

10-19-18 *So Glad He Had That Option*

Health departments frequently hear the question/complaint, “Why do you bother taking anonymous calls? It really stinks for us when it is unfounded, and they are just wasting your time!” Unsolicited advice frequently follows on the heels of the question/complaint before I even have the chance to respond. The standard words of wisdom given to me are these: “I think you should insist on a name and maybe you should even get the alleged complaint in writing! Other departments do that!”

A board of health cannot afford to risk ignorance of a risk to public health when simply taking a message over the phone and following up on it may remedy the situation. If there is no basis to the concern, if the alleged problem is non-existent or if the real situation is business-jealousy or neighbor squabbles; all that will quickly be evident. Truth is like cream: Give it a little time and it will rise to the surface. “Lack of evidence” is so much easier for the health agent to write down than all the particulars of real problems such as the dust, the odors, the flies, the standing water, the overflowing septic system, or the lack of hygiene or the improper holding temperatures of food, or whatever applied to the concerned citizen’s call-in complaint.

And, so it is that health agents do take calls from concerned citizens aka Mr. or Ms. Anonymous. And that is how we sometimes make new associations of trust; for when there is no evidence of a problem, we can reassure people that the records will reflect that no problem was found.

On the other hand, we sometimes are very grateful for that anonymous call because it was true and accurate, after all. One time, when I followed up on a call describing the observed temperature of forty-eight degrees on a thermometer at a particular section of refrigeration for a brand name chicken at a local store, I was thankful for the call. Mr. Anonymous described it so well that I was able to look at just that section and see that, sure enough, the attached store thermometer read

about forty-eight degrees. (They are very small thermometers. Mr. Anonymous has good eye sight and a conscience!”)

Well, I thought for sure that, most likely, the thermometer was broken, and the refrigeration actually worked because corporate owned places typically go above and beyond and have several layers of checks and balances, such as alarms for out of temp refrigeration.

After meeting with the manager to inform her as to why I was there and what I would like to do, we first checked the area of concern and its neighboring sections. Our hands could feel the difference in the movement of air and the difference in temperature, with colder air in the other sections and very little air movement correlated with not-as-cold air in Mr. Anonymous’ section of concern.

Of course, holding our hands here and there was not the end of the story or the scientific method. It was just the beginning. I checked the temperatures with two different types of thermometers and those measurements confirmed the readings of forty-eight to fifty-three degrees for that section compared to thirty-six degrees in other sections. The meat was immediately removed, scanned in to report the loss and a request for service to the refrigerator was placed as a priority.

As the manager and I chatted at the end of our meeting, I explained the board of health policy of always taking anonymous calls. I added my wish for people with concerns to also talk to managers. However, I explained, I understood people are different and, for whatever reason, some are not comfortable with that. Instead of sticking with the point of the importance of talking to managers, she, instead, said something very refreshing. She said, “You know what? I am glad he had that option available to him.” I am, too.

Thank you, Mr. Anonymous. You have sharp eyes and a keen sense of right and wrong and you did the right thing by calling. Thank you.

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