

Advisory Note 24 Food Handlers Fitness For Work

The Food Hygiene (England) Regulations 2006 place duties on all food handlers in respect of good personal hygiene and preventing food being contaminated

If you have sickness or diarrhoea **you must not** handle food until you are better because you can pass viruses or bacteria onto food

This guidance aims to help prevent the introduction of infection into the workplace and replaces previous advice when food handlers had to provide negative stool specimens prior to returning to work following illness.

If you are a food handler at work and are suffering from sickness and/or diarrhoea

- Report immediately to you line manager
- Leave the food handling area
- **Do not** return to work until **48 hours** after symptoms have ceased
- The manager must ensure that toilets, handles, taps and surfaces are cleaned and sanitised after contact by anyone reporting diarrhoea and/or vomiting
- **Note** that negative stool samples are not normally necessary except with certain infections such as **typhoid fever** or **E. Coli 0157**
- If in doubt contact your local EHO for advice (see telephone number bottom of sheet)

Remember

- Tell your boss if you have been ill on holiday
- If any member of your household is sick or has diarrhoea
- If you have visited the Doctor, say you are a food handler

Ensure you practice good personal hygiene at all times

**For further Advice/Information contact
Salford City Council
Environment Directorate, Turnpike House
631 Eccles New Road, Salford M5 2SH
Telephone: 0161 737 0551
environment@salford.gov.uk**

Example of a Employee Medical Questionnaire

The information provided here will be treated in the strictest confidence and will only be used to assess whether you are fit to handle, prepare or otherwise work with food.

Name: _____

Address: _____

Department _____

Have you ever suffered from any of the following?	Yes/ No	If yes :	
		Date	Name & Address of Doctor or Hospital
Food Poisoning			
Dysentery			
Typhoid or Paratyphoid			
Tuberculosis			
Parasitic Infection			
Has any close family contact suffered from any of the above?			Name:
Have you suffered from any of the following within the last two years?			
Diarrhoea or vomiting			
Skin rash			
Recurring boils			
Discharge from the ear, eye or nose			
Please give details of any other medical problems which may affect your employment as a food handler			
Have you been abroad within the last two years?			Where?
Should it be necessary, will you agree to provide such specimens that may be required by the company doctor to ensure that you are not a carrier of any organism which may affect the safety of food?			Yes/No

I declare that the above statements are true and complete to the best of my knowledge and belief

Signed: _____

Dated _____