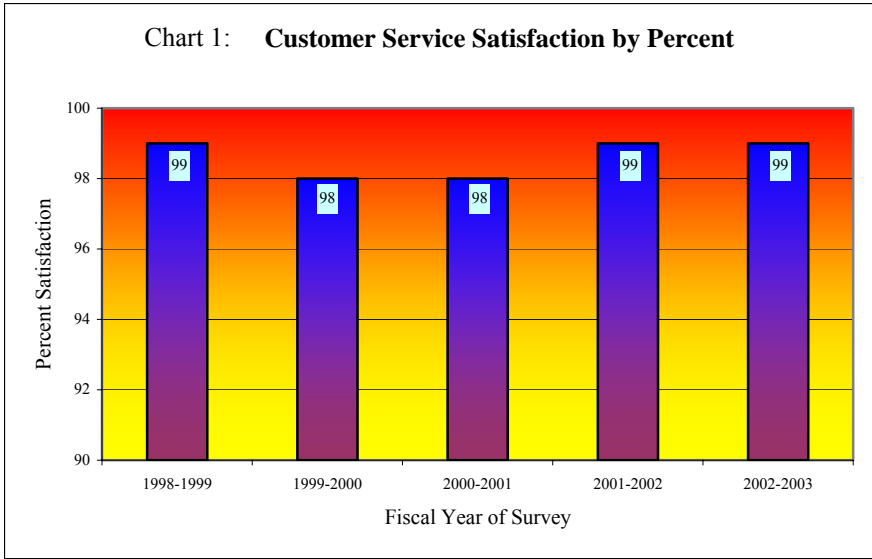
- Providing education, inspection, and enforcement services for:
  - ◊ Parks and Community Services (PACS) Department during the Summer Lunch Program.
  - ◊ Development Department
  - ◊ Code Compliance
  - ◊ Police Department
  - ◊ Environmental Management
  - ◊ Water Department
- Mobile vendor inspections (during operation)
- Late night bar inspections
- Interdepartmental inspection services
- Establishing emergency response coordination with the Fire Department in support of any emergency affecting consumer safety 24 hours a day, 7 days a week.

The CHD has fostered relationships with industry organizations, such as Child Care Associates of Fort Worth, Contract Care Management Services, the Hotel/Motel Association and the Tarrant County Restaurant Association, by providing educational presentations to build support and cooperation for CHD activities. The CHD has instituted a customer satisfaction survey to ensure satisfaction and help guide the development of programs.

**Measurable Outcomes and Achievements** - The CHD has hosted interns from Texas Christian University, Tarrant County College, and the University of North Texas Health Science Center (UNTHSC). These internships provide students with a unique experience and insight into consumer safety issues and have led



to a request from UNTHSC for CHSs to serve as adjunct graduate advisors. In this capacity, the CHS has an expanded opportunity to educate and guide the student towards the innovative perspective that underlies the accomplishments of this program. CHD personnel have served as board and council members of different organizations, such as NTEHA, Tarrant County Restaurant Association and North Texas Food Safety Council. To further enhance public access and improve customer service, the CHD website at [www.fortworthgov.org/health/ch](http://www.fortworthgov.org/health/ch) was launched in 2001. The site allows citizens and clients to review recent inspection scores and access pertinent laws, class schedules, educational materials, brochures, permit requirements and forms. The CHD also partnered with Municode<sup>®</sup> to provide on-line access to city ordinance regulations. Out of town customers can immediately obtain free information and temporary permit applications. Now, customers are served 24 hours a day. The website succeeded in increasing customer service while slashing printing and mailing costs. Ongoing surveys conducted by the CHD indicate that customer satisfaction of CHD services has ranged between 98 and 99 percent over each of the last five years (Chart 1). This high level of customer satisfaction has been and continues to be achieved



through partnerships with internal and external customers. Networking between the CHD and local organizations has helped enhance cooperation, enrich mutual knowledge, improve procedures and reinforce consumer safety throughout the area. The CHD efforts were also

instrumental in rekindling the North Texas Food Safety Council to further support these efforts. The CHD perpetually strives to improve customer service and set the industry standard.

#### 4) *Commitment to Training*

**Baseline History** - To ensure consistency and uniformity in food inspections across the United States, the Food and Drug Administration (FDA) proposed nine standards through the Voluntary National Standards (VNS) guidelines. In an effort to meet these guidelines, in 1998 the Texas Department of Health (TDH) revised the state food rules for the first time in 22 years. These rules followed the 1997 FDA Food Code and changed the inspection form format from a 44 item all-inclusive list to a HACCP-based 27-item Critical Violation list. In 1999, TDH instituted a program to standardize field CHSs on the new regulations. During the same year, The Fort Worth food ordinance was revised and updated to reflect the changes in the state law by adopting the new Texas Food Establishment Rules (TFER). The TFER was the core document for this ordinance. To help achieve compliance with the ordinance, the CHD was required to have CHSs trained as Registered Sanitarians within six months of hire. However, there was not a formal program or system in place to fully accommodate this requirement.

**Challenge** - The VNS guidelines and concurrent adoption of the TFER required that all CHSs obtain training on the new code. In addition, CHSs required training on the other services provided by the CHD. The issue was further complicated since the educational curriculum and training opportunities needed to be developed while maintaining regular coverage and activity in the field.

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#### **Objectives:**

- Standardize CHS training to ensure consistency.
  - Establish a CHS as a Standardization and Training Officer to implement TFER.
  - Establish training regimen to accommodate TFER and program training needs.
  - Devise formal training protocol for CHSs that integrated unobtrusively with work expectations.
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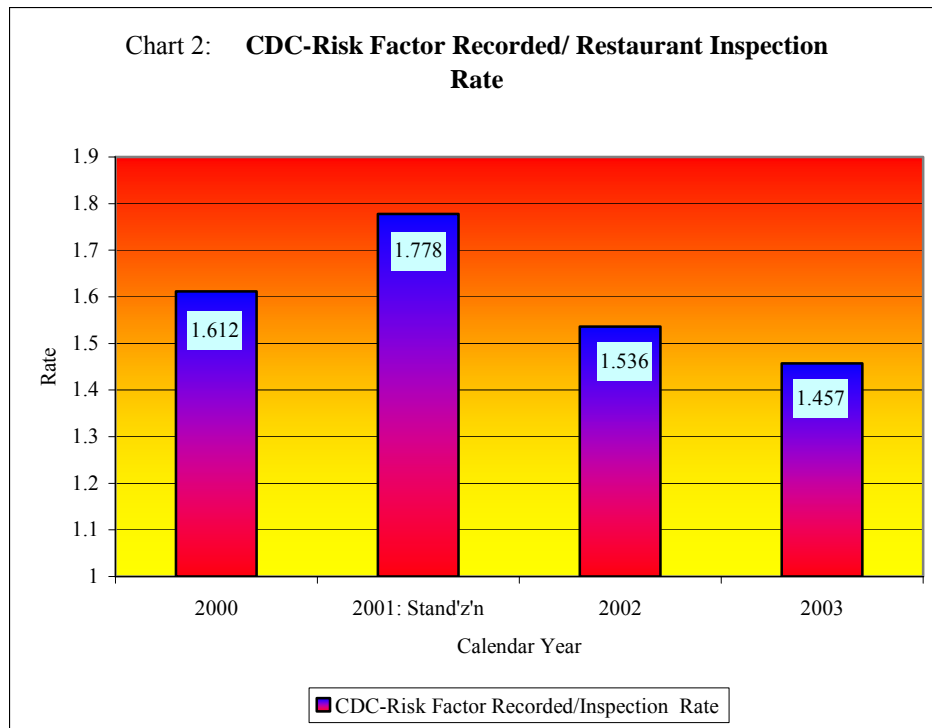
**Method** - The CHD has been associated with the VNS Clearinghouse group since its inception. The CHD was invited to participate as an inaugural member to provide input into the Clearinghouse group's decision-making process regarding the interpretation of VNS standards. The CHD continues to be active in this program, participating in regular meetings and conferences. In 2001, the CHD established involvement in

the national clearinghouse workgroup that interprets the VNS. As required, a thorough self-assessment of the CHD program was conducted and reviewed by the FDA. Consequently, this self-assessment guided development of the CHD program and included rewriting existing ordinances to integrate VNS guidelines and development of an Inspection Quality Assurance Program. As part of this program, a Senior CHS verifies that violations are properly documented and required corrective actions are implemented. The Senior CHSs periodically accompany team members to monitor/ensure performance and evaluate risk factor reduction. Funds awarded by the FDA were used to augment CHS technical training and develop a comprehensive training program. This program included development of a manual that contained relevant state and city ordinances, a computer handbook, training checklists and schedules. Each new trainee is assigned a mentor, given a training manual, and a detailed action schedule (Appendix 12).

**Measurable Outcomes and Achievements** - The CHD has developed programs and strategies to meet all of the VNS standards. Three of the nine standards have been successfully completed. These include Standard 1, Regulatory Foundation (January 2003), Standard 4, Uniform Inspection Program (April 2003) and Standard 6, Compliance & Enforcement (April 2003). The CHD will complete compliance with the remaining six standards within 10-12 months. The self-assessment/audit documentation sent in for review resulted in \$4,000 funding from the FDA in recognition of CHD efforts and to support completion of the remaining standards. The training program has improved field staff ability to recognize violations and provides a mechanism to promote CHSs who have demonstrated high proficiency to more responsible capacities. Further, periodic quality assurance assessments maintain high levels of personnel competency and uniform enforcement of the TFER.

The positive impact of compliance with VNS is demonstrated by comparing the number of CDC identified risk factor violations with the number of inspections. As illustrated in Chart 2, upon standardization of inspection practices (2001), the CHSs detected and recorded increased CDC risk factor

violations. However, pursuant to enforcement and educational activities, operators achieved heightened



awareness of required standards and reflected improved compliance rates, effectively reducing the occurrence of these risk factors.

To develop the ability to standardize inspections, two members of the CHD became certified as Texas State Standardization and Training

Officers (STO). These officers designed a comprehensive training program that standardized inspection protocols for CHD personnel, including documentation of violations on the 27-item form. Standardization was further assured by having the STO periodically accompany field staff during inspections to ensure consistent application and enforcement of regulations. The CHD requires that staff demonstrate competency with the standardization program after passing the Texas Sanitarian Exam. Further, the CHD requires re-standardization every three years to ensure consistency. Documentation of all standardization activities is recorded in an oversight manual to monitor and maintain compliance with the program. Finally, as of October 2003, the Senior CHSs have been responsible for conducting follow-up activities to ensure that the vendor implements corrective actions after risk factors are identified.

##### 5) *Intentional Contamination / Bioterrorism*

**Baseline History** - The contemporary environment has introduced security issues that were not operative prior to the murders perpetrated by terrorists on 9/11. Although emergency contingencies had been

integrated into CHD pre-planned response protocols, the CHD did not have a comprehensive plan or the personnel to respond in an organized manner to an intentional emergency event. This is especially acute since the food industry is an attractive vector for the intentional dissemination of illness (bioterrorism).

**Challenge** - Maintaining consumer safety in response to an intentional, natural or accidental emergency requires the pre-planning and education of both the general public and professional communities. Adequate personnel resources, however, were not available to educate the food service and related industries in the prevention, identification, reaction, and recovery from acts of terrorism. Further, traditional protocols for emergency response and FBI investigation did not address the considerations that would likely characterize an intentional exposure, or terrorist incident, involving the food service industry.

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**Objectives:**

- Establish a bioterrorism training program for food service industry entities.
  - Dedicate necessary staff to develop a bioterrorism and health emergency preparedness program.
  - Ensure that public and professional entities are educated in surveillance and reporting protocols.
  - Integrate consumer safety with other emergency response activities.
- 

**Methods** - The CHD worked with the FWPHD Bioterrorism and Health Emergency Preparedness (BHEP) team to include a staff position dedicated to food security issues. Grant funding was received from state and federal (TDH and CDC) sources to support a Consumer Health Safety Officer (CHSO) position. This position developed a multi-media program to educate food service industry personnel on methods to enhance security of their facilities, improve surveillance and respond to suspected or actual terrorist events. The CHSO aggressively investigates all FBIs to rule out intentional exposure. Arrangements have been made for follow-up response that includes epidemiological investigations by both the city and county health departments in conjunction with the city's Emergency Operations Center. The diverse training obtained by the current CHSO includes hazardous material response, emergency response protocols, incident management, security consulting certification, medical care, effects of weapons of mass destruction, field sanitation, fire prevention and large scale consumer safety issues. Along with a CHS background, the

CHSO can serve as the focal point for inter-agency emergency response coordination of consumer health issues. The CHSO also interfaces with the medical community to monitor disease trends in order to detect unusual disease dispersion possibly indicative of intentional contamination.

**Measurable Outcomes and Achievements** - In October 2001, the CHD mailed an awareness document to all 3200 permitted facilities regarding bioterrorism prevention and announcing the availability of a training program for food facility security (Appendix 13). The CHD also placed a warning on all computer-generated food inspection forms. All FBIs are logged into SWEEPS<sup>®</sup> for tracking and monitored to provide indication of coordinated intentional exposures. The CHD has adopted the policy of treating all suspected FBIs as potential bioterrorism incidents. The CHSO has produced brochures, handouts, and posters (Appendices 14 & 15) for distribution during the 63 security and safety presentations that have been made to the local food industry to date. Handling each FBI as an intentional event prevents problems associated with “backtracking” if an attack is determined to have occurred. Although the CHD previously received no feedback on the final outcome of FBI investigations, systems are now in place to track all FBI inspections upon their conclusion. Additionally, the CHD has improved threat intervention and slashed response time to within one-business day. Ongoing educational and training opportunities for both staff and the public continue to increase awareness. The BHEP team won the 2003 award for “Best Presentation” at the Protect Texas Bioterrorism Contractors Meeting and an article highlighting the program in the Fort Worth Star Telegram led to a request for security training for local store managers within the McDonald’s Western Division. These protocols also serve to ensure preparedness for other consumer safety emergencies, including natural and accidental disaster events.

#### **6) *Emergency Response***

**Baseline History** - The CHD had discussed emergency response contingencies with city departments in the past. Responsibilities of each city department, including the CHD, were identified but not tested.

**Challenge** - On March 28, 2000 a Category F2-F3 tornado hit downtown Fort Worth during a weekday rush hour. This was the largest tornado to ever hit the central area of a major city. The CHD was tasked with the responsibility of ensuring consumer safety and supporting recovery efforts following the event.

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**Objectives:**

- Demonstrate capability to respond to a major disaster event.
  - Ensure safety of food service establishments.
  - Prevent illness by identifying compromises to the food or water supply.
  - Demonstrate capacity and capability to efficiently restore food service capabilities.
- 

**Methods** - Consistent with emergency planning, the CHS responsible for the downtown area coordinated response efforts with CHD management. Pursuant to discussions with Emergency Operations Center staff, input from city departments, the city manager’s office and CHD staff, the CHD organized a response plan and assembled a CHS volunteer team. The team canvassed the affected area for signs of electrical power loss, food contamination, hot and cold potable running water availability, and facility damage that could pose a threat to human life. Contaminated and unsound foods were condemned and site owners/operators were notified that closure was mandatory until proper and safe operating conditions existed and were verified by the CHD. During and after the event, the priority of the CHD was to prevent unsafe food or water entering the food supply, all while working in a dangerous and potentially unstable environment due to glass shards in the street and occasionally falling from damaged high-rise buildings.

**Measurable Outcomes and Achievements** - CHD personnel inspected 111 affected sites. No illnesses due to food or waterborne contamination were reported. Most food service operators were able to re-open within ten days. As a result of this event, the CHD has further cultivated its emergency response capabilities and solicited speakers and trainers to enhance specific practices and procedures. Two years later, the lessons learned were applied when another tornado hit Fort Worth’s East side. Previous experience and planning allowed for the response to be rapid, focused and even more effective than demonstrated in 2000. Effective

response and organization allowed the CHS to provide an on-site plan review to facilities that were severely damaged immediately following the tornado.

#### 7) *Mobile Food Vendors*

**Baseline History** - Fort Worth offers six types of mobile vendor permits spanning “whole produce” to “cook & serve” food units (as described in Table 2, page 7). To obtain a permit, vendors arrived at the CHD with their mobile unit, provided the necessary paperwork and waited for inspection. Any vehicle with cooking equipment could be permitted. Reflective of the area’s diversity, one of the more unique mobile vendors is the mobile “taqueria.” More than a taco stand, the taqueria is tantamount to a restaurant on wheels with a broad menu and is often found “after hours” in parking lots of dance halls, bars, grocery stores, and flea markets. These taquerias, along with other traditional mobile food service vehicles were not comprehensively inspected under a defined set of “best practices” or guidelines. No systematic inspection routine was in place and inspections were usually conducted in response to citizen complaints or staff observations.

**Challenges** - Mobile vendors frequently needed multiple inspections to obtain permit. Vendors often stated that they did not understand inspection criteria or the food code. Permit inspections did not effectively convey operational requirements since vendors identified compliance as only having the items on the Mobile Vendor Inspection Form (Appendix 16). Permit inspections for mobile vendors did not provide the same opportunity for verification of food safety issues as did fixed facility inspections. Infrequent field inspections indicated that permitted vendors were often found to be out of compliance. Temperature requirements accommodated during permit inspection were often not sustained in the field. Contrary to code, numerous mobile vendors would not report to their commissaries for cleanup, waste-disposal, food preparation or food storage.



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**Objectives:**

- Establish enhanced guidelines for mobile food vendor licensing.
  - Reduce risks associated with improper hygiene and holding temperatures.
  - Streamline the mobile food vendor inspection process.
  - Reduce FBI risk through education, surveillance, and enforcement of mobile food vendors.
- 

**Methods** - In the summer of 2000, the CHD initiated a systematic program of inspecting mobile food units at flea markets, bars, special events and other venues where mobile vendors conducted business. To adequately provide coverage, the CHD established partnerships with the police, code compliance and the Texas Alcoholic Beverage Commission. A coordinated three-pronged approach was launched and included changing CHD policy, scheduling vehicle inspections and implementing a comprehensive education and enforcement program. The CHD introduced policy requiring mobile units to have NSF-approved equipment or its commercial equivalent. In 2002, the CHD developed a Permit Inspection Appointment System that all mobile vendor permit inspections be scheduled in advance. The CHD spearheaded formation of Mobile Food Vendor Operational Inspection Teams. These volunteer teams reflected a partnership with the city's Police and Code Compliance Departments to inspect mobile units that operate at night and/or on the weekends. These teams, in conjunction with city leadership, worked with the Hispanic Chamber of Commerce and other local leaders to ensure that bilingual training on mobile vendor requirements was available and adequately presented throughout the community.

**Measurable Outcomes and Achievements** - In September 2000, all new units were equipped with NSF-approved equipment. The regulated appointment system of inspections alleviated congestion and helped optimize use of limited CHD resources. This also succeeded as an incentive for vendors to achieve compliance prior to arrival since permit inspection failure may result in the loss of several days of operation if another appointment is not readily available. In 2002, the City Council adopted a Mobile Vendor Ordinance (Appendix 17) stipulating that all new mobile vendor vehicles be commercially manufactured expressly for food service (vehicles permitted prior to 2002 were exempted until 2007). These mobile

establishments provide excitement to Fort Worth's vibrant cultural framework. Fort Worth embraces this diversity but uses the three-pronged approach to monitor these colorful mobile units closely in order to fulfill the goal of being the nation's safest city. As a result, FBI risk factors have decreased. Data indicates that more vehicles are now being permitted during their first appointment. Not entirely surprisingly, ongoing evaluation surveys indicate that satisfaction among vendors has increased. Mobile vendor ordinance enforcement after hours has also resulted in better compliance and decreased need for closures. Through the integration of education, oversight and enforcement along with support by city and state agencies, community leaders, and mobile vendor operators, the CHD has effectively nurtured the mobile vendor industry in Fort Worth to reduce FBI risk factors.

#### 8) *Temporary Events*

**Baseline History** - Reflective of Fort Worth's dynamic environment, there are numerous entertainment, cultural, sports and business activities hosted by the city. Often, several venues may occur simultaneously and host a substantial number of visitors. Auto races at the Texas Motor Speedway and the MayFest Celebration held downtown draw as many as 250,000 visitors per day. All of these events require CHD supervision and oversight. Some events, like food shows, have over 100 temporary food booths. The largest event, the Fort Worth Stock Show and Rodeo, is the second largest stock show in the country and lasts more than three weeks with a total attendance of approximately 1 million visitors. This event has over 80 temporary food booths with most operating daily. Along with other large venues, including the Amon Carter Stadium (home to TCU football and the Fort Worth Bowl), the Main Street Arts Festival and other annual festivals or events, the CHD issues nearly 1300 temporary health permits annually.

**Challenge** - Large temporary events present a tremendous risk for a large-scale FBI outbreak. The CHD needed to develop a system to monitor for temporary events, organize personnel distribution to inspect temporary vendors and establish protocol for follow-up and monitoring. To support these activities, a

program to establish retrievable data on FBI's at temporary events and monitor vendor's long-term violation history was required. The CHD needed to develop a system to readily retrieve a history of vendors' violations and a method to accurately track FBI complaints and/or outbreaks specific to temporary events.

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**Objectives:**

- Establish a system to identify temporary events.
  - Provide personnel coverage to adequately inspect temporary events.
  - Develop capability to access and track violation history.
  - Prevent FBIs associated with temporary events through education and surveillance.
- 

**Methods** - The CHD met with numerous city departments and the city manager's office to establish a system of notification and mutual support of temporary events. The resulting system provides advance notice of all temporary events and identifies those events that will have a food service component. The CHD then arranges personnel schedules to allow for inspections and oversight of temporary events throughout the city. To supplement these permit activities and increase likelihood of compliance, CHSs serve as Special Event Coordinators by meeting with and educating vendors at all major events. These Coordinators ensure appropriate documentation is filed, data entered, permits issued and arrange follow-up inspections. This integrated system of identifying temporary venues, providing pre-event meetings, inspections, tracking violations/complaints and maintaining inspection history to identify trends was initiated in 2001. Using the SWEEPS<sup>®</sup> program, all data is available in real time and cross referenced by the temporary permit holders' name and assigned site number.

**Measurable Outcomes and Achievements** - Since inception of this program, no FBI has been detected at a temporary event. The CHD has achieved a minimum of 98% inspection rate of temporary events over the past six years using the scheduled CHSs and volunteer teams organized by the Special Event Coordinators. The CHD tracks temporary event data to identify priority events, risk and past violators to adequately pre-plan coverage, resulting in improved compliance.

## 9) *Summer Lunch Program*

**Baseline History** - The Summer Lunch program (SLP) is sponsored by the United States Department of Agriculture and administered by Fort Worth's Parks and Community Services Department (PACS) to provide safe lunches and snacks to primarily children of financially challenged families throughout the community. The program provides one balanced meal Monday thru Friday during the summer break for over 4000 qualified children.

**Challenges** - Although representing a worthwhile and needed community service, the CHD did not have a comprehensive system for inspecting SLP food quality. This was required both to maintain compliance with local ordinance as well as to ensure the safety of the food served to the children. The distribution of the program throughout the community and multiple food service delivery vendors further complicated the ability of the CHD to provide adequate coverage, inspection and quality control.

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### **Objectives:**

- Establish minimum standards for the Summer Lunch Program.
  - Educate vendors involved with the Summer Lunch Program.
  - Ensure food safety practices through vendor inspections.
  - Organize personnel resources to provide education and perform inspections.
- 

**Methods** - The CHD developed a system whereby a CHS is designated to organize SLP education and inspection activities. To succeed in providing adequate oversight, the appointed staff person recruits additional volunteers to provide training for workers enrolled in the SLP. The CHSs who volunteer to support the program are then able to inspect each enrolled site for compliance.

**Measurable Outcomes and Achievements** - Annually, the CHD inspects a minimum of 59 sites that provide nearly 3500 lunches and/or 3500 snacks to approximately 4200 children daily. These inspections, in conjunction with supporting educational efforts, have resulted in safe food handling practices by volunteers who may not otherwise have had food handling experience or training. The SLP program

continues to grow by about 10% each year. Despite this growth, the partnership with PACS, community agencies, vendors and volunteers has provided safe meals without exception.

### **10) *Childcare Kitchens***

**Baseline History** - Existing childcare establishments were exempted from TFER due to a provision in the Fort Worth Food Ordinance Revision regarding commercial equipment. However, a grant funded in 2001 provided for one CHS to focus on developing minimum food safety standards in childcare centers. The resulting review of local childcare facilities indicated that kitchens in many daycare centers did not meet standards for food service facilities and such standards had not been defined for the childcare environment.

**Challenge** - Many of the 128 childcare center kitchens in the Fort Worth area had staff with little or no training in safe food handling practices. Numerous kitchens had inadequate cold storage and cooking equipment. Although regulated, the childcare center kitchens in Fort Worth did not have to meet ordinance and TFER requirements or food handler certifications operative for other food facilities. However, any new requirements would require extensive informational efforts, educational opportunities, and enforcement activities to bring local childcare centers into compliance.

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#### **Objectives:**

- Establish guidelines for childcare kitchen standards.
- Integrate childcare centers into inspection inventory.
- Ensure the quality of childcare food handlers and their kitchens.
- Promote a safe environment for serving a highly susceptible population.

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**Methods** - Since otherwise unavailable, fiscal support was pursued through a Texas Workforce Commission Workforce Advantage grant. The successful application resulted in funding a CHS position to conduct a comprehensive baseline consumer safety assessment of all local childcare centers. Once needs were identified, guidelines were established for the facilities and for the food handlers. The CHD then endeavored to educate childcare staff on equipment requirements and standards. Direct care workers at all childcare facilities, including the kitchen staff, were now required to have a childcare workers' certificate. The training program presented by the CHD included current safe food handling practices, proper sanitation,

safety and care for children. In the spring of 2003, the CHD took additional action to improve childcare kitchens by seeking amendment to existing ordinance. The revised ordinance is scheduled for adoption by the City Council in April 2004. Childcare facilities will then be required to achieve and maintain the same high standards currently enforced in all other food facilities.

**Measurable Outcomes and Achievements** - Within the next 12 months, all childcare facilities will be compliant with TFER/Fort Worth ordinances and have NSF approved or commercial equivalent equipment. Despite the difficulty of establishing and enforcing changes in local ordinance, the objective of ensuring childcare kitchen safety was prioritized since children are such a highly susceptible population. Childcare centers now have staff with training in modern safe food handling practices, sanitation, safety, and childhood illness prevention. Fort Worth seeks to maintain its record of not having a fatal incident in a childcare facility or FBI in this population.

### **Summary**

Historically, the Fort Worth Consumer Health Division (CHD) has striven to provide the highest level of service towards the assurance of consumer safety. However, the burgeoning growth of the city combined with limited resources challenged this capability. The response by the CHD was to develop a long-term, orchestrated plan to not only maintain but also improve performance. To succeed, a multi-year, integrated plan to develop programming, personnel management and budgeting was adopted. In accordance with this plan, the past five years have witnessed the cultivation and integration of the ten strategic initiatives described in this application blossom into a comprehensive and effective consumer safety program. The program has succeeded in improving inspections, lowering violation recidivism, maintaining compliance and orchestrating activities to sustain improvements well into the future. The CHD is proud of these accomplishments and its service to the citizens of Fort Worth. In this spirit, the CHD humbly submits this application in an effort to recognize the dedication to consumer safety that underlies this program.

## Appendices

1. Fort Worth Public Health Department Organizational Chart
2. Risk Assessment for Food Facilities
3. Childcare Frequency Assessment Form
4. Voluntary National Standards summary for Fort Worth
5. Fort Worth Organizational Chart
6. 2002-2003 Budget and Revenue by program
7. Affiliation List
8. Texas food Establishment Rules
9. Fort Worth Food Ordinance and Amendment
10. Training schedule
11. Sample inspection report
12. List of training documents provided
13. Bioterrorism awareness document
14. Bioterrorism poster and brochure
15. Bioterrorism CD-ROM
16. Mobile Vendor Inspection Form
17. Fort Worth Mobile Vendor Ordinance

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The following additional documents are offered in support of the Fort Worth program:

18. Mobile Vendor handouts packet (English and Spanish)
19. Childcare Ordinance Revisions applicable to food service (proposed)
20. Temporary brochure and inspection form
21. Food Safety Education Brochure and handouts packet
22. Customer Service Survey
23. Food Handler Class Survey
24. Consumer Health Plan Review brochure
25. Class Schedule and Sample Food Worker and Childcare Worker Certificates
26. Department Strategic Plan applicable to Consumer Health Division
27. Standard Operating Procedure for "Food Handler Class" with curriculum
28. Three-part form 27-item Critical Violation
29. Website pages

## Appendix 1





## Appendix 2



## Appendix 3



## Appendix 4



## Appendix 5



## Appendix 6



## Appendix 7



## Appendix 8



## Appendix 9





## Appendix 10



## Appendix 11



## Appendix 12



## Appendix 13



## Appendix 14



## Appendix 15



## Appendix 16



## Appendix 17





## Appendix 18



## Appendix 19



## Appendix 20



## Appendix 21



## Appendix 22



## Appendix 23



## Appendix 24



## Appendix 25





## Appendix 26



## Appendix 27



## Appendix 28



## Acknowledgements

We would like to acknowledge the Crumbine Award Team and the support of the City of Fort Worth Public Health Department, without whom this application would not have become a reality.

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