



## **Cottage Food Public Meeting Transcript**

H = Division of Public Health Employee

A = Meeting Attendee

H1, H2, etc = Health District Employee

May 4<sup>th</sup> – Caldwell 2

H: I would like your comments. Where do we go from here? I have been hearing some great feedback from around the state. I don't want to tell you what that feedback is. I would like to hear from you first.

A: Can I ask a question? It is a pretty fundamental one. This goes to the issue that we here in Boise and Canyon County, that conflict between districts. And apparently, I don't want to call it misinformation, but different information that is received from Southwest District versus Central District. And it appears that, number one would certainly help address that. But what is that fundamental relationship and can we be assured that it's going to be more transparent between districts?

H: So, in response, 'can I assure that it will be more transparent between health districts?' Ultimately, that is a decision that is made by the local Boards of Health. To the bigger question that you asked though, I can't pinpoint exactly the cause of the miscommunication that takes place. I would like to speculate that the primary reason for that is when the local health district is aware of a rule or a policy by the farmers market; they will make every effort to honor that rule and policy. So let me go back to the jams, for example. It is certainly possible that if someone calls Central District Health and says, 'I want to sell jam at the farmers market, what do I have to do?' In an effort to honor the Capital City Market's policies and the Boise Farmers Market policies, it is certainly possible that the staff person at Central District Health says, 'well, you need a commercial kitchen to be able to do the jam or jelly,' knowing that that is the policy of the farmer's market.

Conversely, the same person calls up here in Southwest District Health and maybe the Nampa Farmers Market doesn't have that same policy. So the staff person says, kind of what I said in

summary earlier, 'well, come in and we might have you sign a low-risk form, and we appreciate you telling us and go sell a lot of jam, you don't need to do anything else.' Farmers markets absolutely have the right and the ability to put in place their own policies and rules. Some of that is driven by liability issues or there might be other issues that drive that. We as public health agencies will do whatever we can to honor those policies and rules that are written by the Farmers Market Management. Does that answer your question?

A: Yes, in a way – if I can continue on this? So what I heard you saying, that your interpretation of why Central District, and I don't mean to point a finger at Central District, is extraordinarily helpful. But are they not putting themselves in the position of being a gatekeeper for the Farmers Market, instead of saying, 'here's the cottage food, what you need to know' and then the person gets the assumption that it's okay. But meanwhile, here is Central District Health saying 'here are the rules of Capital City and Boise Farmers Markets' when in fact those may not be the rules unless there's really good communication between them. It seems there are a lot of players, a lot of fingers in the soup. All with the best of intentions and it muddies the waters for the poor person who says, 'I want to do this and why at the farmers market and why I can't sell it on the street corner?'

H: What a great observation. Thank you. Let me address some of those things. It is my understanding that there is now an Idaho Farmers Market Association. I would love nothing more than to be able to meet with them and discuss this exact issue. The short answer to your question is it is certainly possible that that is what is happening. But I think there are some other underlying issues that would need to be addressed. One of the things that have been said in an earlier meeting is that maybe that is the kind of thing that needs to be clarified for a cottage food vendor. Even though we've got this list of non-TCS foods, ultimately it is the Farmers Market Management Group that will make the decision on whether those non-TCS foods will be allowed under certain circumstances and what those circumstances would be. And I fully support that. So, as I have had these meetings around the state I have had some representation from the Idaho Farmers Market Association. I anticipate that I will get further representation as I continue to hold these meetings. And that's a great conversation to have. I think it is a great example of what can be frustrating to a vendor.

A: That is ideally how this should operate. A statewide organization representing Farmers Markets sets at the table with the stakeholder and they are helping to craft and define and negotiate a changing landscape. Finally, I think just in the last few months that organization has got some muscle behind it. They've been evolving.

H: In my other presentation about the food code updates I talk about an organization that I chair called the Idaho Food Safety Advisory Committee. It is a voluntary organization. The membership consists of anybody who has a vested interest and is willing to donate their time to discuss these kinds of things. And we have had some discussions at that committee over the last year about cottage foods. And I wasn't sure who to invite from the Farmers Market Association until just a few months ago. In the last couple of meetings that we've had

representation from the Farmers Market Association was invited. They were not able to attend for reasons that I don't know. And I recognize that sometimes you cannot attend every meeting that you're invited to. We all encounter that every day of our careers.

A: There's so many to go to.

H: Exactly. You have two or three or four! Which one do you go to? I understand that.

H2: I think, before this meeting started, Patrick mentioned that he had spent probably 70 percent of his time since January on this cottage food issue. And I think all the health districts have been brought into it too. Maybe not to that extent, but I think I would add that we have all learned a lot about some of the miscommunications, some of the variations in our own district policies that have caused confusion. I think for example, the attorney generals verbiage that you saw here is new. We didn't have that kind of piece to the puzzle here before. There are lots of gray areas, lots of variations and you know what people ask us, and what the various answers are even within a health district. You know, whether you talk to a front desk person, or you talk to Tom or a food safety inspector. So there are a lot of complex issues running around this. I think we have identified lots of gaps in communication and there are lots of ways probably, to improve consistency. Even without a formal process I think we can make some big improvements.

H: I agree, and to add to that, we are absolutely committed to fixing the problem or the issue. What we want to hear from the stakeholders is, 'what do we do to fix it?' What is the will of the stakeholders regarding this question? Other comments?

A: I've got a question, but I'll start it with a comment. I think you've got it up here, but the real problem is consistency, and understanding on the side of the public about what they are allowed to do. And the problem there is, if the Health Districts are telling people different things here and there, or if they are being allowed to produce different things in one place and not the other it just creates confusion. So the ultimate goal is how do you eliminate that? If the regulators don't necessarily know what is going on all of the time and are not all on the same page then how do you expect the public to know? That's ultimately the goal.

H: Fair comment.

A: My question is can you explain to us the process moving forward with this negotiated rulemaking, if that indeed is what it is. And what are the opportunities for the public and the stakeholders to have an input in that process? I know that it's sort of set out in the Administrative Procedure act, but what are our opportunities to be involved in this process beyond these meetings and then in September you come out with a set of rules for more input?

H: Yes, first of all we are accepting public comments until July 24<sup>th</sup>. I have to work backwards in my deadline. If we have to present something to the 2016 legislative session that happens in January, which means I have to have my Board of Health and Welfare hear the proposal on their

meeting date which is November 19<sup>th</sup>. That meeting is set in stone. I cannot change it in any way. That is the deadline for that meeting. In order to meet that deadline if there is a rule we are proposing we have to have available that final draft rule available around the first part of September so we can accept public comments on the proposed draft language. And in order to meet that September deadline, I just back up a few weeks to allow myself enough time to incorporate comments that are submitted. And the way this works, the way that negotiated rules work, is first of all I actually am willing to continue having meetings and the only limitation I really have is my calendar. My calendar is filled right now, but if I can find some time I would love to sit down and talk with other stakeholders about this. The other thing to keep in mind about negotiated rulemaking is it is possible that not everything we discussed gets incorporated into the final version of the rule. That is why we have a public comment period for comments to continue to come in on the proposed draft version of the rules. If there is something that a stakeholder feels very passionate about that should be in there, and it is not incorporated into the draft rules, that stakeholder still has an opportunity to bring back that information and say, 'if you'll have it, that information needs to be in here.' Where was I going with this? I just lost my train of thought. Does that kind of answer your question? I know I danced around it.

A: My question is around this sort of black box idea. You know they talk about it in public policy as you've got inputs on one side and then something magical happens and outcomes are regulation or something like that. How can we as stakeholders or the public get inside of that black box? So, when you are going through this process, you collect some public comments and then you as the staff of the Department of Health and Welfare drafts the rules. Then you put out a draft to the public and you get comment, correct? Is there a way, when questions arise, that you can go somewhere and ask the public questions, or the stakeholders questions that are not black box of drafting the rules, or would you consider putting together some sort of advisory list to keep people updated as the process moves forward before September?

H: Yeah. I am certainly willing to put together an advisory list. I will say that the Food Safety Advisory Committee we have been discussing cottage foods issues for most of last year. Several stakeholders were invited to attend those meetings, and for reasons that I don't know, they did not attend those meetings. We met about every month for the last year, discussing among other things, cottage foods. At those meetings I had representatives from each of the Health Districts there. But yeah, I am certainly willing to try to provide this information through that Food Safety Advisory committee. If you want to give me some emails we can certainly write down some email lists to let folks know what is happening as far as that's concerned.

A: I would just like to add to the importance of getting the public involved early on. Because when your rule goes before that legislative committee, then all these things come out, the whole thing blows up and it just kicks the can down the road another year because you have to go back and rewrite it.

A: Patrick, on the process question, will there be an option of like a post negotiated rule or post published rule, and having a meeting for input and comment period so that people have a

chance to engage directly, get on the phone or be in the room where you get that one-on-one input based on what has been proposed in the initial comments? That's a successful option.

A: If I understand correctly, this would be a separate meeting from the public hearings on the proposed draft. Is that correct?

A: No, not necessarily. For public input and discussion.

A: Would it be in conjunction with the public hearings?

H: So during September, and this probably goes back to what you are talking about too, once I have a draft proposal ready to go, I will have public hearings on it. I am not obligated to have meetings around the state, I prefer to, for a couple of reasons. Number one, I have a personal interest because I love traveling around Idaho, but two, I like to meet with people in person and hear from the stakeholders. If I can't make it to those meetings personally though, I can enlist the help of the Health Districts or other people, for example, to distantly act as a host. If I am not at a public hearing, what that means is that there is not a way for the department to respond to the comment; it is just a matter of soliciting comment, nothing more. There is no real response or interaction. So I certainly do intend to have public hearings around the 5<sup>th</sup> through the 16<sup>th</sup> or so. So that would be the public hearing period.

A: So that gives people another two opportunities to comment in person on the proposal.

H: Yes.

A: Can you explain the process for evaluating the public input for evaluating a specific recommendation? You know, you've got something in front of you, if I am a member of the public, how do you make a decision if this is good, bad or neutral and whether it will or not be included?

H: That process usually involves a discussion with my superiors at Health and Welfare. We usually bring in the deputy attorney general to look at those kinds of things too when we are drafting what the proposal would look like. The DAG, the Deputy Attorney General needs to review it for that legally defensible concept. So we kind of try to incorporate some internal things like that. I don't have set criteria that says something of this nature will get more weight than another. Right now, honestly, I am just soliciting comments. I have no idea what this end product is going to look like yet, I was asked in Northern Idaho that same question. What is this end product going to look like? I don't know yet. That is the reason for these meetings, because I want to hear from the stakeholders and what their interests are, and what their will is about what the end product ultimately looks like. Whether it is rule, continue current or write a statute, I'm not sure yet.

A: I have a question. A lot of states include instruction for consumer sales to others and also intrastate not interstate. Is that considered to be current practice?

H: That is and that's a great comment. When I was in Northern Idaho I had a lot of questions. I actually had some vendors from Washington State come in and attend the meetings. They asked me that same question. My comment was, 'our jurisdiction ends at that state line.' So I have to honor whatever the neighboring state's policy is. I use Washington as an example here because they have some permits that authorize a vendor to cross state lines. We honor that. They have other permits that don't authorize a vendor to cross state lines. Now while we are not on the border checking names and checking permit status, I cannot ethically tell a producer, 'if you know your permit doesn't allow you to cross state lines then come on over anyway.' I can't ethically say that. So what you are talking about though is pretty specific to in-state sales. I have been asked the question about interstate commerce through the internet sales. Again, we currently don't really regulate that and even though it is an interstate sale even the FDA does not look at internet sales as something they regulate. They look at that as direct to consumer. Now, hypothetically it is certainly possible to sell 50 cases of my jam to somebody over the internet and it's a fair argument that's probably not for personal use, but right now I don't know how we track that and I don't know how the Health Districts track that. So we are looking at internet sales as direct to consumer which is pretty consistent with what Federal policy is.

A: So the first two bullets both have core language that it was direct to consumer and intrastate sales only. Would you anticipate if you were to do one and two bullets that you would include language that clearly state intrastate. I realize you can't stop someone from violating that but at least they have a clear understanding of what it is.

H: Yeah, I'm certainly willing to include language like that. And with that as a caveat, I will tell you, now that I have heard from some of you, I'm still trying to get your feedback and I am not in any way trying to curtail this discussion. But, I had some meetings in Coeur d'Alene last week and I had some meetings in Moscow last week, and this round today. Wednesday and Thursday of this week will be in Twin Falls. Monday and Tuesday of next week we will be in Idaho Falls and Wednesday and Thursday of next week will be in Pocatello. It's not really a fair representation yet, but so far what I am hearing, is to combine those first two bullet points in some way. Clarify better by definition in a rule, what it is we are talking about. Direct to consumer sales, intrastate, the non-TCS items, things like that. So clarify that aspect. Clarify it in rule but effectively keep our current practice of not regulating that.

A: That's exactly what I was going to suggest, just combining those two. I also think that though some of this takes money, and this might be a pipe dream, but, to offer from the interest of persons, a portal that gives them as much information as possible, knowing that the ultimate dream is to actually talk to someone who has the most up-to-date information possible. But is consistent, talk about dreamland, but across all the Health Districts have a uniform message. And use that portal as a way, as you and I talked earlier, providing a warning that it is in their best interest to do everything right. You can't just have Mama's best salsa recipe and be ignorant of the fact that you could poison people who could die. So it's a warning to that. And then just integrate that online test from South Central District Health that was really fabulous

given as part of their extensions, education for the Farmers Market people but basically food safety. That was a fabulous test. Have FAQ's, how to appeal something that you don't think is right, a list of all current known non-TCS, how to sell your product, and I don't mean a big marketing campaign, but who you should talk to and not think that the advice of this Farmers Market applies across the country. And then kind of a checklist that kind of lets you know you are good to go. Knowing that it's not going to be exhaustive and you have to do your homework.

H: Those are some great comments. Let me address some of these. We are already working on some of these issues with the Health Districts right now, with the intention of having that [foodsafety.idaho.gov](http://foodsafety.idaho.gov) website, that portal that you are talking about. Maybe it is dreamland but we may be waking up to that too. Now, there does need to be the understanding that the information I provide is not necessarily going to be exhaustive. We had a good conversation this morning that there are still going to be disclaimers about 'ultimately, you will need to contact the Farmers Market that you're vending at and the local Health District.' There's still a discussion about where do they start. And maybe we have them start with contacting the Farmers Market because as we've said, nothing precludes a Farmers Market Management team from creating the own internal practices and policies. I love the idea expressed earlier about having a stakeholder meeting to provide some information on this. I would really enjoy nothing, more, honestly, right now, than to be able to meet with the Farmers Market Association. In fact, when I was up in Moscow, there is a member of the Farmers Market Association up there, and we discussed some of these same issues. She discussed the concept of trying to meet with some of our neighboring states with like an annual workshop or something like that, and inviting members in and doing a webinar. And inviting me and inviting the Health Districts in to talk about some of these points we are discussing. A couple of other things that I was to address that you were talking about is the exam that is available at South Central District. We have looked at that. There are a couple of concerns that we have from our perspective as regulatory officials that we are trying to clean up. First of all, we don't want to give the impression that that exam meets the requirement in the Food Code for having to demonstrate knowledge of food safety. It is a good start. But if you are licensed as a food establishment, you still need to meet the demonstration of knowledge requirements and that exam does not qualify for that. The other thing that we have looked at collectively with the Health Districts relative to that exam is it appears, from our perspective, that several of the questions seem to imply that home-canning of foods is allowed because there are several questions about types of canning methods and some of the steps that are necessary. We don't want to give the false impression that we are allowing home-canned asparagus. It might be the best out there – I'm sure it is, but there are some inherent risks when we look at a home-canned item that we just aren't comfortable allowing that to go into a Farmers Market without some regulatory background. So we are looking at that and that is just some of the comments that we've had so far from the Health Districts out there.

H2 I just want to comment. I love the idea that we are talking about something on the website and we have kind of moved in that direction. One of the things that we worked on last year, because we had lots of ambiguity on mobile food trucks. So he and I worked on this. We put together sort of a check list and we put together a whole packet of information so that it was more user-friendly. Here is what you need to do, here is what the expectations are, here is your checklist, and when it is completed, submit it back to us. So I like that idea. I don't want to put more work in Patrick's area to do that, although I think some of the Health Districts would be willing to help out. But I think that is a great idea. One of the things, this goes back to address your comment on consistency, Looking at the Health Districts across the state, I'm not going to talk about the autonomy there, because Patrick has already said that exists. But one thing from the food safety perspective that we deal with when we receive the applications, for example, just to give you an idea, we might have someone submit an application and on it they say they are going to make fruit pies. So we call them up and we say, 'okay so you are going to make fruit pies, what kind of pies?' and they tell us and we say 'everything is fine, you don't need a license'. And then they've got one pie that might be in question. Well we don't know everything about every ingredient and how to assess that. And then, in some cases, we go to the market and we are walking by looking for a place that we need to inspect and we say 'oh, here is the place that we talked to about fruit pies.' And then we have a lemon merengue pie that showed up that's got that homemade topping on it. What do we do with that? Do we now ask them to get a license? You can't do that out of your home anymore. At that point, they are at the market, they've planned to be there, so then what are they supposed to do? Go get a commercial kitchen. And we say you can't make that anymore. So that is just one item. And what it comes down to, and we've talked about this in our district too, and that is, like for example, yogurt and sour cream and adding ingredients and how that changes the chemistry on that product and so forth. So I would like to put out there that we know that is a problem, I am sure it's not only a problem in our district; it's a problem in other districts assessing those products. Add maybe some resources for testing as part of the cottage food rules. I am kind of a proponent at this point for promulgation of rules. And I think by doing that we can make it easier on everyone by identifying those. So part of that, I've talked to Patrick about a list of foods, of maybe Non-TCS and TCS. But I am reluctant to do that too because as soon as we put a list out, then we'll have someone say, 'well, that's not on the list.' So that is more language. But maybe we can talk about testing of the product if there is uncertainty about it being a TCS food. So I don't know how the other District folks feel about that but from our perspective and to move towards consistency, I think that would be helpful. That also aligns with your idea of the centralized location and the guidelines.

A: Any time you put a list out. A list has edges. There are a bunch of people looking for the edges because that's where the niches are. That's where the market is moving and I'll tell you, there are people at every market who ask me about the weirdest stuff. Just at the last market, someone asked 'do you ever sell unwashed fertilized unrefrigerated eggs? I asked why and they said 'oh we are on some regimented, health thing.' I just said, 'well, email me when you are ready and we'll see if we can make it work.' But that's the kind of questions that we're

being asked. So where is the line? And I'm very conscious of the line. That's where you find the issues. I just had a question, hardly worth mentioning, but the new sweetener. Coming into the market, how does the chemistry of that affect the ability of a fruit pie to be safe?

H: Great question. Let me address some of these things while they are fresh in my mind. When I talk about binding water that is the sugar or the sucrose molecules. So if we are using an artificial sweetener that might change things. So let me talk about this for a second, because I think this is a good segue. The updated food code has a better defined table. It's called the interaction tables that describe the interaction between water and pH. And it allows a better tool for the Health Districts to look at a food item with information from a lab. I spoke with (Health District staff person) earlier, the lab here in town at the U of I charges \$15 or \$20 to do an analysis of foods. We could then look at that water activity and pH and using the interaction table that is in the proposed updated Food Code, we are in a better position to be able to say, 'that's still within the edges, or no, I'm sorry, now you're going beyond the edges.' But we have that tool in the updated Food Code. We don't have it under the existing Food Code right now. We still have to look at that strict pH and water activity limits. The other thing I wanted to talk about is some of what (Central District staff person) was talking about – the gathering of information. That's kind of already started to take place. It's not done and I don't know exactly, unfortunately the Farmers Market has already started so obviously it's not going to be done for this season. But I think it is something that we will continue to work on. I really like the idea of an advisory committee specific to Farmers Markets and cottage foods. And I think that some of the things we were talking about here were things that we could address in conjunction with the Idaho Farmers Market Association through some kind of an annual workshop or at some other kind of force that at least up in Moscow, (they) are beginning to discuss. Is this something we could do? Even up there we were talking about ways it could possibly be done. Could we partner with U of I up there and their extension offices? We have technology at Health and Welfare and we're certainly capable of doing a webinar there but I think it would be a better forum if we had more of the stakeholders involved and not just me sitting in my office at my computer. If I could get out and involve some of the other stakeholders in some kind of a workshop. There was a little bit of hesitation expressed about this from a couple of vendors. Their perspective was 'why are you going to require us to attend this annual workshop that you want to put together?' I made it clear, this would not be my requirement, and this would be something that the Farmers Market Association could incorporate. Frankly, I believe that's a perfect role of an association. And I would wholeheartedly support that kind of movement. But I do see it as something that needs to originate with the association perspective and not from the regulatory perspective.

H2: I personally, from the experience that I have had and the information that comes across my desk on a daily basis, that in looking at the product being a TCS or non-TCS food and getting the finished product, the pH and water activity tested, I think for the most part that is a good basis. But what I don't think would work is home-canned products. I mean recently, there was a wedding or something recently and seven people are dead already in Ohio. So if we are talking

about, for example something that is a pickled product, we may have the pH down there but it is the process too, and that is part of what we have to consider. So I am not supportive of that regardless of the finished product.

H: No and unfortunately, I have to agree with you. As much as we are supportive of the cottage food issue, and Farmers Markets, we are not here to be obstructive. We do support this industry and we want to see them grow. I mean we're all government employees. Ultimately our paycheck depends on the success of vendors and others. But ultimately it depends on successful business operators in Idaho. We understand that, But I think (Central District staff person) brings up a good point and we've had a few conversations and I've known more about *Clostridium botulinum* than I ever cared to know over the last few months. When you make any kind of a food item and you create that zero oxygen environment, you are creating the ideal conditions for C-bot growth. C-bot is the organism that causes botulism. I do have an audio clip of a person who survived a case of *Clostridium botulinum* several years ago, back in the 1980's. It is about a 10 minute audio clip and she describes what happens to your body. Effectively, botulism paralyzes you. It paralyzes your nervous system, and it paralyzes your muscles and specifically your diaphragm. So you can effectively suffocate while you are fully conscious and aware of it happening. She goes into very vivid detail. She is a lady who lived in eastern Oregon. This was a vivid detail of the experiences that she had in the hospital while she was recuperating from this. It is not a pleasant thing to listen to. But, my issue with home-canned foods is because there are so many different processes, I don't see how we can safely say 'this process is okay, but this one isn't, that one might be, or we're just not sure'. So for right now, we are still proposing, and I think every state is this way – we are not allowing home-canned foods. With the exception of those non-TCS items I showed you and that's because there are other interactions that are taking place that control for the potential growth of C-bot.

A: Another group that probably needs to be at the table at some point is the Idaho Department of Ag kind of runs the agri-tourism. It's not just Farmers Markets where people are looking to sell things.

H: For the record, they did have a representative here for this morning's meeting.

A: I think agri-tourism is a good thing. You have someone come onto your farm and they always want to buy something. So, you can't sell them frozen packaged meat like I would. In this experienced culture, people want a souvenir of the experience. Cottage food is perfect.

A: Like goat cheese. If you go to a goat cheese making farm then you want some goat cheese.

A: You show it to your friends when you take it home.

H: The meats get into a little bit of a different realm in Idaho. So, I'm just clarifying, that the Idaho Legislature repealed our meat inspection authority in the early 1980's. That meat inspection was administered through the Department of Agriculture. At the time, the vast majority of meat processors in the state were being inspected by USDA so there was very little that the

Department of Ag was doing with it. And they kind of said, 'we don't need to worry about this anymore' and so it was rescinded. It's one of those things, looking back in hindsight, was that probably the best decision at the time? I don't know the answer to that question. But one of the results of that decision, is currently in Idaho, all meats that are under the Amenable Species Act must be inspected by USDA. There gets to be a lot of confusion as to what the USDA inspection allows. A lot of USDA inspected facilities want to engage in retail sales, but the USDA inspection does not address retail sales. So if a meat processor wants to engage in retail sales they are hypothetically subject to regulation and inspection by the Health District. You know, probably better than anybody in the room about small scale poultry production. And there are other things that come up with meat inspections. Species that are not considered amenable species, wild game, and some other species that are out there, that can fall under FDA jurisdiction. But to go back to (attendee's) comment earlier, the FDA goes, 'well if they're not running it across state lines then we don't really care about it.' So we have a few deer farms in the state where the meat is being raised, processed and sold right here in Idaho. Those are also under the jurisdiction of some of the local Health Districts. We are not inspecting the meat. We are inspecting the facility where the meat is processed. Other comments, thoughts, or questions?

H3: Yeah I've got a comment. To (the) thought about a portal, I think that is really important. I hope that all that information would be on the State website.

H: That's the intention.

H3: And try to answer all those questions as best we can, without making it too long where people don't read it at all. I get that there is an art to that.

H: That is why I would be very interested in some kind of an advisory group we could vet some of this material through. I think what Tom just said is really important too. Yeah, we all know from experience that we start to look at something and say, 'this is seventeen pages long. I'm not going to read something seventeen pages long!' So if there is a process, whereby the material that we come up with from regulatory agencies could be kind of run through the stakeholder groups, I'm very open to that. I want to find what's going to work for the majority of folks here.

H3: Another question I have is how many Idaho Farmers Associations are there in Idaho? You know, you have one regional one here, right? And, I don't even know how new that is.

A: There is one Idaho Farmers Market Association. But there are about 60 Farmers Market's that operate in the state, with varying sizes and operations.

H3: So what I learned from you is that this Market is still kind of in its infancy though?

A: It is. It is very new. This is a great focus point to get them off their butts and doing something useful.

H3: If we try to get 60 Farmers Markets to be part of this Farmers Market Association that could be well represented for the stakeholder meeting, so when we get this information together and get positive feedback so that we are all satisfied with the product.

H2: It would be outstanding to have a portal that has a good amount of user friendly information. And an advocacy group, an industry trade group, that Idaho Farmers Market Association and then an advisory group and then public participation and education. The webinar and the annual meeting which gives people new to it and old an opportunity to interact and become educated and maybe throw out some suggestions. I think those three things would be a really strong program.

A: Do you have the resources at the State to develop that portal?

H: Well I've got the State website right now. Part of what we are meeting with the Health Districts right now is to compile some of this information. As that information gets compiled we can certainly make that in electronic format and post it on the State website.

H2: Are we already linked.

H: Yes, I think every Health District already links to the State website. I use the vanity name which is [foodsafety.idaho.gov](http://foodsafety.idaho.gov). When you type that into your address bar, it will redirect you and take you to the Health and Welfare Food Protection website. So you can access it through that vanity website which is [foodsafety.idaho.gov](http://foodsafety.idaho.gov).

H4: I think that central portal will make a lot of sense. That will help with consistency.

H: I think so and I am certainly willing to do this. My biggest obstacle right now is simply my calendar and I'm trying to get this done. I'm not trying to sound like a poor whiney State employee but I'm going to. You know, we are one and one-half folks at the State level. Barb is a full time employee, but she is only allowed to allot 50% of her time to the food program. I don't know how we are getting done now when she is dedicating several hours a week to the food program! We'll get it all worked out in the end. So it's just really finding the time to do this. I am very interested in the concept of trying to have some kind of advisory group or volunteer folks who can sit down and review some of this information with me and make it so it is accessible but also understandable. That's where I'm going to struggle. Because I write things, I say the term, bureaucratese. I'm a bureaucrat; I know how to speak that language. I could right that all up in bureaucratese, but ultimately I will need other folks to look at it and say, 'point blank, this doesn't make sense, you're going to have to scrape this whole paragraph.' I want to have that conversation.

A: We could be useful, with the Farmers Market Association, and I have no business speaking for them, this is just is just a dream idea, if they were to submit a Farmers Market Promotion Program Grant. Now the next round happens in a week so it isn't going to happen this year. But if they use that grant, it is an opportunity to look at how resources might come to you and the

Health Districts to create this portal, to create the structure by which we could all benefit. That wouldn't happen for a year and one-half if there were any money to do that. But I think that is a means for bringing some resources into this from the Farmers Market perspective. I would be happy to recommend that to the association.

H: Good, because I can't.

A: I will carry it to them.