

# **ENVIRONMENTAL HEALTH's Unique Role for Safe, Clear Food Donation**

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**FORTY  
PERCENT**

**OF FOOD IN  
AMERICA  
IS WASTED.**

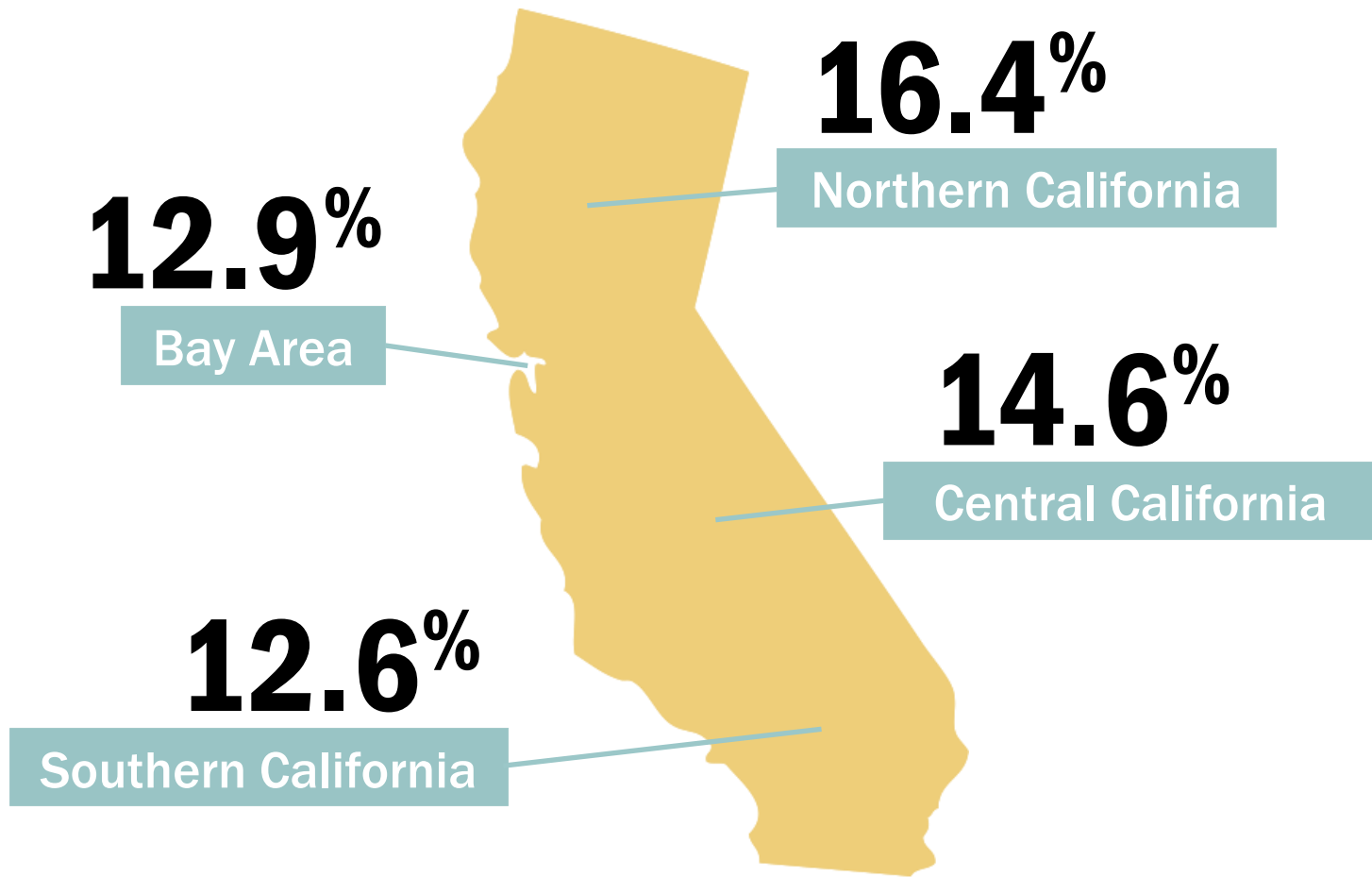


# NUTRIENT LOSS

Wasted Food  
In The USA

=

1250-1400  
KCAL /  
person/day



14% of  
**WASTE**  
**STREAMS** is  
food waste



**METHANE** -  
20x stronger  
greenhouse  
gas than CO<sub>2</sub>

# WASTED FOOD CONSUMES...

 **21%**

OF ALL FRESHWATER

 **19%**

OF ALL FERTILIZER

 **18%**

OF CROPLAND

 **21%**

OF LANDFILL VOLUME





# AB 1826

## **SOLID WASTE: ORGANIC WASTE**

- + Decomposing organic waste major source of GHGs
- + Business must recycle 75% of their organic waste by 2020
- + Redirects resources to composting/digestive ops, save landfill space, reduce emissions

# SB 1383

## **SUPER POLLUTANT REDUCTION ACT**

- + 40% reduction in methane levels by 2030
- + ~20% reduction of edible food waste
- + Most aggressive law to tackle SLCPs in the country



# **New Legislation: Just Signed by the Governor**

## **AB 1219**

**CALIFORNIA GOOD SAMARITAN LAW**

## **SB 557**

**SCHOOL FOOD DONATION**

## **AB 954**

**STANDARDIZED DATE LABELING VOLUNTARY PROGRAM**





**Environmental Health is**  
**UNIQUELY POSITIONED to:**

**ensure food safety,**

**feed hungry people,**

**and help the environment.**

# MAIN OBSTACLES TO FOOD WASTE DONATION

1

**Belief that  
it is  
prohibited  
by EH**

2

**Concerns  
about  
liability**

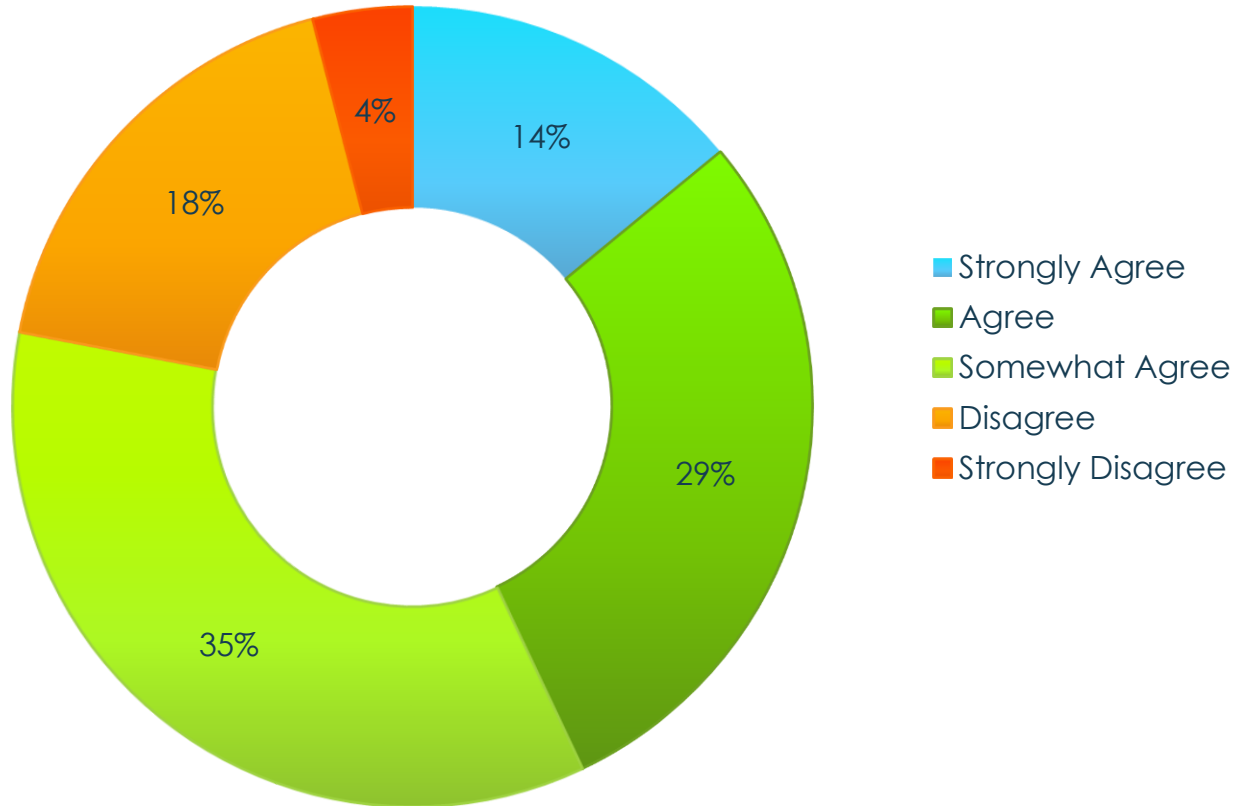


# Statewide Project: Partnering Environmental Health Directors

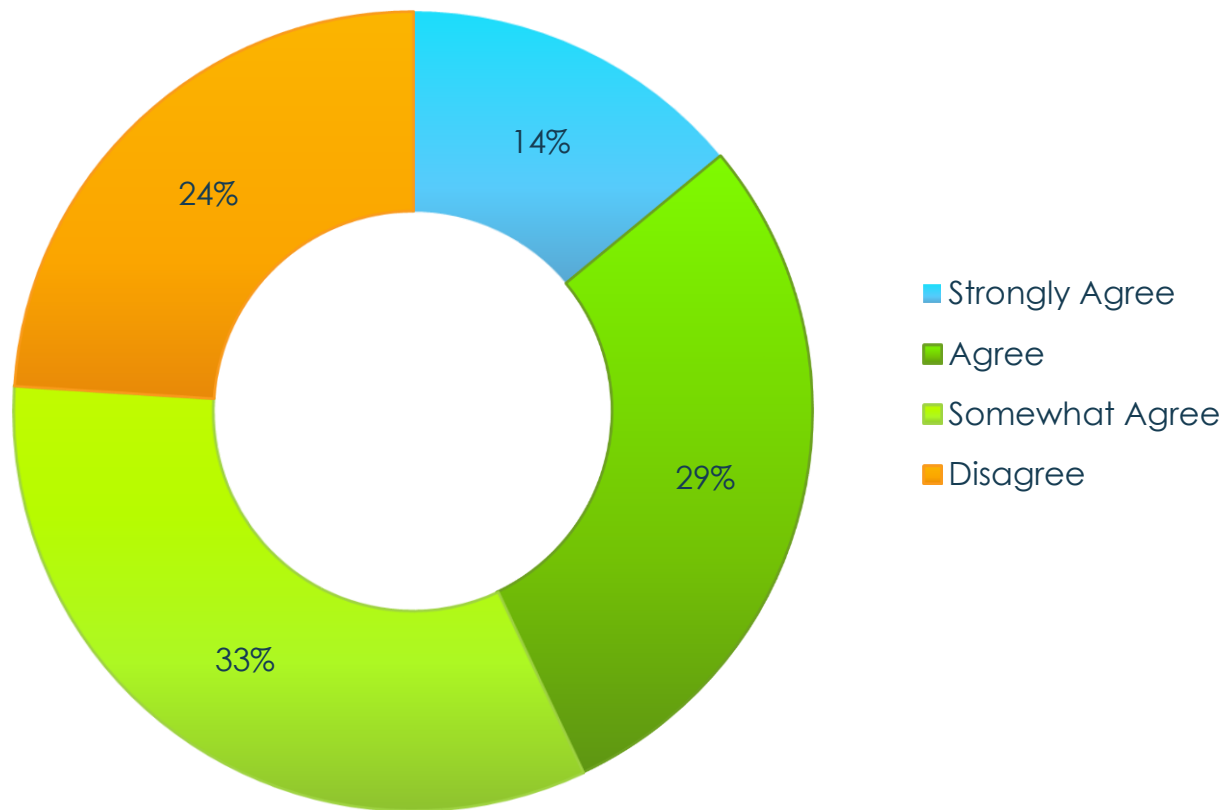


1. **IDENTIFY** best practices and existing barriers to safe food redistribution.
2. **PROVIDE** trainings and materials for CA EH regulators.
3. **PROMOTE** adoption of policies and procedures.

"I am confident in my knowledge of state and federal laws regarding food redistribution and donation of surplus food"

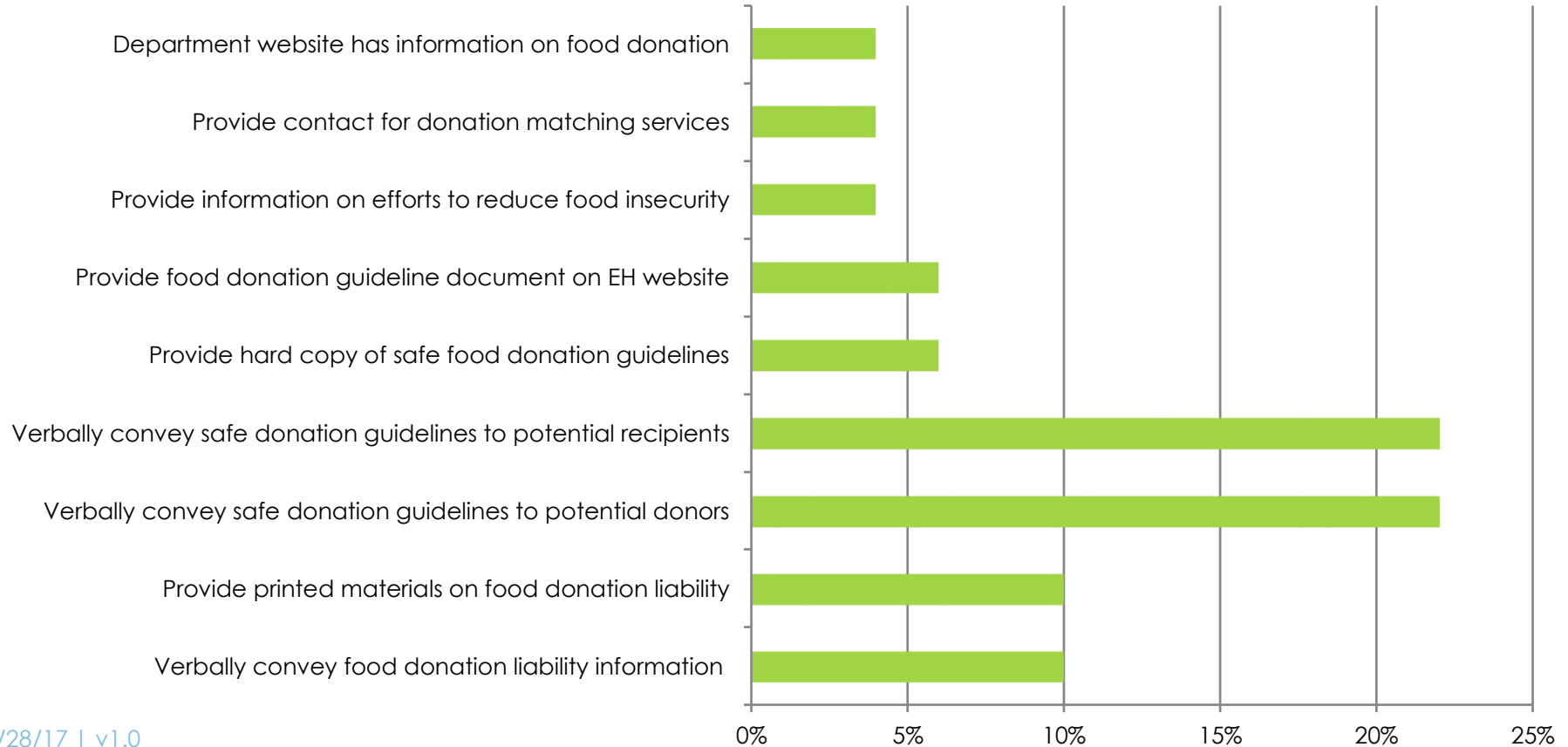


"I am aware of existing efforts to address food insecurity in my jurisdiction"

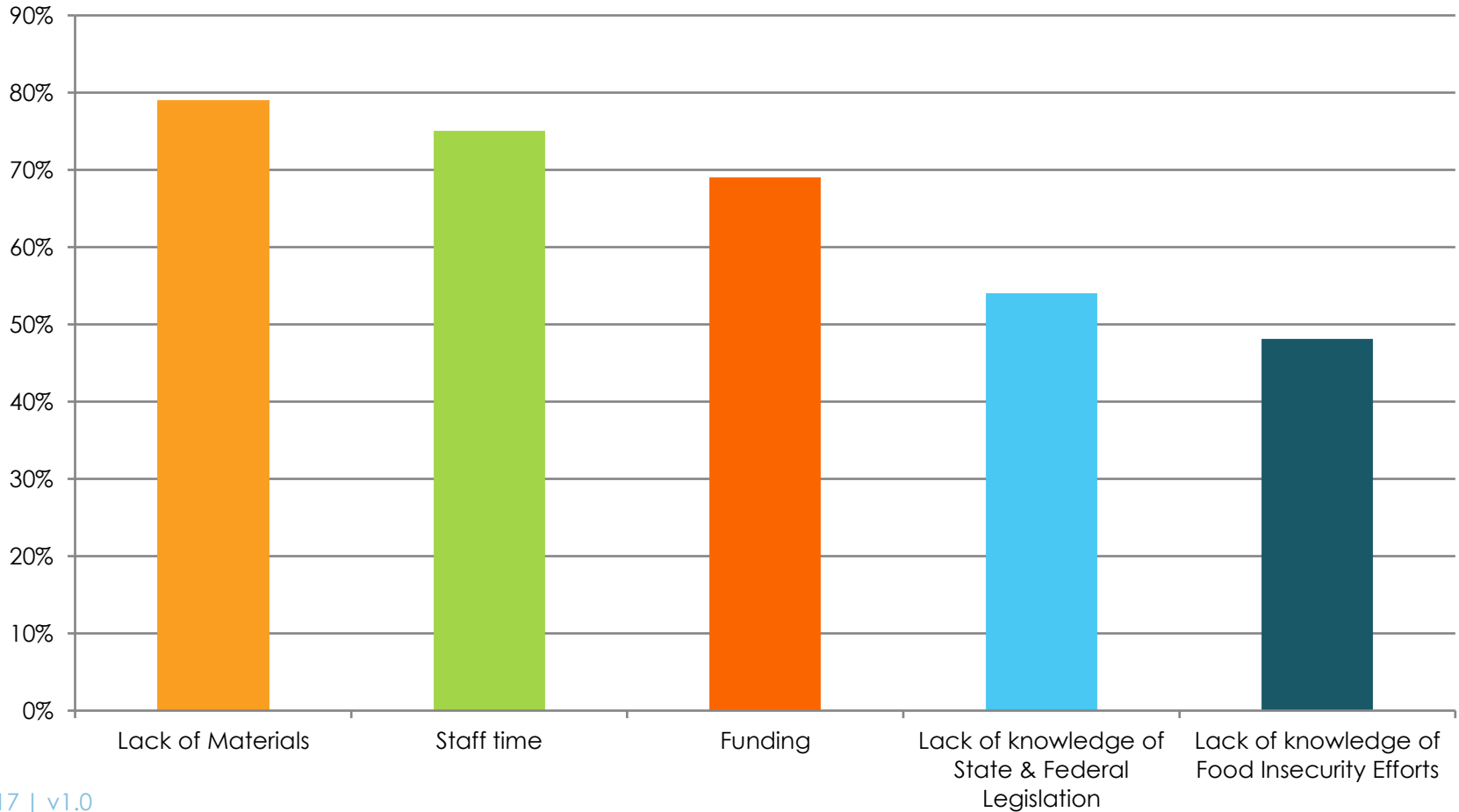




# “Our EH Department engages in the following food redistribution activities”



# “Barriers to engaging in these activities”



In-person  
trainings for EH

Compendium of  
best practices

**PROJECT  
COMPONENTS**

Adaptable materials

Access to experts in  
the field

# KEY STRATEGIES



Restaurant Inspections



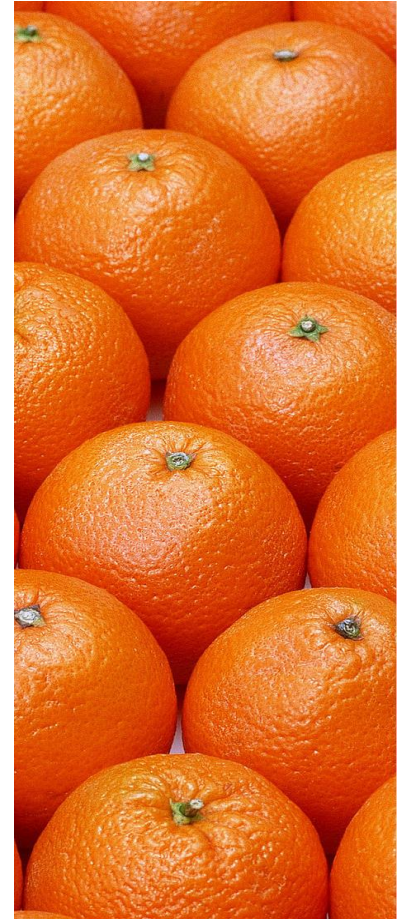
Targeted Information to  
Additional Sectors



Consistent + Business  
Friendly

# THE EDUCATOR

- Environmental Health Specialists can serve as ' food safety referees'
- Consistent interaction with food facility operators
- Surplus food donation is in CalCode and there is an **EDUCATION GAP**
  - **114432:** *Any food facility may donate food to a food bank or to any other nonprofit charitable organization for distribution to persons free of charge*
- Education is Prevention





# BEST MANAGEMENT PRACTICES

## External Practices

- Engage in discussions of safe food donation
- Disseminate safe food donation guidance
- Answer questions!
- Know the landscape



# BEST MANAGEMENT PRACTICES

## Internal Practices

- Support at the top from EH Directors
- Discuss/provide trainings in all-staff meetings
- Integration of safe donation guidance into routine activities/materials
- Partner with local agencies (e.g. public works)

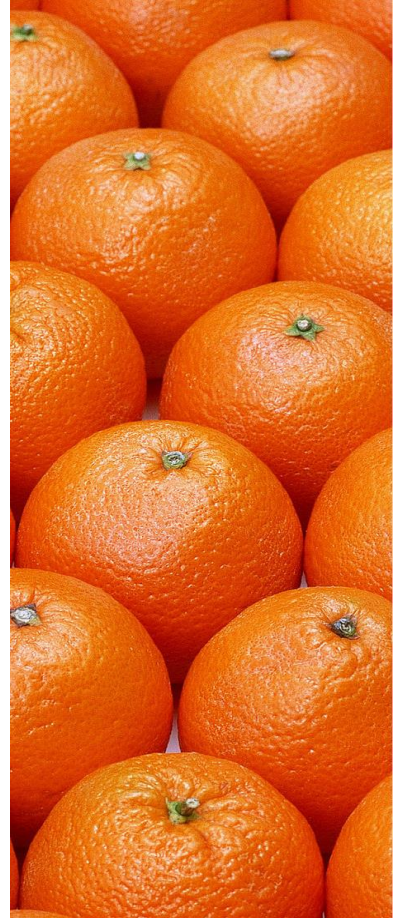


# TRAINING AGENDA

- The Context
- The Legal Context
- Prevention & Recycling
- Donation
- Barriers
- Unique Role of EHS
- Partners
- Best Management Practices
- Sector- specific Strategies
- Emerging Issues
- FAQs
- Donation Toolkit
- Activity
- Wrap-up

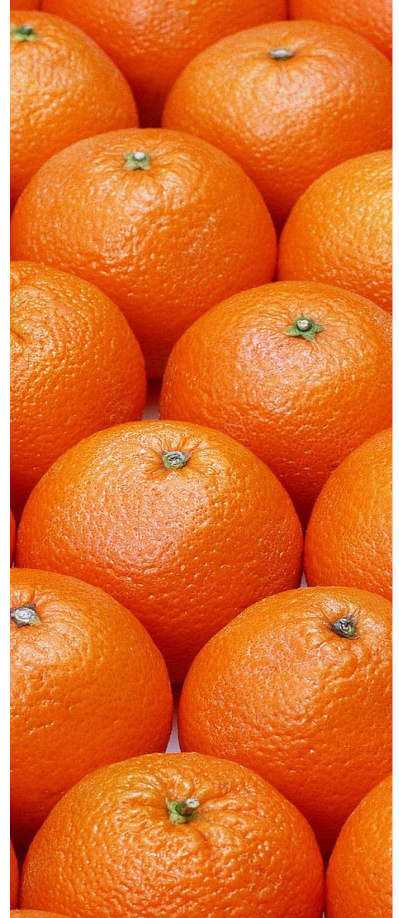
# BY NOVEMBER 2017...

- Trainings in **10** jurisdiction hubs
- Trainees from **50** jurisdictions
- Trained over **400** EHS
- Disseminated materials to all **62** EHDs

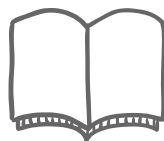


# Surplus Food Donation Toolkit

- Content
  - Why donate? Who can donate? Protections? Safety? How to donate?
  - Prevention Tips
  - Food Donation Agreement Form
  - Donated Food Labels
  - Food Donation Delivery Form
  - Rural Strategies
  - School Strategies
  - Glossary
  - FAQs
  - Local Resources







# FOOD DONATION AGREEMENT FORM

YOUR LOGO HERE

## DONOR AND RECIPIENT INFORMATION

Food DONOR Facility/Organization Name

Food RECIPIENT Facility/Organization Name

DONOR Representative Name

RECIPIENT Representative Name

Business Address

Business Address

Phone

Email

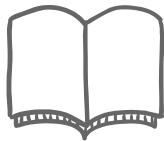
Phone

Email

## DONATED FOOD PRODUCT INFORMATION

FOOD PRODUCT	PACKAGING	STORAGE CONDITIONS	CHECK ALL THAT APPLY	QUANTITY & FREQUENCY
Prepared Foods	Food-grade packaging	Chilled to 41F or below, or frozen at 32F or below	<input type="checkbox"/>	
Chilled Perishable Prepackages Foods	Original packaging OR food-grade packaging	Chilled to 41F or below	<input type="checkbox"/>	
Meat, poultry, fish (fresh)	Original packaging OR food-grade packaging	Chilled to 41F or below	<input type="checkbox"/>	
Meat, poultry, fish (frozen)	Original packaging OR food-grade packaging	Frozen at 32F or below	<input type="checkbox"/>	
Dairy Products	Original packaging OR food-grade packaging	Chilled to 41F or below	<input type="checkbox"/>	
Shelf stable foods	Original packaging		<input type="checkbox"/>	
Other			<input type="checkbox"/>	

## TRANSPORTATION



FRONT PLATE

YOUR LOGO HERE

These products are NOT RECOMMENDED for consumers with food allergies since they are prepared on shared equipment. Please inform the donor if any person receiving or consuming this product has a food allergy.

Date:

Donor:

Weight  
(lbs)/Count:

Item:

**USE FOR FOOD DONATIONS ONLY**

If contents are frozen, see reheat standards on back.

Donation Questions: Call EHD NUMBER?

More Donation Information: <http://EHD Website/> [www.foodtodonate.com](http://www.foodtodonate.com)



# FOOD DONATION DELIVERY FORM

YOUR LOGO HERE

## DONOR AND RECIPIENT INFORMATION

PERISHABLE FOOD ITEM(S)	QUANTITY (LBS)	DONOR TEMP AT HOLDING	TIME TAKEN	RECIPIENT TEMP AT RECEIPT	TIME TAKEN	ACCEPTED
						YES or NO
						YES or NO
						YES or NO

\*\*Flip for additional rows

## DONATED FROM:

Name of Facility or Event

Public Health Permit #

Address

Phone #

Delivered by (print name):

## TRANSPORTED BY (IF OTHER THAN DONOR OR RECIPIENT):

Name of Delivery Organization:

Public Health Permit # (if applicable)

Address

Phone #

Delivered by (print name):

# LET'S WORK TOGETHER

**TRACY DELANEY**

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