

Attachment 7: EHS-Net *Listeria* Retail Deli Study-Worker Interview

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ESTABLISHMENT ID: _____

Note to data collectors: Read each interview question aloud and mark the appropriate response. Texts that should be read aloud are **bolded**, while those that should not be read aloud are not bolded.

DELI WORKER DEMOGRAPHIC

1. **What are your primary job responsibilities here?** (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Food preparation | <input type="checkbox"/> Cleaning |
| <input type="checkbox"/> Slicing (Using a slicer) | <input type="checkbox"/> Other (Describe): _____ |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Refused |
| <input type="checkbox"/> Washing dishes/equipment/utensils | |

2. **Besides the deli department, do you work in any other departments within this establishment?**

- Yes
- No (Go to Q3)
- Refused (Go to Q3)

2a. **What other department(s) do you also work in?**

_____ department (Enter department)
_____ department (Enter department)
_____ department (Enter department)

3. **During your shift, are you responsible for any cleaning and/or sanitizing duties?**

- Yes
- No (Go to Q4)
- Refused (Go to Q4)

3a. **What are those cleaning and/or sanitizing duties?** (Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Food contact surfaces | <input type="checkbox"/> Utensils such as knives, tongs, and spoons |
| <input type="checkbox"/> Display cases | <input type="checkbox"/> Other (Describe): _____ |
| <input type="checkbox"/> Deli floors | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Deli slicers | <input type="checkbox"/> Refused |

4. **Approximately how long have you worked in the retail food industry? By retail food industry, I am referring to any deli, restaurant, or commercial establishment that serves food to the public.**

_____ years _____ months (Enter years and months) Unsure Refused

5. Approximately how long have you worked as a food worker at this deli?

_____years _____months (*Enter years and months*) Unsure Refused

Now I am going to ask you a few questions about the use and cleaning of the food slicers in the deli.

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For each available slicer in the deli, assign it a numerical value from 1 to 5. Keep in mind that there are also questions in the structured observation instrument regarding these same slicers. Thus, the numerical designation should be the same for both data collection instruments. Ask the deli workers questions 6-6e for each available slicer. Be sure to point to or walk with the deli worker to the slicer in question as you complete this table.

Slicer Number	6b. How often do you “wipe down” or do a quick clean on this slicer?	1. What kinds of foods do you slice with this slicer? (Check all that apply)	6c. How do you “wipe down” or do a quick clean on this slicer?	6a. How often do you use this slicer?	6d. How easy is it to break down, clean, and sanitize this slicer—easy, somewhat easy, neither easy nor difficult, somewhat difficult, or difficult?	6e. How often do you break down, clean, then sanitize this slicer?
		<input type="checkbox"/> Meats <input type="checkbox"/> Cheeses <input type="checkbox"/> Fish <input type="checkbox"/> Fruits/Vegetables <input type="checkbox"/> Other (Describe): _____		<input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> All day long <input type="checkbox"/> Other (Describe): _____		
1	<input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No “wipe down” or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	<input type="checkbox"/> Meats <input type="checkbox"/> Cheeses <input type="checkbox"/> Fish <input type="checkbox"/> Fruits/Vegetables <input type="checkbox"/> Other (Describe): _____	<input type="checkbox"/> Wipe slicer only <input type="checkbox"/> Wipe, apply sanitizer, and wipe <input type="checkbox"/> Wipe, apply sanitizer, and air dry <input type="checkbox"/> Apply sanitizer and wipe <input type="checkbox"/> Apply sanitizer and air dry <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	<input type="checkbox"/> Easy <input type="checkbox"/> Somewhat easy <input type="checkbox"/> Neither easy nor difficult <input type="checkbox"/> Somewhat difficult <input type="checkbox"/> Difficult <input type="checkbox"/> Unsure <input type="checkbox"/> All day long <input type="checkbox"/> Other (Describe): _____	<input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	
2	<input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No “wipe down” or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	<input type="checkbox"/> Meats <input type="checkbox"/> Cheeses <input type="checkbox"/> Fish <input type="checkbox"/> Fruits/Vegetables <input type="checkbox"/> Other (Describe): _____	<input type="checkbox"/> Wipe slicer only <input type="checkbox"/> Wipe, apply sanitizer, and wipe <input type="checkbox"/> Wipe, apply sanitizer, and air dry <input type="checkbox"/> Apply sanitizer and wipe <input type="checkbox"/> Apply sanitizer and air dry <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	<input type="checkbox"/> Easy <input type="checkbox"/> Somewhat easy <input type="checkbox"/> Neither easy nor difficult <input type="checkbox"/> Somewhat difficult <input type="checkbox"/> Difficult <input type="checkbox"/> Unsure <input type="checkbox"/> All day long <input type="checkbox"/> Other (Describe): _____	<input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused	

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<p>Slicer Number 3</p>	<p><input type="checkbox"/> After every customer <input checked="" type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No "wipe down" or quick cleaning in between scheduled full cleanings (Go to Q6d)</p>	<p>6c. How do you "wipe down" or do a quick clean on this slicer? <input type="checkbox"/> Wipe slicer only <input type="checkbox"/> Wipe, apply sanitizer, and wipe <input type="checkbox"/> Wipe, apply sanitizer, and air dry <input type="checkbox"/> Apply sanitizer and wipe <input type="checkbox"/> Apply sanitizer and air dry <input type="checkbox"/> Other (Describe): _____</p>	<p>6d. How easy is it to break down, clean, and sanitize this slicer—easy, somewhat easy, neither easy nor difficult, somewhat difficult, or difficult? <input type="checkbox"/> Easy <input type="checkbox"/> Somewhat easy <input type="checkbox"/> Neither easy nor difficult <input type="checkbox"/> Somewhat difficult <input type="checkbox"/> Difficult <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	<p>6e. How often do you break down, clean, then sanitize this slicer? <input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>
<p>Slicer Number 4</p>	<p><input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No "wipe down" or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	<p>6. What kinds of foods do you slice with this slicer? (Check all that apply) <input type="checkbox"/> Meats <input type="checkbox"/> Cheeses <input type="checkbox"/> Fish <input type="checkbox"/> Fruits/Vegetables <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	<p>6a. How often do you use this slicer? <input type="checkbox"/> Easy <input type="checkbox"/> Somewhat easy <input type="checkbox"/> Neither easy nor difficult <input type="checkbox"/> Somewhat difficult <input type="checkbox"/> Difficult <input type="checkbox"/> Unsure <input type="checkbox"/> Refused <input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> Other (Describe): _____</p>	<p><input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No "wipe down" or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>
<p>Slicer Number 5</p>	<p><input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No "wipe down" or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	<p>5 <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Meats <input type="checkbox"/> Cheeses <input type="checkbox"/> Fish <input type="checkbox"/> Fruits/Vegetables <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	<p>4 <input type="checkbox"/> Wipe slicer only <input type="checkbox"/> Wipe, apply sanitizer, and wipe <input type="checkbox"/> Wipe, apply sanitizer, and air dry <input type="checkbox"/> Apply sanitizer and wipe <input type="checkbox"/> Apply sanitizer and air dry <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> Easy <input type="checkbox"/> Somewhat easy <input type="checkbox"/> Neither easy nor difficult <input type="checkbox"/> Somewhat difficult <input type="checkbox"/> Difficult <input type="checkbox"/> Unsure <input type="checkbox"/> Refused <input type="checkbox"/> Every _____ hours <input type="checkbox"/> _____ times each day <input type="checkbox"/> Other (Describe): _____</p>	<p><input type="checkbox"/> After every customer <input type="checkbox"/> In between slicing different food products <input type="checkbox"/> Other (Describe): _____ <input type="checkbox"/> No "wipe down" or quick cleaning in between scheduled full cleanings (Go to Q6d) <input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>
			<p><input type="checkbox"/> Unsure <input type="checkbox"/> Refused</p>	

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Now I am going to ask you a few questions about the seams and seals on the food slicers. By seams, I am referring to the areas on the food slicers created when one part or piece of metal is adjoined to another, for example, handles. By seals, I am referring to the sealant used to join these seams, fill in cracks, chips and/or deep scratches.

7. **How often do you inspect seams and seals on the slicers?** *(Check all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> Each time, when fully cleaning and sanitizing slicers | <input type="checkbox"/> Never <i>(Go to Q10)</i> |
| <input type="checkbox"/> Occasionally, when fully cleaning and sanitizing slicers | <input type="checkbox"/> Unsure <i>(Go to Q10)</i> |
| <input type="checkbox"/> Each time, during wipe down or quick clean on slicers | <input type="checkbox"/> Refused <i>(Go to Q10)</i> |
| <input type="checkbox"/> Occasionally, during wipe down or quick clean on slicers | |

8. **When you do inspect seams and seals, which ones do you inspect?**

9. **When you do inspect a seal, what do you look for?**

10. **What do you do if a seal is in bad repair, broken, or missing?**

Next I'd like to ask you a few questions about this deli's practices.

11. **Are deli salads such as turkey, tuna, and chicken prepared in a common use area within the deli?**
By common use area, I mean an area that is available for use by the deli staff to perform any work-related task?

- Yes
- No *(Go to Q12)*
- Unsure
- Refused *(Go to Q12)*

11a. **How are deli salads prepared?** *(Check all that apply)*

- Food workers slice/cut and prepare (cook/assemble) ingredients
- Food workers prepare (cook/assemble) ingredients that come pre-cut and pre-packaged
- Deli salads (pre-made) are sold with no additional preparation by food workers
- Other *(Describe):* _____
- Unsure
- Refused

11b. **Where are the deli salads sold?**

- Only in the deli
- Only in other non-deli food departments
- Both in the deli and in other food departments
- Other (*Describe*): _____
- Unsure
- Refused

Now I am going to ask you a few questions about food safety training.

12. **While employed here, have you received food safety training on topics such as how to prevent cross-contamination or how to do a proper hand wash?**

- Yes
- No (*Go to Q13*)
- Unsure (*Go to Q13*)
- Refused (*Go to Q13*)

12a. **Who conducted that training?** (*Check all that apply*)

- Management
- Owner
- Supervisor
- Co-worker
- Other (*Describe*): _____
- Unsure
- Refused

13. **For the following statements, please tell me if you think the statement is correct by saying Yes, No, Unsure or Refused.**

13a. **One of the best ways to dry your hands after hand washing is with clean paper towels.**

- Yes
- No
- Unsure
- Refused

13b. **Germs grow best in the temperature “danger zone” between 41°F and 135°F.**

- Yes
- No
- Unsure
- Refused

13c. **For a proper hand washing, deli workers must scrub their hands and arms for about 4 or 5 seconds.**

- Yes
- No
- Unsure
- Refused

13d. **Deli workers should wash hands between glove changes.**

- Yes
- No
- Unsure
- Refused

13e. **It’s okay to use hand sanitizer instead of washing your hands when the deli is busy.**

- Yes
- No
- Unsure
- Refused

That is the end of the interview. Thank you for your time.