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Príncipe de Vergara, 154 – 28002 Madrid – España Telef.: +34 915 903 638 Fax: +34 915 631 263 - e-mail: iooc@internationaloliveoil.org - http://www.internationaloliveoil.org/

GUIDELINES FOR THE MANAGEMENT OF VIRGIN OLIVE OIL TASTING PANELS IN THE EVENT OF A PANDEMIC

Susana Mattar, *Universidad Católica de Cuyo*, Ribadavia-San Juan (ARGENTINA) ; Karolina Brkic Bubola, *Institute of Agriculture and Tourism*, Porec (CROATIA) ; Florence Lacoste - *Institut des Corps Gras* ITERG, Canejan (FRANCE) ; Laurent Queirolo *SCL Laboratoire* Marseille (FRANCE) ; Christian Pinatel, *Centre Technique de l'Olivier* CTO, Aix-en-Provence (FRANCE) ; Gabriele Zeiler-Hilgart, *Bavarian Health and Food Safety Authority*, Oberschleisheim (GERMANY) ; Efstathia Kremmyda Christopoulou, IOC Expert, Athens (GREECE) ; Aliki Gali, *Directorate of Technical Control for Consumer Protection*, Athens (GREECE); Luciana Di Giacinto - Centro di Ricerca Ingegneria e Trasformazioni Agroalimentari CREA Research Centre for Engineering and Agro-Food Processing Pescara (ITALY); Alberto Morreale, *Ispettorato Centrale della Tutela della Qualità e Repressione Frodi dei Prodotti Agroalimentari*, Roma (ITALY) ; Stefania De Cesarei INNOVHUB *Divisione Stazione Sperimentale per le Industrie degli Oli e dei Grass*i, Milano (ITALY); Andrea Giomo, IOC Expert, Mantova (ITALY); Ana Carrilho *Laboratório de Provas Organolepticas Instituto Superior de Agronomia*, Lisboa (PORTUGAL); Raul Manuel Da Silva Botas, *Autoridade de Segurança Alimentar* (ASAE) *Laboratorio de Segurança Alimentar* (LSA) Lisboa (PORTUGAL); Milena Bucar-Miklavcic, *Science and Research Center Koper Laboratory of the Institute for Oliveculture*, Izola (SLOVENIA); Wenceslao Moreda, *Instituto de la Grasa*, Sevilla (SPAIN); Diego Luis García González, *Instituto de la Grasa*, Sevilla (SPAIN); Maria del Mar Garcia Gonzales Laboratorio Central de Aduanas e Impuestos Especiales Departamento de Aduanas e Impuestos Especiales Agencia Estatal de Administración Tributaria (SPAIN); Mª Ángels Calvo Fandos *Panel de catadores de aceite de oliva virgen de Cataluña*, Reus (SPAIN); Gema Gómez de los Santos, *Panel de catadores del Centro de Investigación y Control de la Calidad*, Madrid (SPAIN); Francisco de Paula Rodríguez García, *Dirección General de Industrias y Promoción Agroalimentaria*, Granada (SPAIN); Hermenegildo Cobo Martínez(SPAIN); Beatriz Baena, *Laboratorio Arbitral Agroalimentario*, Madrid (SPAIN); Elena Díaz Mejías, *Laboratorio Arbitral Agroalimentario*, Madrid (SPAIN); Plácido Pascual Morales, *Laboratorio Agroalimentario*, Córdoba (SPAIN); Ali Sweda, *Agricultural Research Organization Gilat Research Center*, Gilat (ISRAEL) ; Hassan Mouho, *Établissement Autonome de Contrôle et de Coordination des Exportations* (EACCE) Casablanca (MOROCCO) ; Samira Sifi, *Office National de l'Huile*, Tunis (TUNISIA) ; Filiz ÇAVUŞ, *Ministry of Food Agriculture and Livestock Olive Research Station*, Bornova-Izmir (TURKEY); Ummuhan Tibet, Olive Oil Council of Turkey, Izmir (TURKEY); Ana Claudia Ellis, *Laboratorio de Evaluación Sensorial Facultad de Química*, Montevideo (URUGUAY); Adriana Gambaro *Laboratorio de Evaluación Sensorial Facultad de Química*, Montevideo (URUGUAY);

Coordinator: *Andrea Giomo (ITALY)*

IOC e-WG MEMBERS:

Susana Mattar (ARGENTINA) ; Karolina Brkic Bubola (CROATIA) ; Florence Lacoste (FRANCE); Christian Pinatel (FRANCE) ; Gabriele Zeiler-Hilgart (GERMANY) ; Efstathia Kremmyda Christopoulou Athens (GREECE); Aliki Gali (GREECE); Luciana Di Giacinto (ITALY); Alberto Morreale (ITALY) ; Stefania De Cesarei ITALY); Milena Bucar-Miklavcic (SLOVENIA); Wenceslao Moreda (SPAIN); Elena Díaz Mejías (SPAIN); Mª del Mar González (SPAIN), Plácido Pascual Morales (SPAIN); Samira Sifi (TUNISIA) ; Ümmühan TİBET (TURKEY); Ana Claudia Ellis,(URUGUAY),

This proposal is for virgin olive oil sensory analysis laboratories working under different national or regional legislations. It is a synthesis of the circumstances given by the active members of the electronic working group.

A heartfelt thanks to all the participants of the electronic working group!

1. Purpose

This document is a guide providing health and safety recommendations for conducting the organoleptic assessment of virgin olive oils during a pandemic.

The purpose of this document is to define the procedures for managing a panel for assessing the organoleptic characteristics of virgin olive oil during a pandemic, if there are similar future incidents, and to prevent a pandemic becoming an obstacle for the olive sector.

All activities take place in safe conditions during the coronavirus pandemic or other similarly transmittable diseases, either airborne or person-to-person.

The main goal is to minimise the potential risk of respiratory transmission and provide a safe environment for members of the panel.

2. Scope

This guide provides recommendations for managing a panel in emergency circumstances, such as a pandemic, when it is not possible to fully or partially use the normal panel room.

The aim of this guide is to describe the applicable health and safety measures for conducting the organoleptic assessment of virgin olive oils during a pandemic. These measures are in accordance with the measures and advice of national governments and the World Health Organization (WHO). In addition to this guide, recognised laboratories should implement the measures and protocols laid down by the appropriate health and safety committees and national authorities.

The panel leader is in charge of administering the recommendations outlined in this document using the necessary resources provided by their administration. The panel leader should provide the assessors with sufficient information and ensure they follow the recognised standards, with particular reference to voluntary participation in the tasting sessions (*The responsibilities and duties of the panel leader are not delegable (e.g. sample preparation, checking the compatibility of test rooms, booths, samples, glasses and heaters and more, as reported in COI/T20/Doc. No 15*).

This guide is applicable under the current measures for the covid-19 pandemic, in particular social distancing, although they can be applied for any other health emergency caused by similarly transmittable diseases.

3. References

3.1 Standards

- COI/T.20/Doc. No 6 “Guide for the installation of a test room”.

- COI/T20/Doc. No 15 “Method for the organoleptic assessment of virgin olive oil”.

3.2 Bibliography

- WHO COVID-19 and Food Safety: Guidance for Food Businesses: interim guidance (WHO/2019-nCoV/Food_Safety/2020.1).

- European Commission Directorate - General for the Health and Food Safety Crisis management in Food, animals and plants - Food hygiene – “COVID-19 and food safety”.

- European Agency for Safety and Health at Work COVID-19: Back to the Workplace - Adapting workplaces and protecting workers.

- COVID-19 and food safety - European Commission Directorate-General for health and food safety - Crisis Management in food, animals and plants. Food Hygiene. Commission européenne/Europese Commissie, 1049 Bruxelles/Brussel, BELGIQUE/BELGIË.

- Coronavirus COVID-19 and Food Processing Parameters – IEH, March 2020.

- Face Masks Against COVID-19: An Evidence Review DOI - 10.20944/preprints202004.0203.v1.

- World Health Organization (WHO). Home care for patients with suspected novel coronavirus (nCoV) infection presenting with mild symptoms and management of contacts [internet]. Geneva: WHO; 2020 [accessed 4 February 2020]. Available from: https://www.who.int/publications-detail/home-care-for-patients-with-suspected-novelcoronavirus-(ncov)-infection-presenting-with-mild-symptoms-and-management-of-contacts.

3.3 Webliography

- https://www.fda.gov/emergency-preparedness-and-response/counterterrorism-and-emerging-threats/coronavirus-disease-2019-covid-19 (Coronavirus Disease 2019 COVID-19. Large useful information).

- https://www.efsa.europa.eu/en/news/coronavirus-no-evidence-food-source-or-transmission-route (EFSA: Coronavirus: no evidence that food is a source or transmission route).

- https://www.who.int/es/emergencies/diseases/novel-coronavirus-2019/advice-for-public (WORLD HEALTH ORGANISATION Coronavirus disease (COVID-19) advice for the public”).

- https://www.nejm.org/doi/pdf/10.1056/NEJMc2004973?articleTools=true (Aerosol and Surface Stability of SARS-CoV-2 as Compared with SARS-CoV-1).

- https://www.ecdc.europa.eu/sites/default/files/documents/Environmental-persistence-of-SARS_CoV_2-virus-Options-for-cleaning2020-03-26_0.pdf (Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2).

- https://www.ecdc.europa.eu/en/publications-data/poster-effective-hand-washing (Effective hand washing).

- https://wwwnc.cdc.gov/eid/article/26/7/20-0764_article (COVID-19 Outbreak Associated with Air Conditioning).

- https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-use-face-masks-community.pdf (Using face mask in the community – technical report. European Centre for Disease Prevention and Control).

- https://doi.org/10.1016/j.jhin.2020.04.036 (What face mask for what use in the context of the COVID-19 pandemic? The French guidelines).

- https://www.ecdc.europa.eu/sites/default/files/documents/Contact-tracing-Public-health-management-persons-including-healthcare-workers-having-had-contact-with-COVID-19-cases-in-the-European-Union%E2%80%93second-update_0.pdf (Contact tracing: public health management of persons, including healthcare workers, having had contact with COVID-19 cases in the European Union–second update).

4. People involved

Human resources manager - Activities: responsible of the safety of all personnel

Panel leader - Activities: organisation and management of the tasting session and reporting

Assessors - Activities: conducting the organoleptic assessment sessions

Laboratory technicians - Activities: sample preparation

Facility management officer - Activities: transfer and cleaning of glasses

Cleaner - Activities: cleaning and sanitisation of the test room

Administrative personnel – Activities: traceability samples management

5. Personal Protective Equipment (PPE)

- Disposable latex or nitrile gloves.
- Face masks:
    - *FFP1 masks filtering ≥80% of aerosols (total inward leakage <22%).*
    - *FFP2 masks filtering at least 94% of aerosols (total inward leakage <8%).*
    - *FFP3 masks, filtering ≥99% of aerosols (total inward leakage <2%).*

6. Safety recommendations and applicable measures

Personal Protective Equipment (PPE)

- Face mask (FFP2 or FFP1)
- Disposable latex gloves or nitrile gloves

6.1 During sample receiving and test preparation

Staff in charge of preparing the samples and cleaning the equipment should use gloves and face masks at all times.

Panel leaders and staff involved in sample preparation are recommended to use FFP2 face masks, although FFP1 masks may be enough.

The furniture and booth surfaces should be cleaned before and after testing with any one of following:

- Odourless aqueous solution of ethanol (alcohol concentration more than 70%)
- H_2O_2 (0.5-3% v/v) solution
- Analogous methods to avoid the presence of fragrant residues that may affect assessor senses and sensitivity or interfere with the organoleptic assessment.

6.2. Equipment preparation

Glasses and glass covers for tasting should be washed at temperatures above 70°C (158°F).

Tasting glasses should be washed the day before analysis. It is recommended they dry in a stove at 90°C (194°F) where they can remain ready for tasting the following day.

When available, glasses can be kept in an UV sanitary closet.

6.3 Test room preparation

- The panel leader should keep the test room properly ventilated before the assessment and in between sessions, in order to ensure the air is properly cleared.
- This should be repeated at the end of the assessment to ensure the test room meets the hygienic requirements for further use.
- The central counter, cabins and chairs should be sanitised with an aqueous solution of ethanol (content higher than 70%).
- Each booth must be equipped with a disposable glass with a lid, a paper napkin, a closed bottle of water and the profile sheets needed for the test. Assessors should have a disposable cup with paper inserted inside to use as a spittoon and a disposable cup to rinse the mouth, thus limiting the spread of saliva in the environment and in the sink. The two glasses should be kept separate and used only for the given purpose, either as a spittoon or for rinsing.
- At the end of the tasting session, the facility management officer should enter the room with clean gloves and an FFP2 face mask, remove the glasses from the booths and transport them to the washing room on a trolley or tray. All disposable items should be disposed of properly.
- The cleaner should wear clean gloves and an FFP2 face mask at all times.

6.4 Assessors

- Hand washing should be reinforced before and after tasting, for health and safety reasons and to avoid any substance which may interfere with organoleptic assessment.
- Assessors should enter the room wearing a mask. They may wear clean disposable gloves (odourless) when carrying out the test.
- Assessors should take their place in the position reserved for them according to the panel leader’s instructions and begin the analysis.
- Physical contact should be avoided in social interactions.

- Assessors must not share pens or exchange documents.
- Social distancing should be maintained at the entrance and exit of the test room, according to the panel leader's instructions.
- Any unnecessary contact with furniture and equipment in the test room should be avoided. Assessors should only use what is necessary for the assessment.
- If required by laboratory safety procedures, each assessor may have their body temperature monitored with a special infrared thermometer.
- For the analysis, assessors should remove their masks and place them on a clean napkin on a clean surface. Assessors should put the mask back on again at the end of the assessment. Assessors must apply the latest revision of the procedure outlined in COI/T20/Doc. 15.
- Assessors should leave the test room according to the panel leader's instructions.

6.5 Tasting assessment procedure

Note: do not use air conditioning while tasting to prevent the spread of covid-19[1] with the exception of a prior ad hoc sanitisation of the split filters.

The panel leader should wear a face mask (FFP2) at all times so they can move around the test room freely.

Depending on the test room size and shape, available booths and distribution, the panel leader must decide the appropriate location of the assessors in the room, making sure there is enough room for 1m of social distancing[2] between them while the test is carried out.

Different scenarios could be considered. According to COI/T.20/Doc. No 6, IOC-recognised test rooms 'should be sufficiently spacious to permit the installation of ten booths and an area for preparing the samples'.

Booths can be mobile:

> *Note: Ideal conditions are described. However, if it were not possible to have such an installation solely for sensory analyses, the tests could be performed in premises that meet the minimum conditions described (lighting, temperature, noise, odors) by setting up mobile booths made up of folding elements in such a way that, at the very least, they isolate the tasters from each other.*[3]

And can be separate, meaning the test room size and shape provides enough distance between testers. But in most cases, there is not enough space for the recommended social distancing (1m[1]). When it is not possible to ensure 1m of social distancing between testers, and the panel cannot carry out the assessment together, this guide recommends using alternate booths to ensure the 1m minimum of

[1] https://wwwnc.cdc.gov/eid/article/26/7/20-0764_article

[3] COI/T20/Doc. No 6

social distancing[4] between assessors. In this way, the physical booth dividers and the individual booth shape should make the environment safe for assessors.

The panel leader may divide the tasting panel into two or more groups to analyse the samples in their corresponding sessions. The second group should not enter the room until the first group has finished and left the test room. Each booth should be cleaned before an assessor enters.

Some examples of organising a tasting session when is not possible to ensure 1m of social distancing between testers are described below:

Example 1: More than 8 booths in the test room (e.g. in the case of IOC-recognised panels).

Each booth should have a clearly visible label with its assigned number.

Booths could be numbered as shown in Annex I, Fig.1:

- *1st booth row: from number 1.*
- *2nd booth row and consecutives: from next number following on from the last booth in the previous row.*

The panel leader should also assign each assessor with a number that corresponds to their booth, using odd numbers for the odd assessor groups and even numbers for the even assessor groups. Assessors should enter and exit the test room at the panel leader's signal only.

The first group should enter the test room individually and use the odd numbered booths. The entrance should start with the assessor using the furthest booth from the entrance, and so on. Assessors should exit in the opposite way, starting with the assessor nearest to the exit. Then, the next group of assessors should enter the test room and occupy the even booths and so on with other groups.

Example 2: Less than 8 booths in the test room (e.g. for non-IOC recognised panels whose test room is smaller and has less booths) where assessors should take turns testing samples but often using the same booth.

For this scenario, booths could be numbered as shown in Annex I Fig. 2:

- *1st turn: booths 1, 3 and 5.*
- *2nd turn: booths 2 and 4.*
- *3nd turn: booths 6, 7 and 8.*

In all cases, the panel leader should decide the order and location of the assessors, following the general recommendations of this guide. All equipment, surfaces and booths must be cleaned before and after each use, as indicated in Point 6.1.

When the assessment is finished, assessors should leave the tasting glasses in the heating device and let the panel leader collect the profile sheets.

[4] The individual booth dividers serve as a physical barrier for the pathogen, meaning less space is required for social distancing.

Once the profile sheets have been reviewed, as in a normal tasting session, the panel leader should instruct assessors to repeat the analysis of a particular sample if necessary. Otherwise, the panel leader should conclude the assessment.

6.6 External staff

In the event of unrepeatable analyses in the presence of party experts, the latter will only be admitted to the test room before the session starts so they can view the equipment and organise the test. They will therefore attend the tasting session itself from outside the test room. Party experts must follow the safety procedures of the laboratory, conduct temperature screening, and wear FPP2 masks and protective gloves.

7. Annexes information

7.1 Definition of the term 'contact person'

A contact person is any person who has had contact with someone who has covid-19 (Table 1) ranging from 48 hours before the onset of symptoms to 14 days after the onset of symptoms. If the infected person did not present symptoms, a contact person is defined as someone who has had contact with a case ranging from 48 hours before the positive sample was taken, to 14 days after the sample was taken. The associated risk of infection depends on the level of exposure, which will, in turn, determine the type of management and monitoring (Table 1).

Table 1. Types of management and monitoring

High-risk Exposure (close contact)	Low-risk Exposure
A person:	**A person:**
- having had face-to-face contact with a COVID-19 case within two metres for more than 15 minutes;	- having had face-to-face contact with a COVID-19 case within two metres for less than 15 minutes;
- having had physical contact with a COVID-19 case;	- who was in a closed environment with a COVID-19 case for less than 15 minutes;
- having unprotected direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on);	- travelling together with a COVID-19 case in any mode of transport*;
- who was in a closed environment (e.g. household, classroom, meeting room, hospital waiting room, etc.) with a COVID-19 case for more than 15 minutes;	- a healthcare worker or other person providing care to a COVID-19 case, or laboratory workers handling specimens from a COVID-19 case, wearing the recommended PPE.
- in an aircraft, sitting within two seats (in any direction) of the COVID-19 case, travel companions or persons providing care, and crew members serving in the section of the aircraft where the index case was seated [23] (if severity of symptoms or movement of the case indicate more extensive exposure, passengers seated in the entire section or all passengers on the aircraft may be considered close contacts);	
- a healthcare worker or other person providing care to a COVID-19 case, or laboratory workers handling specimens from a COVID-19 case, without recommended PPE or with a possible breach of PPE.	

* Except if sitting in an aircraft as specified in the relevant point in the left column.

7.2 Surfaces cleaning

According to a recent study, the causal agent of covid-19 (SARS-CoV-2) was shown to persist for up to 24 hours on cardboard and up to several days on hard surfaces such as steel and plastics in experimental settings (e.g. controlled relative humidity and temperature)[5]. There is no evidence that

[5] https://www.nejm.org/doi/pdf/10.1056/NEJMc2004973?articleTools=true

contaminated packages, which have been exposed to different environmental conditions and temperatures, transmit the infection. Nonetheless, to address concerns that virus present on the skin might be able to transfer to the respiratory system (for example by touching the face), persons handling packaging, including consumers, should adhere to the guidance of public health authorities regarding good hygiene practices, including regular and effective hand-washing[6].

7.3 Food source of contamination

According to food safety agencies in EU Member States, it is very unlikely that you can catch covid-19 from handling food. In addition, the European Food Safety Authority stated that there is currently no evidence that food is a likely source or route of transmission of the covid-19 virus[7]. No information is currently available on whether the virus responsible for covid-19 can be present on food, survive there and infect people. However, despite the large scale of the pandemic, there has been no report of transmission of covid-19 via consumption of food to date. There is therefore no evidence that food poses a risk to public health in relation to covid-19. The main mode of transmission for covid-19 is considered to be from person to person.

7.4 Assessors preventive health management

A significant number of patients who test positive for covid-19 report a sudden loss of their senses of smell or taste. This can happen even when they do not experience the more common symptoms, such as a fever, a dry cough or shortness of breath that the U.S. Centers for Disease Control and Prevention advise people to look for.

If the panel leader finds[8] a significative loss of perception by an assessor, they should inform the human resource manager of the laboratory.

7.4.1 Reference

https://news.illinois.edu/view/6367/807933 (Loss of senses of smell, taste could identify covid-19 carriers)

https://www.scientificamerican.com/article/why-covid-19-makes-people-lose-their-sense-of-smell/

Rachel Kaye, C. W. David Chang, Ken Kazahaya, Jean Brereton and James C. Denneny III (2020) covid-19 Anosmia Reporting Tool: Initial Findings. Otolaryngology–Head and Neck Surgery 1–3.

[6] https://www.ecdc.europa.eu/sites/default/files/documents/Environmental-persistence-of-SARS_CoV_2-virus-Options-for-cleaning2020-03-26_0.pdf

[7] https://www.efsa.europa.eu/en/news/coronavirus-no-evidence-food-source-or-transmission-route

[8] COI/T20/Doc.14 Rev.5

Annex I

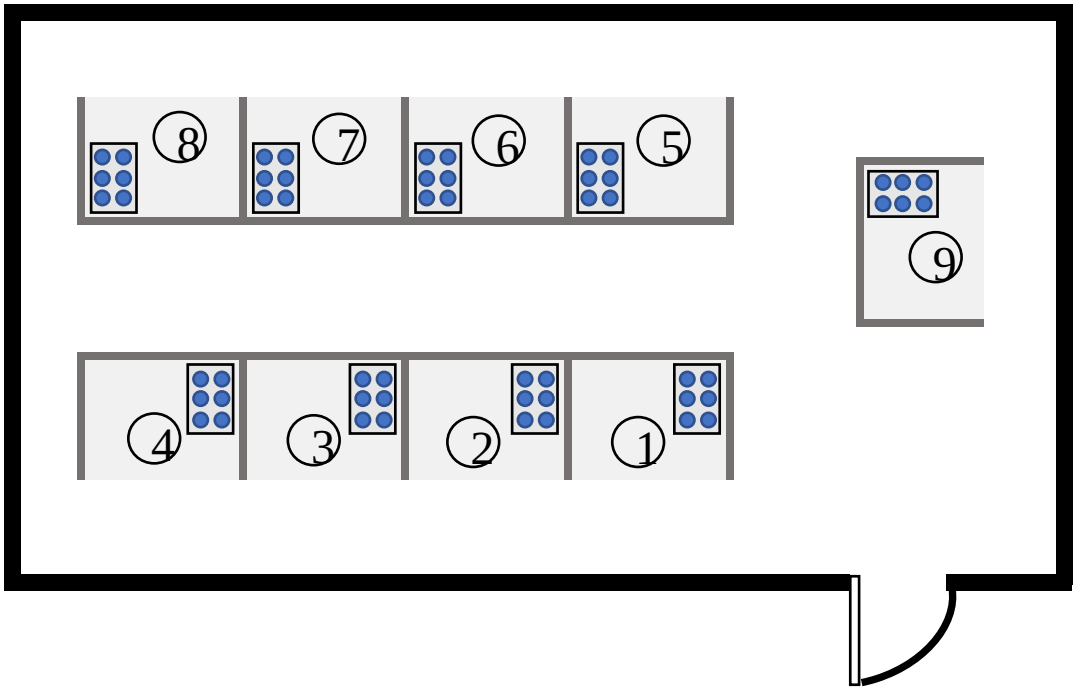

Figure 1. Example of booth numbering (if there are more than 8 booths in the test room).

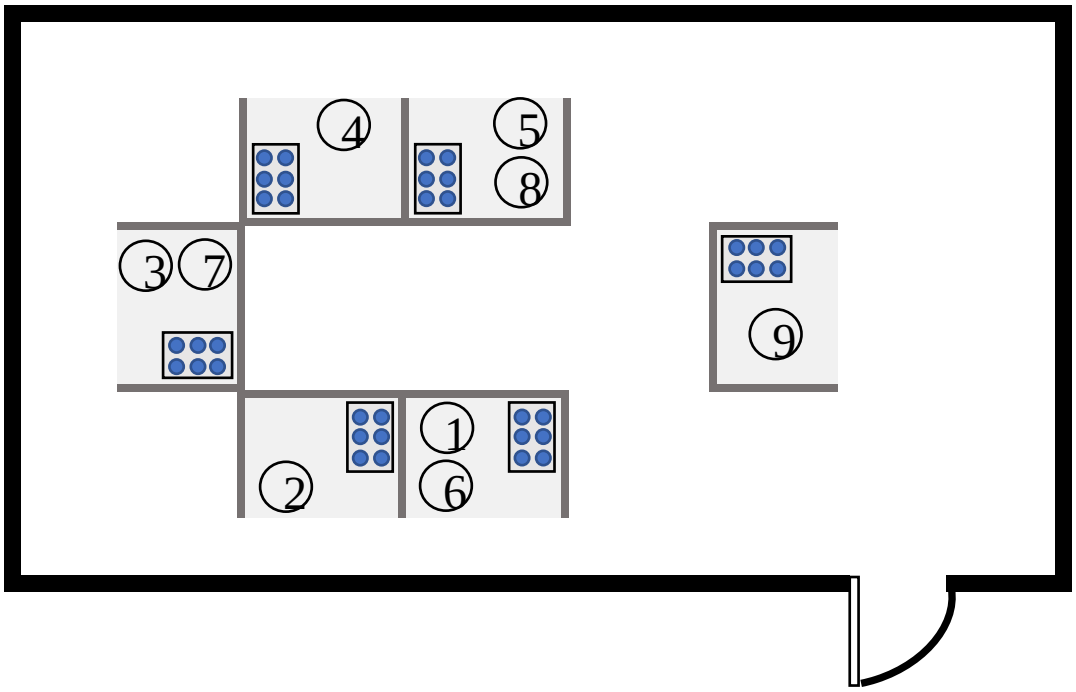

Figure 2. Example of booth numbering (if there are less than 8 booths in the test room).