

**Call for submissions – Proposal P1053 Food Safety Management Tools**  
**Submission by SA Health (Department for Health & Wellbeing)**  
**11 April 2022**

SA Health welcomes the opportunity to comment on Proposal P1053 Food Safety Management Tools.

**SA Health memberships for P1053**

Food Safety Management Working Group (FSM WG) - Co-Chair and Member

**SA Health's position**

*Support Option 3 – Regulatory approach*

SA Health strongly supports *Option 3 – Regulatory approach* (as proposed in the P1053 CFS report) that:

- category two businesses implement *Option 3.1* requiring the Food Safety Supervisor (FSS) and Food Handler Training (FHT) tools; and
- category one businesses implement *Option 3.2* requiring the evidence (E) tool in addition to FSS and FHT.

We agree that category 3 businesses require no further regulatory tools due to the lack of correlation of these business with foodborne illness outbreaks, indicating current regulatory measures are sufficient. However, we support the use of non-regulatory measures such as promoting food safety culture in all food business, to strengthen food safety knowledge and accountability.

**Views on the assessment**

SA Health recognises that, prior to the development of this proposal, significant work was undertaken to assess and demonstrate the risks associated with the food service and closely related retail sectors, and potential controls (see *P1053 CFS Report - Table 1*). This previous work, which has taken place since 2003 has led to the development of Proposal P1053. It is noted that since Proposal P290 - Food Safety Programs for Catering Operations to the General Public was not progressed the catering and food service sector has consistently contributed to foodborne illness outbreaks (see *P1053 Supporting Document 1 Consultation Regulatory Impact Statement [the CRIS]*).

For this proposal Food Standards Australia New Zealand (FSANZ) conducted a comprehensive analysis that clearly demonstrated a significant burden of foodborne illness linked to the food service and closely related retail sectors where businesses handle unpackaged ready-to-eat potentially hazardous foods. Regarding questions 1, 4, 6, 7, 8, 9, 10 posed in the CRIS, SA Health deems that the data and methods used to demonstrate the costs and benefits of the proposed options have been appropriately considered and have no further information to include. The evidence provided in the CRIS supports that the benefits gained from implementing the proposed tools will outweigh any associated costs for the community.

In relation to other questions posed in the CRIS:

***Question 2. What issues do businesses face in complying with the current food handling requirements?***

Feedback from consultation with South Australian stakeholders in 2017 indicated that businesses face a range of issues when it comes to complying with the current food handling requirements. The main theme was a lack of skills and knowledge, specifically for high-risk processes and requirements prior to commencing business operations. This is particularly relevant as the current standards are 'outcomes based' and do not support attainment of skills and knowledge for these high-risk processes. Other responses indicated issues with lack of resources (time, money), poor food safety culture and language barriers leading to difficulty understanding the requirements.

***Question 3. What difficulties, if any, do the differences in requirements between states and territories create for your business?***

While we do not operate as a food business, stakeholders have advised that for businesses operating in South Australia with a head office interstate, there is confusion around inconsistent requirements particularly in relation to food safety supervisor (FSS) or food handlers mandatory training. Other stakeholders have expressed concern that we do not require FSS and it exposes them to greater risk of foodborne illness. SA stakeholders agreed with the food safety risks identified with food service and were supportive of these additional tools when we undertook consultation in 2017. National consistency was important, and they saw the benefit of the tools already implemented in other jurisdictions.

***Question 5. What issues do you think businesses and the industry generally would face attempting to self-regulate?***

If the food service sector were expected to self-regulate it is anticipated that due to a lack of regulatory accountability there would be significant variation in levels of compliance and minimal uptake, particularly in business who report a lack of time or resources, or in businesses that have poor food safety culture or skills and knowledge. There may also be a lack of centralised, consistent resources or guidance due to the many industry bodies and types of business that are affected by the proposed Standard. SA Health agrees that the food safety risks outweigh the potential benefits of self-regulation, hence does not support Option 2.

**Views on the proposed measures and draft guidance**

SA Health agrees that the proposed food safety management tools (food safety supervisor (FSS), food handler training (FHT) and evidence (E)) are practical and can readily be implemented by relevant businesses. This is apparent as many South Australian local government agencies already have evidence keeping templates to provide to businesses, in addition to existing templates provided in Safe Food Australia, and free online food handler training options already exist. Furthermore in 2017, feedback from South Australian stakeholders regarding food safety management tools indicated they agreed with the food safety risks posed by the food service sector and were supportive of additional tools being implemented. Those stakeholders also agreed that a nationally consistent approach was preferred. While FSS requirements do not currently exist in South Australia, we agree this can be easily implemented by mirroring existing requirements for FSS in other states. Additionally, in the absence of pre-operation licencing or registration requirements, the FSS tool provides a level of confidence that a business has appropriate knowledge and oversight of food safety matters before commencing operation.

The draft guidance provides an appropriate overview of how SA Health envisages the proposed standard would be implemented within our jurisdiction; therefore, we support the notion that similar implementation guidance should be incorporated into Safe Food Australia, as the existing guide to the Food Safety Standards.

SA Health agrees with FSANZ's suggestion that compliance with the proposed Standard would be assessed as part of existing food safety inspection or audit arrangements. We also agree that while inspection or audit time may be slightly increased, it is not expected that additional audits or inspections would be required, hence any additional regulatory burden for enforcement officers and businesses would not be significant. It is also anticipated that as time progresses and enforcement officers and businesses adapt to these tools any additional time would be minimised, and may lead to positive conversations around food safety, which was similar to what was seen in South Australia when the SA Food Safety Rating Scheme and the SA Food Business Risk Classification System were implemented.