

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 109
Issue: 2012 II-001**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report - Constitution and Bylaws/Procedures Committee

Issue you would like the Conference to consider:

The 2010 - 2012 Constitution and Bylaws/Procedures Committee has addressed recommendations from the 2010 Biennial Meeting and from the Executive Board and have prepared a report summarizing its work.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the Constitution and Bylaws and Conference Procedures.

Recommended Solution: The Conference recommends....:

acknowledgement of the submitted report and appreciation for the work of the 2010 - 2012 Constitution and Bylaws/Procedures Committee members.

The Conference further recommends that the Constitution and Bylaws/Procedures Committee be assigned the following charges:

Charge: Continue work on charges previously assigned by the Executive Board to:

1. Research "scope" of Executive Board authority concerning direct approval of policy and procedures changes by the Executive Board rather than approval through Issue submission at the Conference Biennial Meetings.
2. Clarify the "scope" of activities assigned to committees that includes:
 - a) Development of a process of expanding or adding committee charges between biennial meetings.
 - b) Clarification of language in Conference Procedures Section VIII (D), (F.5.), (H.2.).
3. Clarify what the Executive Board may, under the Constitution and Bylaws and Conference Procedures, do with extracted Issues.

Charge: Review and consolidate the existing *Conference for Food Protection Constitution and Bylaws*, *Conference for Food Protection Procedures* and *Conference for Food Protection Biennial Meeting Manual*, position descriptions, conference policies, etc., into a comprehensive "*Conference for Food Protection Manual*".

Charge: Report back to the Executive Board; and, submit recommendations as Issues at the 2014 Biennial Meeting.

Submitter Information:

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Attachments:

- "Attachment A: Constitutions and Bylaws/Procedures Committee Final Report"
- "Attachment F: Constitutions and Bylaws/Procedures Committee Roster"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

**Conference for Food Protection
Constitution and Bylaws/Procedures Committee FINAL Report**

COMMITTEE NAME: Constitution and Bylaws/Procedures Committee

COUNCIL (I, II, or III): Executive Board

DATE OF REPORT: December 17, 2011

SUBMITTED BY: Lee M. Cornman, Chair

COMMITTEE CHARGE(s):

Charges Established by Issue 2010 II-035:

The Constitution and Bylaws (C&B) Committee develop guidelines regarding committee structure, participant responsibilities, membership size, and constituency representation and report back to the Executive Board no later than the August 2011 Executive Board Meeting with recommendations regarding proposed changes to policies and/or governing documents.

Constitutional Charges, as stated in Article XV, Section 3 of the Constitution:

1. Submit recommendations to improve Conference administrative functions through proposals to amend the Constitution and Bylaws.
2. Review proposed memorandums of understanding and ensure consistency among the memorandums of understanding, the Conference Procedures manual, the Constitution and Bylaws and other working documents.
3. Report all recommendations to the Board prior to Council II deliberations.
4. Follow the direction of the Board.

Charges Established by the Executive Board:

1. Add a "statement of neutrality" to the Council Chair and Vice-Chair position description.
2. Clarify the use of "Conference" and "Biennial Meeting" in the Constitution, Bylaws, and Procedures.
3. Research "scope" of Executive Board authority concerning direct approval of policy and procedures changes by the Executive Board rather than approval through Issue submission at the Conference Biennial Meetings.
4. Clarify the "scope" of activities assigned to committees that includes
 - a) Development of a process of expanding or adding committee charges between biennial meetings
 - b) Clarification of language in Conference Procedures Section VIII (D), (F.5.), (H.2.).
5. Clarify what the Executive Board may, under the Constitution and Bylaws and Conference Procedures, do with extracted Issues.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

Issue 2010 II-035: The Constitution and Bylaws Committee develop guidelines regarding committee structure, participant responsibilities, membership size, and constituency representation and report back to the Executive Board no later than the August 2011 Executive Board Meeting with recommendations regarding proposed changes to policies and/or governing documents.

Status: Research was conducted on minimum/maximum committee membership guidelines from other groups including Association of Food and Drug Officials (AFDO), International Association of Food Protection (IAFP), National Environmental Health Association (NEHA), etc. Most described a minimum number of committee members without specifying a maximum number. The Constitution, Bylaws/Procedures (C&B) Committee discussed the language currently provided in CFP Committee Member position description as follows:
Committee membership is generally composed of at least eleven (11) members: the Chair, Vice Chair and two (2) representatives from state regulatory, two (2) representatives from local regulatory, two (2)

representatives from industry, and one (1) from an academic institution, and one (1) consumer representative, and one (1) representative from a federal agency. This language essentially defines a minimum committee number with constituency structure.

A proposal was made that consideration be given to using the current CFP Council structure and constituencies as defined in the Constitution and Bylaws (Article XI, Section 2) as a general guide for determining a maximum committee size and structure for committees. If a Committee Chair does not receive sufficient applicants in the appropriate constituencies, they may confer with the Council Chair to seek applicants from the Conference membership making every reasonable effort to maintain constituency balances. (Committee membership discussion is limited to Council committees only (i.e., those established or re-created following every Biennial Meeting) – membership on Standing Committees or Executive Ad Hoc Committees is defined by the CFP Executive Board.)

Active discussion resulted in a mixed opinion on providing a minimum/maximum committee membership size. The C&B Committee was in agreement to the minimum size of 11 voting members as currently defined by the CFP Committee Member position description. However, there was divergence as to defining a maximum number of committee members. Several different solutions to this issue were offered by C&B Members that would include participation from all Conference Members who apply for a committee membership. These recommendations were offered to the Executive Board for review, for discussion and recommendations for next steps. The Executive Board deliberated this issue and requested that the committee continue to deliberate this issue and provide a single recommended action for determining the maximum size of a council committee along with provisions for future turnover in council committee membership.

After further review and deliberation, the committee drafted a proposed revision to the Constitution and Bylaws that establishes a minimum of 11 voting members and a maximum of 23 voting members for council committees. Any volunteers for a committee beyond the 23 voting members will be included as “at-large” non-voting members. The maximum size voting membership is the Committee Chair, Vice Chair, four (4) representatives from state regulatory, four (4) representatives from local regulatory, eight (8) representatives from industry, one (1) from an academic institution, one (1) consumer representative, and three (3) elective representatives that may be selected from any Conference constituency. The proposed language noted below includes procedures for managing unbalanced constituencies, member changes in constituencies, and changes to membership between Biennial Meetings.

Additionally, a proposal was received from FDA representatives that Section VIII, Paragraph D of the *CFP Conference Procedures* be moved into Article XIV, Section 1, of the *CFP Constitution and Bylaws* with minor revisions. This amendment is also consistent with the charge specified in Issue 2010 II-035 and relevant to identification of committee membership. This language clarifies the appointment of committee chairs and committee members with Board approval and the appointment of Federal participants to each committee as a non-voting member. Language amendment is provided below:

See Issue titled: ***Council Committee Size and Constituency.***

CFP Conference Procedures
VIII. Committees

A. - C. No change.

D. ~~Appointment of Members~~

- ~~1. The incoming Council Chairs appoint the Chairs of each Committee formed within their Council with the concurrence of the Conference Chair. The Conference Chair will confirm the appointment of the Committee Chair and then notify the person of their appointment. Once confirmed, the Committee Chair will select the remaining members of the Committee and submit them to the Conference Chair for final Board approval. Accepting a committee chair or member assignment requires a commitment of time and~~

resources as described in the Constitution and Bylaws.

2. ~~Federal participants (FDA/USDA/CDC) may appoint a member and an alternate for each Committee. The member participates in discussion but does not vote. The alternate may act in the member's place if the member is unable to attend.~~

E. - J. No language change – renumbering only as paragraphs D through I.

CFP Constitution and Bylaws

Article XIV Committees

Section 1. All appointments to Council Committees shall be made to provide a balance in representation of the stakeholders in the particular matter under consideration.

Subsection 1. ~~The incoming Council Chairs appoint the Chairs of each Committee formed within their Council with the concurrence of the Conference Chair. The Conference Chair will confirm the appointment of the Committee Chair and then notify the person of their appointment. Once confirmed, the Committee Chair will select the remaining members of the Committee and submit them to the Conference Chair for final Board approval.~~

Subsection 2. ~~Federal participants (FDA/USDA/CDC) may appoint a member and an alternate for each Committee. The member participates in discussion but does not vote. The alternate may act in the member's place if the member is unable to attend.~~

Section 2. – 5. No change.

Article XV Duties of the Committees

Section 8. ~~Council Committee Size and Constituency: Committee membership discussion is limited to Council committees only. Membership on Standing Committees or Executive Board Ad Hoc Committees is defined by the CFP Executive Board.~~

Subsection 1. ~~Committee size.~~

~~Voting membership for council committees should be comprised of at least eleven (11) voting members with a maximum of no more than twenty-three (23) voting members.~~

~~**a.** Minimum size: Voting membership for a minimum size committee is the Chair, Vice Chair, two (2) representatives from state regulatory, two (2) representatives from local regulatory, two (2) representatives from industry, one (1) from an academic institution, one (1) consumer representative, and one elective (1) representative which may be selected from any Conference constituency.~~

~~**b.** Maximum size: Voting membership for a maximum size committee is the Chair, Vice Chair, four (4) representatives from state regulatory, four (4) representatives from local regulatory, eight (8) representatives from industry, one (1) from an academic institution, one (1) consumer representative, and three elective (3) representatives that may be selected from any Conference constituency.~~

~~**c.** Any committee comprised of membership numbers between the minimum and maximum shall make every reasonable effort to maintain constituency balances.~~

Subsection 2. ~~The Chair and Vice Chair of a council committee may be selected from any of the Conference constituencies as approved by the Council Chair and the Executive Board, provided each is from a different constituency. If a Committee Chair does not receive sufficient volunteers in the appropriate constituencies, they shall confer with the Council Chair to seek~~

volunteers from the Conference membership making every reasonable effort to maintain constituency balances. The Committee Chair, in conference with the Council Chair and/or Executive Board, shall have the flexibility to fill vacancies in the voting membership with unbalanced constituency representation if deemed necessary to reach a minimum of 11 voting committee members. All proposed committee members must be approved by the Executive Board in accordance with Article XIII, Section 6, Subsection 4 of the Constitution and Bylaws.

Subsection 3. A maximum of 23 voting members are permitted on a council committee. All volunteers not selected for a voting position shall be offered an “at-large” non-voting position on the committee. There is no limit to the number of at-large non-voting members that may participate. At-large members will be included and allowed to participate in all committee functions, including but not limited to, meetings, conference calls, emails, deliberations, research and activities, but will not have an individual vote on committee actions. All voting members and at-large non-voting members shall be identified as such on the committee roster along with their respective constituency.

Subsection 4. In the event a council committee voting member departs such committee during a biennial cycle, an at-large member of the same constituency as the departing member shall be selected by the Council Chair to fill the vacancy, subject to approval by the Council Chair and Executive Board in accordance with Article XIII, Section 6, Subsection 4 of the Constitution and Bylaws. If a council committee voting member changes constituency during a biennial cycle, and there is no vacancy in that member's new constituency, the member will need to transition from service as a voting member on that committee and may continue to serve as an at-large non-voting member for the remainder of the biennial cycle. This transition will occur upon notification to the Committee Chair.

Subsection 5. The Chair of a council committee that continues over more than one biennial cycle shall assess the immediate previous committee membership to ensure at least 50% of the ongoing committee's voting membership are new members that did not serve as voting members on the immediate previous committee. This will ensure that an increased number of at-large members or others have an opportunity to participate as a voting member over time when there are a large number of volunteers.

The 2010 – 2012 Constitution and Bylaws/Procedures Committee also looked at the organization's governing documents to develop definitions for each of the existing constituencies as identified in Article IV of the *Constitution and Bylaws*. The Committee has created definitions for each of the existing constituencies that represent the Conference for Food Protection membership. Current constituencies include: Regulatory – Local, State, District/Territory and Federal; Industry – Retail, Food Service, Processing and Vending; Academia; and Consumer. While each constituency is identified in the *Conference for Food Protection Constitution and Bylaws* by title, these constituencies do not currently have a clear definition for what comprises each.

Additionally, the Committee has sought to create definitions for several new constituencies that incorporate the expanding types of members who seek to be active participants in the Conference process. The largest majority of current members in the Conference for Food Protection are categorized as “other” because they do not fall within the existing definitions for Conference constituencies. New constituencies for consideration by the Conference include: Food Industry Support, Emeritus (retiree), and Student; and, the Vending Industry constituency has been expanded to include the Distribution Food Industry as a shared constituency titled “Vending and Distribution Food Industry”.

Creation of the new constituencies does not alter representation to the CFP Executive Board, the Councils, or to the Conference Voting Delegates as currently prescribed in the *CFP Constitution and Bylaws*. See language noted below and Issue titled: ***Definitions for Conference Constituencies***.

Article III Registration and Membership

Section 5. Membership in the Conference is classified into constituencies that are representative of the key stakeholder groups which support the objectives of Article I and facilitate the requirements of Article IV. The Conference constituencies are defined as follows:

Subsection 1. Regulatory is comprised of those officers, agents or authorized representatives having authority over the regulation of food establishments, production, processing, vending, or distribution, or has oversight for prevention of foodborne illness in accordance with rule and/or law in their respective governmental jurisdiction. Sub-categories of this constituency include:

a. Local Regulator = government employee or agent representing a territorial division of local government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

b. State Regulator = government employee or agent representing a territorial division of state government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

c. Federal Regulator = government employee or agent representing a program or agency of the Federal Government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

d. District/Territory Regulator = government employee or agent representing the U.S. District of Columbia or one of the six U.S. Territories with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

Subsection 2. Industry is comprised of those employees, agents or executives representing business entities that operate food establishment(s), production, processing, vending, or distribution; or, providers of an industry related service to such food operations; or, representatives of a professional organization or trade association that promotes, supports and/or markets to/for the food industry or its related services. Sub-categories of this constituency include:

a. Food Service Industry = employees, agents or executives representing business entities that operate food service establishments. Examples include, but are not limited to, restaurants of all sizes/types/styles of service, caterers, military food service, institutional and other health care food service, schools and university food service, common carrier food service (planes, trains, etc.), corporate food service operations, and government food service.

b. Retail Food Industry = employees, agents or executives representing business entities that operate retail food establishments. Examples include, but are not limited to, grocery stores, supermarkets, convenience stores, retail pharmacies, produce markets, roadside stands, department stores, warehouse sales clubs, seafood markets, retail bakeries, military base PX/groceries, and liquor stores.

c. Processing Food Industry = employees, agents or executives representing business entities that manufacture, process, package or label food items for wholesale sale. Examples include, but are not limited to, commercial food manufacturing, canning, packaging, commercial bakeries, commercial meat slaughter and processing, packing houses and distribution centers, farming and agricultural processing and packing operations, ice processing, and packing plants.

d. Vending and Distribution Food Industry = employees, agents or executives representing business entities that own and/or operate food companies that vend or distribute food either

wholesale or retail. Examples include, but are not limited to, coffee and food vending service companies, service companies, commissaries, food supply chain operators, wholesale distributor, shipping lines, brokers, equipment manufacturers, and suppliers of products and services to operating service companies.

Subsection 3. Food Industry Support = employees, agents or executives representing business entities that provide direct or support services to food service establishments, retail food establishments, processing food operations, vending and distribution food operations. Examples include, but are not limited to, professional organizations, trade associations, pest control companies, auditing firms, standards associations, consultants, cleaning and sanitation management operations, training and/or testing companies or services, equipment and supply operations, software and technology, dieticians or dietary managers, media and legal representatives.

Subsection 4. Academia = academic professionals employed by a college or university involved in education or research involving food sciences, food operations, or food safety. Examples include, but are not limited to, professors, adjunct instructors, researchers, teaching assistants, and extension agents.

Subsection 5. Consumer = employees, agents or executives representing consumer advocacy organizations supporting food safety, food wholesomeness, allergen awareness, food policy matters and food standards and guidelines.

Subsection 6. Emeritus = members retired or honorably discharged from full-time work and no longer receiving compensation for work related to the Conference's mission. This constituency is designed for those professionals who, prior to retirement, were members of any Conference stake holder group in good standing of the Conference for Food Protection for at least three biennial cycles (6 years). Previous membership does not have to be in contiguous biennial cycles. An emeritus member may participate as an attendee/observer in all usual Conference functions such as attending the Biennial Meeting, including workshops, Council deliberations, Assembly of Delegates, and social functions. Emeritus members may serve as a member of a Council committee, as a Council Committee Chair and participate and vote in constituency caucus meetings. The Executive Board may elect to assign an emeritus member to participate in other Conference related activities.

Subsection 7. Student = any student enrolled in a two-year, four-year, or graduate program in a college or university involving food sciences, food operations or food safety. A student member may participate as an attendee/observer in all usual Conference functions such as attending the Biennial Meeting, including workshops, Council deliberations, Assembly of Delegates, and social functions. Student members may serve as a member of a Council committee. The Executive Board may elect to assign a student member to participate in other Conference related activities.

Charges Established by the Executive Board:

1. Add a "statement of neutrality" to the Council Chair and Vice-Chair position description.

Status: Essentially, this is an agreement by Council Chairs and Vice Chairs to refrain from lobbying any particular issue or expressing a personal opinion about any particular issue during any Council Sessions or open Conference forum at the Biennial Meetings. Council Chairs/Vice Chairs have been verbally agreeing to maintain "neutrality" during the proceedings of the Biennial Meetings since 2006 and this proposal formalizes that agreement. Conditions are provided where the individuals in these positions may express a personal opinion during Caucus Meetings or during Council deliberation provided the Chair/Vice-Chair has officially relinquished their chair in accordance with Roberts Rules of Order. Newly proposed language is noted below; see Issue titled: **Statement of Neutrality for Council Chair / Council Vice-Chair,**

and Attachment B: Council Chair Position Description Neutrality Statement, and Attachment C: Council Vice-Chair Position Description Neutrality Statement for the proposed full language of each.

Council Chair Neutrality

- In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Chair during the biennial conference:
 - Outside the Council deliberations, the Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.
 - May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
 - May offer personal opinions in the following situations:
 - I. Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Chair.
 - II. During Council deliberations, only when one's position as Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

Council Vice Chair Neutrality

- In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Vice Chair during the biennial conference:
 - Outside the Council deliberations, the Vice Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.
 - May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
 - May offer personal opinions in the following situations:
 - I. Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Vice Chair.
 - II. During Council deliberations, only when one's position as Vice Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

2. Clarify the use of "Conference" and "Biennial Meeting" in the Constitution, Bylaws, and Procedures.

Status: The 2010 – 2012 Constitution and Bylaws Committee has reviewed the *Conference for Food Protection Constitution and Bylaws* and the *Conference for Food Protection Procedures* documents to identify where the terms "Conference", "Conference for Food Protection" and "Biennial Meeting" have been used interchangeably or incorrectly. These documents have been expanded and revised over the years with numerous writers/editors. As a result, there are locations within each document where clarification is needed to accurately represent whether a portion of text refers to the Conference for Food Protection as the organization or, refers to the Conference of Food Protection as the Biennial Meeting, and vice-versa. An in-depth review was completed to discern the meaning of each passage and provide the appropriate terminology. See Issue titled: ***Clarification of Terminology in Conference Governing Documents*** and Attachment D: *CFP Constitution and Bylaws / Procedures with Editorial Corrections* for the full language with annotated changes.

3. Research "scope" of Executive Board authority concerning direct approval of policy and procedures changes by the Executive Board rather than approval through Issue submission at the Conference Biennial Meetings.

- 4. Clarify the “scope” of activities assigned to committees that includes**
- a) Development of a process of expanding or adding committee charges between biennial meetings**
 - b) Clarification of language in Conference Procedures Section VIII (D), (F.5.), (H.2.).**

5. Clarify what the Executive Board may, under the Constitution and Bylaws and Conference Procedures, do with extracted Issues.

Status: The Constitution and Bylaws/Procedures Committee was unable to complete the charges identified in numbers 3 – 5 above and will include these as continuation charges for the 2012 – 2014 Constitution and Bylaws/Procedures Committee as Executive Board charges.

Recommended Charges for 2012 – 2014 Constitution and Bylaws/Procedures Committee:

Along with the above Executive Board continuation charges noted above, the Constitution and Bylaws/Procedures Committee proposes development of a 2012 Issue charging this committee with incorporating the *Constitution and Bylaws*, the *Conference Procedures*, the *Conference Biennial Meeting Manual*, position descriptions, Conference policies, etc., into a comprehensive “Conference for Food Protection Manual” that would be divided into multiple “chapters” including the documents listed above and any other relevant items, each as a separate chapter. The *Constitution and Bylaws* will remain as a stand-alone document, potentially as Chapter 1 of the manual, with each of the other complimentary Conference documents as parts of an all-inclusive handbook that can be indexed and cross-referenced. There are areas for improvement in each of these documents (chapters) in the conformance of terminology and language between documents. Also, combining the documents into one master manual will help guarantee that any updates or corrections are performed across the entire manual to ensure that documents match accordingly. The combined and cross-referenced document can be posted to the CFP website in a format similar to the FDA Food Code where each chapter, table of contents, index, etc. shows as an individual link that is part of the whole CFP Manual. See Issue titled: ***Merger and Conformance of CFP Governing Documents.***

REQUESTED ACTION:

Committee submitted Issues =

- Report - Constitutions and Bylaws/Procedures Committee (with Attachments A and F)
- Council Committee Size and Constituency
- Definitions for Conference Constituencies
- Statement of Neutrality for Council Chair / Council Vice Chair (with Attachments B and C)
- Clarification of Terminology in Conference Governing Documents (with Attachment D and E)
- Merger and Conformance of CFP Governing Documents

Committee submitted Content Documents =

- Attachment A: Constitution and Bylaws/Procedures Committee Final Report
- Attachment B: Council Chair Position Description Neutrality Statement
- Attachment C: Vice-Council Chair Position Description Neutrality Statement
- Attachment D: Editorial Revision to CFP Guidance Documents – Bylaws
- Attachment E: Editorial Revision to CFP Guidance Documents - Procedures

COMMITTEE MEMBER ROSTER:

Attachment F: Constitutions and Bylaws/Procedures Committee Roster

Committee Name:

Committee Name: Constitution and Bylaws/Procedures

Attachment F

| Last Name | First Name | Position (Chair/Member) | Constituency | Employer | Address | City | State | Zip | Telephone | Email |
|-----------|------------|-------------------------|--------------|-----------------------------|-----------------------------|--------------|-------|----------------|--------------|--|
| Cornman | Lee | Chair | State | FL Dept. of Ag & Cons. Svcs | 3125 Conner Blvd, MS C-18 | Tallahassee | FL | 32399 -1650 | 850.245.5595 | lee.cornman@freshfromflorida.com |
| Hendy | Ruth | Vice-Chair | State | Texas DSHS | PO Box 149347 | Austin | TX | 78714 | 512.834.6753 | ruth.hendy@dshs.state.tx.us |
| Hale | Aggie | Member | State | FL Dept. of Ag & Cons. Svcs | 3125 Conner Blvd, MS C-18 | Tallahassee | FL | 32399 -1650 | 850.245.5520 | aggie.hale@freshfromflorida.com |
| Everly | Vicki | Member | Other | Self - Consultant | 41407 Millinium Terrace | Fremont | CA | 94538 | 510.501.0417 | vicki.everly2@gmail.com |
| Hardister | Bill | Member | Local | Mecklenburg Co. HD | 700 N Tryon St., STE 208 | Charlotte | NC | 28202 | 704.335.5533 | bill.hardister@mecklenburgcountync.gov |
| Mitchell | Cassandra | Member | Local | Fairfax Co HD | 10777 Main St., STE 111 | Fairfax | VA | 22030 | 703.246.8438 | cassandra.mitchell@fairfaxcounty.gov |
| Levee | Terry | Member | Industry | Food Marketing Institute | 2345 Crystal Drive, Ste 800 | Arlington | VA | 22202 | 202.220.0659 | tlevee@fmi.org |
| Grover | Steven | Member | Industry | Steak 'N Shake | 36 S Pennsylvania St | Indianapolis | IN | 46204 | 317.656.4580 | steven.grover@steaknshake.com |
| Ferko | Frank | Member | Industry | US Foodservice | 6133 N River Road | Rosemont | IL | 60018 | 847-232-5896 | frank.ferko@usfood.com |
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| Liggans | Girvan | FDA Consultant | Federal | FDA | 5100 Paint Branch Pkwy | College Park | MD | 20740 | 301.436.2937 | girvan.liggans@fda.hhs.gov |
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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 110
Issue: 2012 II-002**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Statement of Neutrality for Council Chair / Council Vice-Chair

Issue you would like the Conference to consider:

In response to a directive from the Executive Board, the 2010 - 2012 Constitution and Bylaws/Procedures Committee has created language to further clarify the role of Council Chairs and Council Vice-Chairs during their service at a Biennial Meeting. New language has been added to the position descriptions directing each to maintain their neutrality with regards to any specific issue during Council deliberations.

The Chair and Vice-Chair shall refrain from publicly voicing a personal opinion on an issue before the Council they serve. They may answer questions related to issues if the intent is to educate or provide clarification. Personal opinions on a specific issue may only be offered outside of council deliberations if clearly identified as a personal opinion or, during deliberations if their position as Chair/Vice Chair has been officially relinquished in accordance with Robert's Rules of Order.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the Constitution and Bylaws and Conference Procedures.

Recommended Solution: The Conference recommends...:

the addition of a statement of neutrality (noted below; new language underlined), as developed by the Constitution and Bylaws Committee, in the position descriptions for Council Chair and Council Vice-Chair.

Council Chair Neutrality

In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Chair during the biennial conference:

- Outside the Council deliberations, the Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.

- May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
- May offer personal opinions in the following situations:
 - Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Chair.
 - During Council deliberations, only when one's position as Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

Council Vice Chair Neutrality

In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Vice Chair during the biennial conference:

- Outside the Council deliberations, the Vice Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.
- May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
- May offer personal opinions in the following situations:
 - Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Vice Chair.
 - During Council deliberations, only when one's position as Vice Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

Submitter Information:

Name: Lee M. Cornman, Chair
 Organization: Constitutions and Bylaws Committee
 Address: FL Dept. of Agriculture and Consumer Services 3125 Conner Blvd. MS C-18
 City/State/Zip: Tallahassee, FL 32399
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Attachments:

- "Attachment B: Council Chair Position Description Neutrality Statement"
- "Attachment C: Council Vice-Chair Position Description Neutrality Statement"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

CONFERENCE FOR FOOD PROTECTION COUNCIL CHAIR Position Description

At the end of the Conference for Food Protection (CFP) biennial meeting, each Council Vice Chair assumes the position of Council Chair subject to Conference Chair appointment and Executive Board (Board) approval. The Council Chair ensures the Council responsibilities are carried out during the two years between biennial meetings and manages the Council deliberations during the biennial meeting.

Responsibilities and Duties

- Supports the objectives of CFP as stated in Article I of the *Constitution and Bylaws*.
- Has a thorough knowledge of the *Constitution and Bylaws*, *Conference Procedures*, and *Biennial Meeting Information Manual*.
- Has a working knowledge of *Robert's Rules of Order/Parliamentary Procedure*.
- Attends all CFP Board meetings.
- Supervises and trains the Council Vice Chair in the execution of all duties assigned to the Council Chair.
- Supervises the formation and functioning of committees assigned to the Council:
 - Receives committee sign-up sheets at the close of the biennial meeting.
 - Selects Committee Chairs within sixty (60) days of the biennial meeting and submits their names to the Conference Chair for Board approval.
 - Assists Committee Chairs in the selection of committee members, ensures that the committee membership is representative of CFP, and submits the membership list to the Board for approval no later than the fall Board meeting following the biennial meeting.
 - Supervises the activities of all committees assigned to the Council to ensure that the assignments of the biennial meeting are being handled in a timely fashion.
 - Assures committee reports are submitted in a timely manner so a Council summary report can be written and submitted it to the Conference Chair and Executive Director at least thirty (30) days prior to each Board meeting.

- Ensures final committee report(s) and Issue(s) are completed and submitted to the Issues Chair no later than the Issue submission deadline, seventy-five (75) days prior to the biennial meeting.
- Ensures that the Issues assigned to the Council are handled during the two years between Conferences.
- Prepares a written Council summary report on the status of assigned Issues and committee activities and submits the report to the Conference Chair and Executive Director at least thirty (30) days prior to each Board meeting.
- Establishes Council membership as set forth in Article IX of the *Constitution and Bylaws*:
 - Reviews Council applications as submitted during the summer preceding the biennial meeting.
 - Selects Council members ensuring balanced representation as described in Article IX and the Appendix of the *Constitution and Bylaws*
 - Provides the names of nominated Council members and alternates for appointment by the Conference Chair and approval by the Board at the fall Board meeting prior to the next biennial meeting.
 - Notifies all Council applicants of their appointment status.
 - Maintains communication with Council members prior to the biennial meeting and ensures pre-registration to confirm ability to serve on the Council.
- Attends Council member orientation session during the biennial meeting.
- Manages the Council deliberation process as described in Article XI of the *Constitution and Bylaws* and Section V of the *Conference Procedures*:
 - During Council deliberations votes on Issues only in the event of a tie.
 - Assigns the Council Vice Chair to supervise the activities of the Council Scribe and Runner.
 - Verifies that all Issues are properly recorded at the end of each day of Council deliberations and
 - that the electronic copy of Issues is delivered to the Executive Director.
 - Prepares the Council Summary Report at the conclusion of Council deliberations for presentation

- to the Assembly of State Delegates as described in Section VII of the *Conference Procedures*.
- Consults with the incoming Council Chair to determine suitable Council Vice Chair candidates for recommendation, subject to Board review and approval and Conference Chair appointment.
- Assists incoming Conference Chair in the preparation of the final Conference recommendations pursuant to Section IX, *Conference Procedures*.

Council Chair Neutrality

- In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Chair during the biennial conference:
 - Outside the Council deliberations, the Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.
 - May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
 - May offer personal opinions in the following situations:
 - I. Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Chair.
 - II. During Council deliberations, only when one's position as Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

Selection Criteria

- A member in good standing of CFP.
- Commits to serving two (2) years as Council Chair and has the approval and support of their employer.

CONFERENCE FOR FOOD PROTECTION COUNCIL VICE CHAIR

Position Description

At the end of the Conference for Food Protection (CFP) biennial meeting the newly elected Conference Chair, with approval by the Executive Board (Board), appoints the Council Vice Chair. The Council Vice Chair assists the council Chair in carrying out the Council's assigned charges throughout the two years between biennial meetings as well as during Council deliberations at the biennial meeting.

Responsibilities and Duties

- Supports the objectives of CFP as stated in Article I of the *Constitution and Bylaws*.
- Has a thorough knowledge of the *Constitution and Bylaws, Conference Procedures, and Biennial Meeting Information Manual*.
- Has a working knowledge of *Robert's Rules of Order/Parliamentary Procedure*.
- Attends CFP Board meetings.
- Assumes the duties of the Council Chair in the event the Council Chair is unable to fulfill required duties during the two (2) year term until a new Council Chair of the same constituency is appointed by the Board.
- Assists the Council Chair in selecting Committee Chairs.
- Works with the Council Chair and Committee Chairs as they select Committee members.
- Assists the Council Chair in ensuring that Committees are actively working on their assignments:
 - Committee assignments are being deliberated through face-to-face meetings or conference calls.
 - Committee membership is current and constituency balance is maintained.
 - Committee reports are written and submitted to the Council Chair at least thirty (30) days prior to the Board meeting.
 - Ensures that final committee reports and Issue(s) are completed and submitted to the Issues Chair seventy-five(75) days prior to the biennial meeting.

- Works with the Council Chair and Committee Chairs to nominate Council members and alternates, as set forth in Article IX of the *Constitution and Bylaws*, from persons who have submitted applications to the Executive Director during the summer preceding the biennial meeting.
- Assists the Council Chair during the deliberation of the Issues assigned to the Council.
- During Council deliberations, in the absence of the Council Chair, votes on council Issues only in the event of a tie.
- Attends the Scribe/Runner Orientation and supervises the activities of the Council Scribe and Runner.
- Attends the Council member orientation session during the biennial meeting.
- Assists the Council Chair in verifying that all Issues are properly recorded at the end of each day of Council deliberations and that the electronic copy of Issues is delivered to the Executive Director.
- Assists the Council Chair in preparing the Council Report for presentation to the assembly of State Delegates.
- Consults with the outgoing Council Chair to determine suitable Vice Chair candidates and makes a recommendation to the Conference Chair subject to Board review and approval.

Council Vice Chair Neutrality

- In order to maintain their neutrality during Council deliberations, the following rules of conduct shall apply to the Council Vice Chair during the biennial conference:
 - Outside the Council deliberations, the Vice Chair shall refrain from publicly voicing a personal opinion on an Issue that is before the Council in such a manner or extent that it may call into question his or her ability to remain neutral when the Issue ultimately reaches the Council floor.
 - May answer questions related to a specific Issue during Council deliberations if the intent of the response is to objectively educate or clarify the Council, presenter or person approved to address the Council.
 - May offer personal opinions in the following situations:
 - I. Outside of council deliberations, including constituency consensus meetings and caucuses, with the clarification that one is offering a personal opinion and not speaking as the Council Vice Chair.

II. During Council deliberations, only when one's position as Vice Chair has been clearly relinquished to someone else (per Robert's Rules of Order Newly Revised).

Selection Criteria

- A member in good standing of CFP.
- Commits to serving two (2) biennial Conference meetings, i.e two (2) years as Council Vice Chair and two (2) years as Council Chair; and have the approval and support of their employer.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 111
Issue: 2012 II-003**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Clarification of terminology in Conference governing documents

Issue you would like the Conference to consider:

The 2010 - 2012 Constitution and Bylaws/Procedure Committee has reviewed the *Conference for Food Protection Constitution and Bylaws* and the *Conference for Food Protection Procedures* documents to identify where the terms "Conference", "Conference for Food Protection" and "Biennial Meeting" have been used interchangeably or incorrectly. These documents have been expanded and revised over the years with numerous writers/editors. As a result, there are locations within each document where clarification is needed to accurately represent whether a portion of text refers to the Conference for Food Protection as the organization or, refers to the Conference of Food Protection as the Biennial Meeting and vice-versa. An in-depth review was completed to discern the meaning of each passage and provide the appropriate terminology.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the Constitution and Bylaws and Conference Procedures.

Recommended Solution: The Conference recommends...:

the editorial revision of the *Conference for Food Protection Constitution and Bylaws* and the *Conference for Food Protection Procedures* documents to correct and clarify the use of the terms "Conference", "Conference for Food Protection", and "Biennial Meeting" as appropriate.

For the full language with annotated changes, see:

- Attachment D: Editorial Revisions to CFP Guidance Document - Bylaws
- Attachment E: Editorial Revisions to CFP Guidance Document - Procedures

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Attachments:

- "Attachment D: Editorial Revisions to CFP Guidance Documents - Bylaws"
- "Attachment E: Editorial revisions to CFP guidance documents - Procedures"

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CONFERENCE FOR FOOD PROTECTION



CONSTITUTION AND BYLAWS 2010

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Conference for Food Protection Constitution and Bylaws

As revised April 12, 2006

Preface

The following comments serve as a historical preface to the Constitution and Bylaws for the Conference for Food Protection.

The Conference for Food Protection dates back to the 1971 Conference on Food Protection held in Denver, Colorado. It was sponsored jointly by the Food and Drug Administration (FDA) and the American Public Health Association (APHA). The purpose of the Conference was to provide an inter-professional dialogue on the microbiological aspects of food safety for individuals representing industry, government and consumers.

The Second National Conference for Food Protection was held in Washington, D.C. in 1984. The 1984 Conference expanded its scope to cover toxicological, as well as microbiological concerns. The purpose of the 1984 Conference was:

“To share perspectives on the toxicological and microbiological aspects of food safety problems in the United States; to identify the needs, direction and opportunities of food production, processing, handling and regulation through the year 1990; and to establish an organization for the continuing study of food safety problems and for promotion of the recommendations of the Conference.”

The 1984 Conference was organized into seven committees: Toxicology; Microbiology; Good Manufacturing and Quality Control; Standards and Regulations; Education and Training; New Foods Processing and Packaging; and Conference Program Committees, with selected individuals also serving as resource persons who prepared “white papers” on various issues that were to be discussed at the Conference. In addition to the federal, State and local health officials who had been invited to the 1971 Conference, the 1984 Conference included industry, academic and consumer representatives. The 1984 Conference adopted a recommendation that a continuing Conference organization be established and that a constitution and bylaws be developed based upon a draft presented at the Conference. It was agreed that the objectives of the Conference would be:

- To identify emerging problems of food safety;
- To address the problems of food safety on a regular basis;
- To formulate recommendations for the solution of the identified problems;
- To follow up on the recommendations of the Conference so that they will be incorporated into public policy and in industry practice;

- To evaluate the effectiveness of the Conference recommendations; and
- To establish a working liaison with professional and trade associations, academic institutions and government agencies concerned with food safety.

Following the 1984 Conference, the Constitution and Bylaws were finalized and the Conference was incorporated in 1985. The National Sanitation Foundation (NSF) agreed to support the Conference financially and a Conference Executive Director was hired.

The 1986 Conference for Food Protection was held in Ann Arbor, Michigan. The 1986 Conference was again organized into seven committees representing the major science and technical aspects of food protection. A 25-member Executive Committee selected the topics to be discussed and requested “white papers” from technical experts. In addition to the committees, five Councils were formed representing the interests of the participants at the Conference.

Although the purposes of these Conferences were well established and accepted, the organization and procedures of the Conference were long debated. In the early meetings of the Steering Committee preparing for the 1984 Conference, the idea of emulating the National Conference on Interstate Milk Shipments (NCIMS) was introduced. Individuals working during this Conference to write a new constitution began introducing NCIMS-type structure into the Conference organization. This was the first step leading to the current Constitution and Bylaws.

The second step was action taken at the 1984 Conference to reaffirm the intent to model the Conference after the NCIMS. The following is quoted from the Proceedings of the 1984 Conference:

“An Organizational Model: from the beginning it was the intention of the organizers of the Second National Conference that it should include an effort 'to establish an organization for the continuing study of food safety problems and for the promotion of the recommendations of the Conference'. What the organizers had in mind in making that a goal of the Conference was to establish, in the area of food safety, something akin to the Interstate Milk Shipments Conference and the more recent Interstate Shellfish Sanitation Conference, so that a national dialogue on food safety might continue on a regular, periodic basis.” (page 369)

“A National Conference for Food Protection should be established as an ongoing Conference and be structured similarly to the National Conference on Interstate Milk Shipments. One of the Conference's primary purposes should be to promote the formulation and use of uniform model laws and regulations among all government agencies to assure uniform interpretations and implementation and to eliminate duplication of services. Its membership should consist of federal, State and local food regulatory officials, academia and representatives from industry. It should be governed by an Executive Board with representatives from federal, State and local agencies and industry.” (Recommendation No. 10, Standards and Regulations Committee -- approved by the Conference, page 266).

The draft Constitution and Bylaws adopted by the 1984 Conference were, according to its authors, not meant to be a fully workable source for forming and operating the Conference model after the NCIMS. It was intended as an interim document that would be upgraded to provide a more authoritative foundation for Conference actions.

The final step in the decision to upgrade the Conference organization was taken at the 1986 Conference. The Program Committee reported that:

"It was the unanimous view of the committee that the Conference should operate as an action organization, existing not merely to identify problems and formulate recommendations, but to resolve issues through the implementation of recommendations, much as the Weights and Measures Conference and the Interstate Milk Shippers do. Specific recommendations in this regard will be presented prior to the next Conference." (Page 410, Proceedings)

To accomplish this, the 1986 Conference agreed:

- To develop a State regulatory ratification mechanism whereby each of the 50 States will have one vote; and
- To create a Constitution and Bylaws Committee to review the entire Constitution and Bylaws and to formulate recommendations for the Executive Committee to consider.

The Constitution and Bylaws Committee approached the review process with three principal needs in mind. First, the Constitution needed to allow for the continuing study of food safety problems, but with a more limited focus. To achieve this, the following changes were made:

1. The objective of the Conference placed greater emphasis on food safety at the point of ultimate sale to consumers through food services, retail food stores and food vending, and continued to identify and address problems in production, processing, packaging, distribution, sale and service of food;
2. The seven committees were condensed into three councils to provide a balance between discussing the science and technology of food safety issues and developing various certification guidelines, procedures and models; however, as in the other two Conference examples, separate committees in each discipline area could still function to deliberate and review issues.

The second principle that guided the review process was the need for the Conference to be more successful in promoting food safety, mutual respect and uniformity. This was accomplished through the following changes:

1. The final actions taken by the Conference regarding such items as food safety controls, certification procedures and Memoranda of Understanding, were to be

adopted by the regulatory delegates of the Conference with the advice of industry and other non-regulatory members;

2. The Constitution created a Council on Laws and Regulations; a Council on Administration, Certification and Education; and a Council on Science and Technology that provided vehicles by which the Conference could deliberate on all food safety issues and promote more uniform and effective food safety controls.

The final guiding principle was the need to ensure that the Conference would provide a national and, to the extent possible, international dialogue on food safety on a regular, periodic basis; and that this dialogue would be among representatives of regulatory, industry and other non-regulatory organizations. To accomplish this, the Constitution and Bylaws provided for the following:

1. The name of the Conference remained unchanged consistent with the recommendation made by the 1986 Program Committee. In order to increase international information exchange, the Pan American Health Organization (PAHO) and the World Health Organization (WHO) were added. The Food and Agricultural Organization (FAO) was already a member of the Conference;
2. The role that industry plays in the Conference is substantial. Industry is fully represented on all councils, committees and the Executive Board. Industry representatives alternate as Chair and Vice-Chair on all councils. Industry representatives are elected through industry caucuses. Industry's concerns and advice are fully considered since problems submitted to the Conference are assigned to one of the councils. Regulatory delegates vote on each council's recommended actions;
3. The Science and Technology Council provided a forum for discussion by all concerned parties of the scientific and technological aspects and principles underlying the problems faced by government and industry in their mutual goal of trying to provide safe foods for consumers and could include formation of individual committees for each scientific discipline.

The Constitution and Bylaws attempt to intertwine these guiding principles so that in pursuing one, each would be pursued. This interdependence is critically important if the Conference recommendations are going to command the respect of the food regulators and the food industry that would be called upon to implement the recommendations. As was stated by Mr. Archie Holliday in his comments on the 1988 proposed Constitution and Bylaws:

“The most important need for an organization of this kind is to have its recommendations respected by the community called upon to implement them. Without the results of our deliberations commanding the highest respect attainable, getting together to identify and study food safety problems will be of little or no value to enough people to support a viable organization. The strength of the organization structure now being proposed by your Constitution and Bylaws Committee is that it provides the means to balance the interests of

regulatory and industry people while providing an open forum for the consideration of ideas from any source. At the same time, matters that are supported by the voting delegates will have endured such a process as to command the utmost of respect.”

The Constitution and Bylaws are one step in an evolving process to develop a viable permanent Conference. The next was also discussed by Mr. Archie Holliday in his comments on the Constitution:

“One should be careful not to conclude that a food service oriented structure would prohibit the free and open study of the wider range of food safety problems. When the values of NCIMS and ISSC organizational structures are discussed, we often fail to acknowledge the importance of procedures to successful operation of these bodies. Well defined, established procedures will be essential to the effectiveness of the Conference operating under our proposal. Procedures should remain as a separate entity from the Constitution and Bylaws. When the new Constitution and Bylaws are adopted, the Executive Board should immediately begin the process of establishing procedures to be approved by the Conference. It is in this process that attention can be given to how broad the scope of the Conference should be. The adoption and revision of Conference procedures should receive the same careful consideration as the adoption of Conference recommendations.”

The Constitution and Bylaws Committee and the Executive Board believed that the Constitution and Bylaws proposed and accepted at the 1988 Conference provided a workable and proven approach that should be followed to develop an effective voice for present and future issues of food safety.

Preamble

The Conference for Food Protection, hereinafter referred to as the Conference or CFP, is incorporated as a non-profit organization under the laws of the State of Virginia to carry out the objective stated in the Constitution and Bylaws of the Conference.

Constitution and Bylaws

Article I Objective

Section 1. The objective of the Conference shall be to promote food safety and consumer protection by:

Subsection 1. Identifying and addressing problems in the production, processing, packaging, distribution, sale and service of foods;

Subsection 2. Focusing on and facilitating the food protection programs governing the food service, retail food store and food vending segments of the food industry;

Subsection 3. Adopting sound, uniform procedures which will be accepted by food regulatory agencies and industry;

Subsection 4. Promoting mutual respect and trust by establishing a working liaison among governmental agencies, industry, academic institutions, professional associations and consumer groups concerned with food safety;

Subsection 5. Promoting uniformity among States, territories and the District of Columbia. Territories include American Samoa, Guam, Northern Mariana Islands, Puerto Rico, The Trust Territory and the U.S. Virgin Islands.

Subsection 6. Utilizing as the primary channels for dissemination of information:

The United States Department of Agriculture/Food Safety and Inspection Service (USDA/FSIS) in matters under their purview, such as food production, meat and poultry processing and consumer information; and The United States Department of Health and Human Services/Public Health Service/Food and Drug Administration (HHS/PHS/FDA) in matters under their purview, such as food processing and assistance to food regulatory agencies based on the model food codes and related documents.

Article II Organization and Operation

Section 1. The Conference shall be directed by the delegates of the States, territories and District of Columbia, who join together with representatives of industry, academic institutions, professional associations and consumer groups to achieve the objective of the Conference.

The Conference shall include an Assembly of State Delegates, hereinafter referred to as the Assembly; an Executive Board, hereinafter referred to as the Board; officers; an Executive Director, Executive Assistant, Executive Treasurer, Councils; Committees; Standing Committees (see Article XIII); and any member of the Conference as described in Article III, Sections 1 and 2.

Section 2. The Conference shall meet at least biennially during even-numbered years with additional meetings as the need arises as determined by the Board.

Section 3. The Conference identifies food safety issues by receiving Issues submitted by interested persons. The Conference addresses Issues by assigning them to appropriate Councils or Committees for consideration. Council membership is balanced between government and industry interests. Aspects of Issues may also be assigned to Committees for study, procedure development or for other reasons. All committees that are assigned to a Council shall submit a report to the Council Chair and Conference at least ninety (90) days preceding the CFP Biennial Conference-Mmeeting. Councils then make recommendations to the Assembly, which is composed of delegates designated by the States, each territory and the District of Columbia. The Assembly considers and votes to approve or reject Council recommendations. CFP Biennial Meeting Conference-participation is open to all interested individuals who choose to become members and attend. Individuals may serve as appointed or elected members on the Board, Councils, and Committees; or as a participating registered member.

The Conference shall consider issues related to food safety that are submitted on approved forms and within specified time frames. Any interested person may submit an Issue for consideration. At least one hundred and fifty (150) days preceding the CFP Biennial Conference-Mmeeting, the Executive Director shall notify members of the Conference of the time and place of the CFP Biennial Conference-Mmeeting. Each notice shall include information for submitting Issues, and a statement that all Issues, shall be submitted to the Conference at least ninety (90) days preceding the CFP Biennial Conference-Mmeeting. Issues are to be assigned to appropriate Councils by the Issue Committee. At least forty (40) days preceding the CFP Biennial Conference-Mmeeting, the Executive Director shall make available to members of the Conference copies of the final committee reports and Issues, including Constitution changes that have been received and assigned for CFP Biennial Meeting Conference-deliberation.

The Board may submit special Issues to the Councils at the beginning of the CFP Biennial Conference-Mmeeting as necessary.

Councils are to deliberate their Issues and report their recommendations on each to the Assembly. The Assembly considers and votes on recommendations it receives from the Councils.

Article III Registration and Membership

- Section 1.** Any persons interested in promoting the objective in Article I may attend the CFP Biennial Conference Meeting by registering their name, address, and the business they represent with the Executive Treasurer using forms provided and paying the registration fee established by the Board under Article V, Section 10 and 12.
- Section 2.** Persons who are interested in promoting the objective in Article I but who can not attend the CFP Biennial Conference Meeting may become members of the Conference by applying to the Executive Treasurer using forms provided and paying the membership fee established by the Board under Article V, Section 12.
- Section 3.** Persons paying the Conference membership fee through the Executive Treasurer's office or by paid registration at the CFP Biennial Conference Meeting are members of the Conference and are entitled to be on an official list to receive copies of the CFP Biennial Meeting Conference proceedings and other Conference matters determined by the Board to be of interest to all members of the Conference.
- Section 4.** Conference membership begins at the time of payment of membership fee. Membership paid as part of the CFP Biennial Meeting Conference registration begin on the first day of one CFP Biennial Conference Meeting and end the day prior to the next CFP Biennial Conference Meeting.

Article IV Composition of Organizational Components and Eligibility Requirements for Service In Official Capacities

- Section 1.** The Assembly shall consist of persons attending the Conference meeting and qualified as voting delegates under Article XVII, Section 5.
- Section 2.** To be eligible to serve on the Board, Councils, Committees, or as Issue Chair or Program Chair; individuals must be members of the Conference and must be in attendance at the CFP Biennial Conference Meeting at which they are appointed or elected; or shall have attended the CFP Biennial Conference Meeting immediately preceding the one at which they are appointed or elected. This requirement in respect to Councils and Committees may be waived by consent of the Board.
- Section 3.** Board Membership
- Subsection 1.** The Board shall be composed of twenty-three (23) voting members as follows:

- a) Six (6) members from State food regulatory agencies (one (1) from each CFP region);
- b) Six (6) members from local food regulatory agencies (one (1) from each CFP region);
- c) Three (3) members from federal agencies (one (1) from FDA, one (1) from USDA, and one (1) from CDC);
- d) Six (6) members from the food industry with at least one (1) each representing food processing, food service, retail food stores and food vending;
- e) One (1) member from an academic institution; and
- f) One (1) member representing consumers.

Subsection 2. Regulatory agency, industry, academic institution and consumer Board members shall be elected by a caucus of registrants in each respective group. State and local regulatory Board members shall be elected in regional caucuses of regulatory registrants. Regulatory Board members shall be appointed by the head of their agency.

Subsection 3. Such elected Board members shall serve through three (3) general CFP Biennial Meetings of the Conference. Elected Board members may succeed themselves unless reelection would extend the total of consecutive service to more than twelve (12) years.

The terms of elected Board members shall be staggered so that one-third (1/3) of the members are elected at each CFP Biennial Conference Meeting.

Subsection 4. The Board shall have non-voting Ex-Officio members as follows:

- a) The Immediate Past Chair of the Board;
- b) The Chair and Vice Chair of each Council;
- c) The Conference Program Chair;
- d) Representatives from regulatory agencies regulating retail food operations in other countries of the world, such as Canada, Mexico, etc.
- e) The Executive Director, Executive Treasurer, Executive Assistant;

- f) The Conference Issue Chair, and
- g) The Conference Constitution and Bylaws/Procedures Chair.

Section 4. The Board shall elect a Chair and Vice-Chair from its membership after caucus elections are held during each biennial meeting of the Conference and they may retain their positions at the pleasure of the Board as long as they are officially members of the Board. The Board Chair and Vice-Chair shall be the Chair and Vice-Chair of Conference meetings. The Board shall retain the services of a qualified person to act as an Executive Director, Executive Treasurer, and Executive Assistant. The Executive Treasurer shall be bonded. The compensation of the Executive Director, Executive Treasurer, and Executive Assistant shall be set by the Board.

Section 5. The Immediate Past Chair of the Board shall continue to serve on the Board until replaced by the next retiring Chair. If the Immediate Past Chair of the Board is unable for any reason to continue to serve on the Board, the position shall remain vacant until filled by the next retiring Chair. Immediate Past Chairs shall serve on the Board as non-voting members unless re-elected to the Board in a capacity other than as Immediate Past Chair.

Article V Duties of the Assembly and the Board

Section 1. The Assembly with recommendation from a Council or the Board shall approve or reject all recommendations including those pertaining to the Constitution and Bylaws, any Conference procedures, all Memoranda of Understanding or other formal agreements and other necessary actions including resolutions; and establish Conference policies and positions on all subjects related to the objective of the Conference except as delegated (by the Assembly) to the Board. If a recommendation is approved, it shall be referred to the Board for appropriate disposition. If a “No Action” recommendation is rejected, the Issue will be referred to the Board for its consideration.

Section 2. The Board shall manage the affairs of the Conference.

Section 3. The Board shall meet prior to each CFP Biennial Conference Meeting and after the meeting closes. The Chair shall call special meetings of the Board at any time at the request of two-thirds (2/3) of its voting members. In addition, the Chair is empowered to call special meetings of the Board at any time, as the need arises, with the concurrence of two-thirds (2/3) of the voting Board members.

Section 4. The Board may, at the discretion of the Chair, utilize a mail service, electronic mail, or fax ballots to establish a position, action or confirm telephone eConference call votes. Only an authorized ballot approved by the Board shall be used. Once such a position or action has been taken, the Board shall notify all Conference members.

- Section 5.** The Board shall direct the Chair, Executive Director, and Program Chair in the preparation of the programs for each meeting of the Conference.
- Section 6.** The Board shall set the time and place of the meetings of the Conference.
- Section 7.** If voting members of the Board are unable to participate in a Board meeting, they may not send a substitute, but may forward by mail, email, or FAX, information for consideration by attending members of the Board. Voting and ex-officio members may participate through a telephone conference call.
- Section 8.** Voting Board members who fail to attend two (2) consecutive Board meetings and who fail to show cause why they were absent may have their positions declared vacant by the Chair.
- Section 9.** If a vacancy occurs for any reason in Board membership between biennial meetings, the Chair with concurrence of the Board may fill the vacancy with a person representing the same discipline as the person being replaced until the next biennial meeting at which time the vacancy shall be filled by a qualified person who is properly elected.
- Section 10.** The Board shall direct the Executive Treasurer to collect registration and membership fees as necessary to defray the costs of the operation of the Conference. The Board shall cause an annual audit to be made of the Executive Treasurer's financial reports.
- Section 11.** The Board shall authorize the form used to tally votes in meetings of the Board and Assembly.
- Section 12.** The Board shall establish the registration and membership fees identified in Article III.
- Section 13.** The Board shall approve an annual budget for the fiscal year established by the Board.
- Section 14.** The Board shall appoint Committees as necessary to accomplish the Conference objective.
- Section 15.** The Board shall approve the membership of each Standing Committee.

Article VI Duties of the Chair

- Section 1.** The Chair shall preside at all meetings of the Assembly and Board, except as provided in Article VII, Section 1.
- Section 2.** The Chair shall assist the Executive Director in arranging CFP Biennial Conference Meetings.

- Section 3.** The Chair with the approval of the Board shall appoint Council Chairs and Vice-Chairs.
- Section 4.** The Chair shall appoint Council consultants required in Article X.
- Section 5.** The Chair shall appoint Chairs of the Conference Standing Committees established in Article XV, Section 2.
- Section 6.** The Chair, with the approval of the Board, shall appoint qualified persons to Councils and Committees as provided in the Constitution and Bylaws.
- Section 7.** The Chair shall appoint a Local Arrangements Committee to assist in planning the physical facilities for the next CFP Biennial Conference Meeting.
- Section 8.** The Chair shall appoint a parliamentarian to advise on matters of parliamentary procedures at Board and Assembly meetings.
- Section 9.** The Chair, with Board approval, may retain clerical assistance for the Conference.
- Section 10.** Between Conference meetings the Chair shall require from each Council Chair a report of the status of implementation of each approved recommendation originating in the respective Council and this information shall be provided to the Conference participants.
- Section 11.** The Chair shall perform all other responsibilities and duties as detailed in the Conference Chair position description.

Article VII Duties of the Vice-Chair

- Section 1.** In the event the Chair is unable to perform the duties of the Chair, the Vice-Chair shall act as Chair.
- Section 2.** When acting as Chair, the Vice-Chair shall perform all the necessary duties for the Conference as outlined in Article VI.
- Section 3.** The Vice-Chair shall perform all other responsibilities and duties as detailed in the Conference Vice-Chair Position Description.

Article VIII Duties of the Executive Director

- Section 1.** The Executive Director shall ensure that the minutes of each meeting of the Assembly and the Board are recorded and transcribed.
- Section 2.** The Executive Director shall tally and record all voting of the Assembly on a form authorized by the Board.
- Section 3.** The Executive Director shall notify all members of the time and place of the next CFP Biennial Conference Meeting, and of Issues that are to be deliberated.

- Section 4.** The Executive Director shall accomplish the duties outlined in Article VI, Section 10; and Article XVII, Section 1, Subsections 2, 3, 4, and Section 4.
- Section 5.** The Executive Director shall maintain an up-to-date list of the qualified delegates designated as required by Article XIV.
- Section 6.** The Executive Director shall retain, subject to Board’s approval, a qualified person to serve as Executive Assistant, and shall direct and oversee duties assigned to the Executive Assistant.
- Section 7.** The Executive Director shall perform all responsibilities and duties as detailed in the Executive Director Position Description.

Article IX Duties of the Executive Treasurer

- Section 1.** The Executive Treasurer shall collect registration and membership fees and shall pay bills as directed by the Board. The Executive Treasurer shall obtain a receipt for all disbursements and shall make all such receipts a part of Board records.
- Section 2.** The Executive Treasurer shall prepare a proposed annual budget for presentation to the Board.
- Section 3.** The Executive Treasurer shall prepare all budget and financial reports.
- Section 4.** The Executive Treasurer shall perform all responsibilities and duties as detailed in the Executive Treasurer Position Description.

Article X Duties of the Executive Assistant

- Section 1.** The Executive Assistant manages the information on the CFP website with the assistance of the Executive Director and a professional webmaster and publishes the CFP newsletter.
- Section 2.** The Executive Assistant maintains the CFP membership database; creates reports and rosters, and develops mailing lists.
- Section 3.** The Executive Assistant assists the Executive Director with development of a Standard Operating Procedures Manual to include Position Descriptions, Board policies and Scripts for presentations and is responsible for their maintenance.
- Section 4.** The Executive Assistant records, transcribes, and distributes Board meeting minutes.
- Section 5.** The Executive assistant assists the Executive Director with the Delegate process to include outreach and rosters.

Section 6. The executive Assistant assists the Executive Director with the preparation of the biennial meeting program, provides onsite assistance to the Director at the biennial meeting and compiles biennial meeting proceedings with the assistance of the Executive Director.

Section 7. The Executive Assistant shall perform all responsibilities and duties as detailed in the Executive Assistant Position Description.

Article XI Councils

Section 1. There shall exist three (3) Councils in the Conference to provide for continuity of action in carrying out the objective of the Conference.

Subsection 1. The Councils shall be known as Council I, Council II and Council III.

Section 2. Each Council shall have a Chair, Vice-Chair and twenty (20) other members to be appointed by the Conference Chair with the approval of the Board. Except as specified in Article X, Section 3, Subsection 3, the term for a Council member shall begin at appointment and expires upon adjournment of the fall Board meeting following the ~~CFP Biennial Conference Meeting~~. If a Council member cannot attend a ~~CFP Biennial Conference Meeting~~, the member's term expires and the Conference Chair may appoint a member who can attend the Council meeting during the ~~CFP Biennial Conference Meeting~~.

Subsection 1. Of the twenty-two (22) members of Councils I and II, nine (9) plus one Chair or Vice-Chair shall be selected from regulatory agencies; one (1) shall be from a national, state or local consumer organization; one (1) shall be from academia; and nine (9) plus one Chair or Vice-Chair from industry.

Subsection 2. Eight (8) of the food regulatory agency representatives on Councils I and II shall be equally apportioned among state and local agencies and two (2) members shall be from the territories, District of Columbia, or federal jurisdictions that regulate commercial or institutional operations. If two (2) members can not be obtained from the territories, District of Columbia or federal food inspection programs, these positions may be filled from State or local food regulatory agencies. The ten (10) industry representatives shall be apportioned so at least one (1) member represents food processing, two (2) members represent food service, two (2) members represent retail food stores and one (1) member represents food vending.

Subsection 3. Of the twenty-two (22) members of Council III at least five (5) shall be from State and local regulatory agencies, at

least five (5) from industry, up to ten (10) at-large plus a Chair and Vice-Chair. The industry representatives shall include at least one (1) each from food processing, food service, retail food stores and food vending. At large members may include members representing federal agencies, Academia, and other stakeholder groups.

Subsection 4. If sufficient designated members are not available at a CFP Biennial Conference Meeting to complete a Council's membership, the Conference Chair may appoint other members to the Council so long as the balance between regulatory and industry is maintained as specified.

Section 3. The Council Chair and Vice-Chair shall select twenty (20) Council members from persons holding membership in the Conference and offer their names for Conference Chair appointment and Board confirmation.

Subsection 1. The Council Chair shall, after appointment, serve through one (1) CFP Biennial Conference Meeting. The Council Vice-Chair shall, after appointment, serve through two (2) consecutive CFP Biennial Conference Meetings, one (1) as Vice-Chair and the second as Chair.

Subsection 2. On Councils I and II when the Council Chair represents a food regulatory agency, the Vice-Chair shall be an industry representative. If the Council Chair represents industry, the Vice-Chair shall be a food regulatory agency representative. The Chair and Vice-Chair from Council III shall be from one of the following disciplines – Regulatory, Industry, or Academia and at no time shall both the Chair and Vice-Chair represent the same group.

Subsection 3. The term for the Council Chair and Vice-Chair shall begin at the conclusion of the scheduled CFP Biennial Conference Meeting and last through the fall Board meeting following the next biennial CFP Biennial Conference Meeting. At the end of the outgoing Chair's term, the Vice-Chair shall assume the position of Chair and a new Vice-Chair shall be appointed as set forth in Subsection 2 of this Section.

Section 4. Each member of the Council, other than the Vice-Chair, shall have one vote. The Council Chair shall only vote to break a tie. The Council Vice Chair shall only vote when acting as Chair.

Article XII Council Consultants

The following agencies and international organizations may each provide a non-voting consultant for each of the Councils:

- a. Centers for Disease Control and Prevention (CDC);
- b. U. S. Environmental Protection Agency (EPA);
- c. U. S. Food and Drug Administration (FDA);
- d. U. S. Department of Agriculture (USDA);
- e. Food and Agriculture Organization (FAO);
- f. Pan American Health Organization (PAHO);
- g. World Health Organization (WHO);
- h. The Dominion of Canada; and
- i. Others as deemed appropriate by the Board.

Article XIII Duties and Responsibilities of Councils

Section 1. Council I: Council on Laws and Regulations

Subsection 1. Issues submitted to the Conference dealing with laws, regulations and model codes governing the safety of food shall be assigned to Council I by the Conference Issue Committee.

Section 2. Council II: Council on Administration, Education, and Certification

Subsection 1. Issues submitted to the Conference dealing with matters relating to the Constitution and Bylaws, Conference procedures, memoranda of understanding, program evaluation, education, training and certification and the like shall be assigned to Council II by the Conference Issue Committee.

Section 3. Council III: Council on Science and Technology

Subsection 1. Issues submitted to the Conference dealing with science and technology shall be assigned to Council III by the Conference Issue Committee.

Section 4. Councils shall deliberate on all assigned Issues. Council Chairs shall report the recommendations of their Councils to the Assembly.

Section 5. When a Council recommends “No Action” on an assigned Issue, the Council Chair shall record the reason why “No Action” was recommended.

Section 6. Duties of the Councils between CFP Biennial Conference Meetings

Subsection 1. Following the CFP Biennial Conference Meeting, the Conference Chair shall contact the Council Chairs to review the recommendations approved by the Assembly of State Delegates and to plan for the implementation of approved recommendations originating in their respective Councils.

Subsection 2. During the period between biennial meetings, the Council Chairs, shall monitor, encourage, and proactively support the progress of implementation of approved recommendations originating in their respective Councils.

Subsection 3. Council Chairs shall prepare a written report on the status of implementation of approved recommendations originating in their respective Councils or on the activities of committees assigned to their Council. These reports shall be submitted to the Conference Chair 30 days prior to each Board meeting or more frequently at the request of the Conference Chair.

Subsection 4. The new Council Chairs shall submit for Board approval the names of committee chairs and membership of all committees assigned to their Council by the fall Board meeting following the CFP Biennial Conference Meeting.

Article XIV Committees

Section 1. All appointments to Conference Committees shall be made to provide a balance in representation of the stakeholders in the particular matter under consideration.

Section 2. The following standing committees shall be established:

Subsection 1. Audit Committee;

Subsection 2. Constitution and Bylaws/Procedures Committee;

Subsection 3. Issue Committee;

Subsection 4. Managers Training, Testing and Certification Committee;

Subsection 5. Nominating Committee;

Subsection 6. Program Committee;

Subsection 7. Resolutions Committee; and

Subsection 8. Strategic Planning Committee.

Section 3. Other committees may be established as necessary to accomplish the Conference objective. Such committees may be for the purpose of focusing Conference resources around specific scientific disciplines, for studying multi-faceted issues, for developing new procedures or for other purposes.

Subsection 1. Local Arrangements Committee shall be established for each ~~CFP Biennial Conference Meeting~~.

Section 4. A committee may establish its own bylaws establishing operational procedures that may include, but are not limited to, objectives, organization and operation, duties and responsibilities. Bylaws of a committee must be approved by the Board.

Section 5 By the Fall Board meeting following the ~~CFP Biennial Conference Meeting~~, the Standing Committee Chairs shall submit the names of their members to the Board for approval.

Article XV Duties of the Committees

Section 1. The Issue Committee shall review all Issues submitted at least ninety (90) days before the ~~CFP Biennial Conference Meeting~~. The Issue Committee shall assign for Council deliberation those Issues that have met the Issue acceptance criteria specified in the Conference Procedures Manual. Issue assignments shall be made in accordance with Article XII, Section 1, Subsection 1; Section 2, Subsection 1; and Section 3, Subsection 1.

Section 2. The Program Committee shall be responsible for the educational workshop and the Reports and Updates session at the biennial meeting.

Section 3. The Constitution and Bylaws/Procedures Committee shall submit recommendations to improve Conference administrative functions through proposals to amend the Constitution and Bylaws. The Committee shall review proposed memorandums of understanding and ensure consistency among the memorandums of understanding, the Conference Procedures manual, the Constitution and Bylaws and other working documents. The Committee shall report all recommendations to the Board prior to Council II deliberation and shall follow the direction of the Board.

Section 4. The Resolutions Committee shall report to the Board. Except for thank you resolutions, the Resolutions Committee shall prepare all necessary resolutions for Board approval.

Section 5. The Audit Committee shall report to the Board. Except when a certified public accountant conducts an audit of the Conference's financial records, the Audit Committee shall audit the Conference's financial records annually.

Section 6. The Managers Training, Testing and Certification Committee shall report to the Board. The Food Protection Managers Training, Testing and Certification Committee shall work with the accreditation organization for food protection manager certification programs to:

Subsection 1. Establish and refine policies and standards to which certifiers must conform in order for them to be accredited;

Subsection 2. Provide Conference input into the development of accreditation standards for certifying organizations specific to food protection manager certification programs;

Subsection 3. Develop strategies for enhancing equivalence among food protection manager certificates issued by certifiers; and

Subsection 4. Promote universal acceptance of certificates issued by accredited certifiers.

Section 7. All Committees, including Standing Committees, shall submit their reports in a timely prescribed manner as specified under Article II, Section 3 as follows:

Subsection 1. Committees assigned to a Council, to their respective Councils; and

Subsection 2. Standing Committees to the Conference Chair and Executive Director.

Article XVI Duties of States, Territories and District of Columbia

The States, territories and the District of Columbia shall be responsible for designating and keeping the Executive Director informed of the name(s) and address(es) of the person(s) designated to represent them in the Assembly.

Article XVII Rules of the CFP Biennial Conference Meeting

Section 1. Registration – All participants must register.

Section 2. CFP Biennial Conference Meetings shall be at least two (2) days duration except this requirement may be waived for special meetings called by the Board.

Section 3. Except for additional meetings as provided for in Article II, Section 2, the Conference will meet each even numbered year.

Section 4. Robert's Rules of Order shall prevail, unless specified rules are established.

Section 5. FDA, CDC, and USDA Reports shall be presented.

Article XVIII Rules of the Assembly

Section 1. Meetings of the Assembly shall include the following:

Subsection 1. Call to order by the Chair;

Subsection 2. Roll call of States, Territories and the District of Columbia and the announcement of the names of the delegates who will vote for each in the Assembly;

Subsection 3. Approval of the minutes of the previous meeting;

Subsection 4. *Report of the Executive Director and Executive Treasurer;*

Subsection 5. Council Chair Reports, Resolutions and other new business;

Subsection 6. Assembly voting;

Subsection 7. Authorization that may be required by the Assembly for the Board to conclude and implement any necessary recommendations prior to the next CFP Biennial Conference Meeting; and

Subsection 8. Adjournment.

Section 2. Each State shall be entitled to one (1) full vote and each territory and the District of Columbia shall be entitled to one-half (½) vote in the Assembly. When a State has more than one (1) State food regulatory agency enforcing food laws and regulations for food processing, food service, retail food stores and food vending, the vote may be divided into appropriate fractions. State agencies within each State must agree among themselves regarding apportioning the one (1) vote.

Section 3. Only a registrant at the CFP Biennial Conference Meeting who is a representative of a State, territory or District of Columbia food regulatory agency responsible for the enforcement of food laws and regulations for food processing, food service, retail food stores or food vending is entitled to be a delegate in the Assembly. When any State is represented by more than one food regulatory agency, the vote may be cast together as one vote or separately as a fraction of a vote. Representatives of States with more than one regulatory agency delegate

certified in compliance with the provisions of Section 4 of this Section may, during any meeting of the Assembly, reassign their voting privilege to another duly certified delegate from their State by giving written notice of such action to the Conference Chair. When a State is represented by only one agency, the State's delegate may cast a full vote for that State in the Assembly.

Section 4. At least one hundred and fifty (150) days prior to a CFP Biennial Conference Meeting the Executive Director shall send to the food regulatory agency or agencies in each State, territory and District of Columbia participating in the CFP Biennial Meeting Conference a notice of the forthcoming meeting. Each notice shall include a current copy of Article II, Section 3 and Article XVII, Sections 2 through 6 and 9 of the Constitution and Bylaws.

Section 5. Each Agency shall report to the Executive Director on approved forms the following:

Subsection 1. The agency's officially designated regulatory responsibility regarding food processing, food service, retail food stores and food vending;

Subsection 2. The name of the delegate and the alternate, if any; and

Subsection 3. Designation of the vote to which that person is entitled, whether one (1) vote or a fraction of one (1) vote.

Section 6. In the event that more than one (1) delegate is designated and the sum of the votes designated for the delegates is greater than one (1), the Executive Director shall reject, void and return the reports to the agencies for correction. Such revision shall be submitted to the Executive Director at least forty-five (45) days before the CFP Biennial Conference Meeting.

Section 7. Delegates shall record their names with the Executive Director and shall cast their votes in the Assembly when called by announcing "yes", "no" or "abstain" for one (1) vote; or "yes", "no" or "abstain" for the appropriate fraction of one (1) vote.

Section 8. Voting in the Assembly shall be recorded by the Executive Director as "yes", "no" or "abstain".

Section 9. If delegates wish to caucus, they may pass when their names are called for the purpose of caucusing and then shall vote when the second roll is called.

Section 10. To adopt in the Assembly:

Subsection 1. A quorum must be present. A quorum is defined as the presence of registered voting delegates from at least two-thirds (2/3) of the States with designated official delegates in attendance at the CFP Biennial Conference Meeting.

Each territory and the District of Columbia shall count as one half (½) State in constituting a quorum.

Subsection 2. To change a procedure adopted at a previous [CFP Biennial Conference Meeting](#) or to make a change in the Constitution and Bylaws requires a two-thirds (2/3) majority vote.

Subsection 3. Other actions require a simple majority unless specifically covered by Robert's Rules of Order.

Article XIX Parliamentary Authority

Section 1. The rules of parliamentary procedure comprised in the current edition of Roberts Rules of Order, Newly Revised, shall govern all proceedings of the Conference and the Executive Board, subject to such special rules as have been or may be adopted.

Article XX Dissolution of the Conference

Section 1. Upon the dissolution of the Conference, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or tax code, or shall be distributed to the federal government, or to a State or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

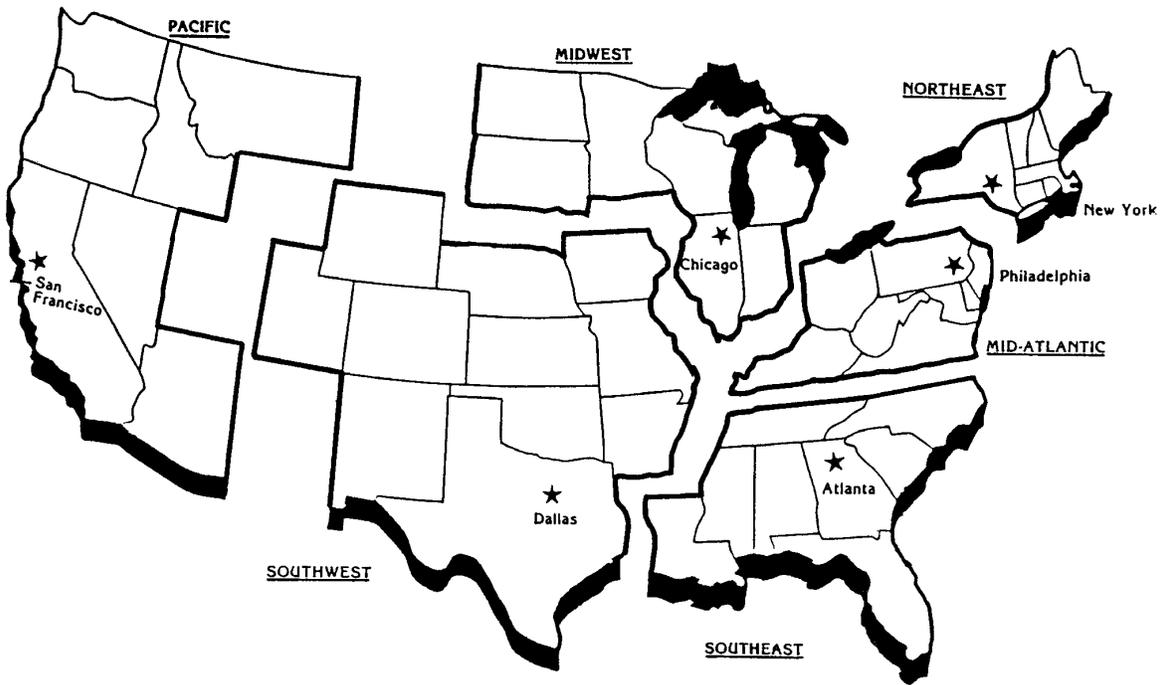
Article XXI Amendments to the Constitution and Bylaws

Section 1. The Constitution and Bylaws may be amended at a duly called [CFP Biennial Conference Meeting](#), the delegates having had thirty (40) days notice from the Executive Director of such proposal to amend as provided in Article II, Section 3 and Article VIII, Section 3.

Section 2. Amendments to the Constitution and Bylaws will become effective at the close of the [biennial](#) meeting at which they are adopted.

Appendix

Map of CFP Regions*

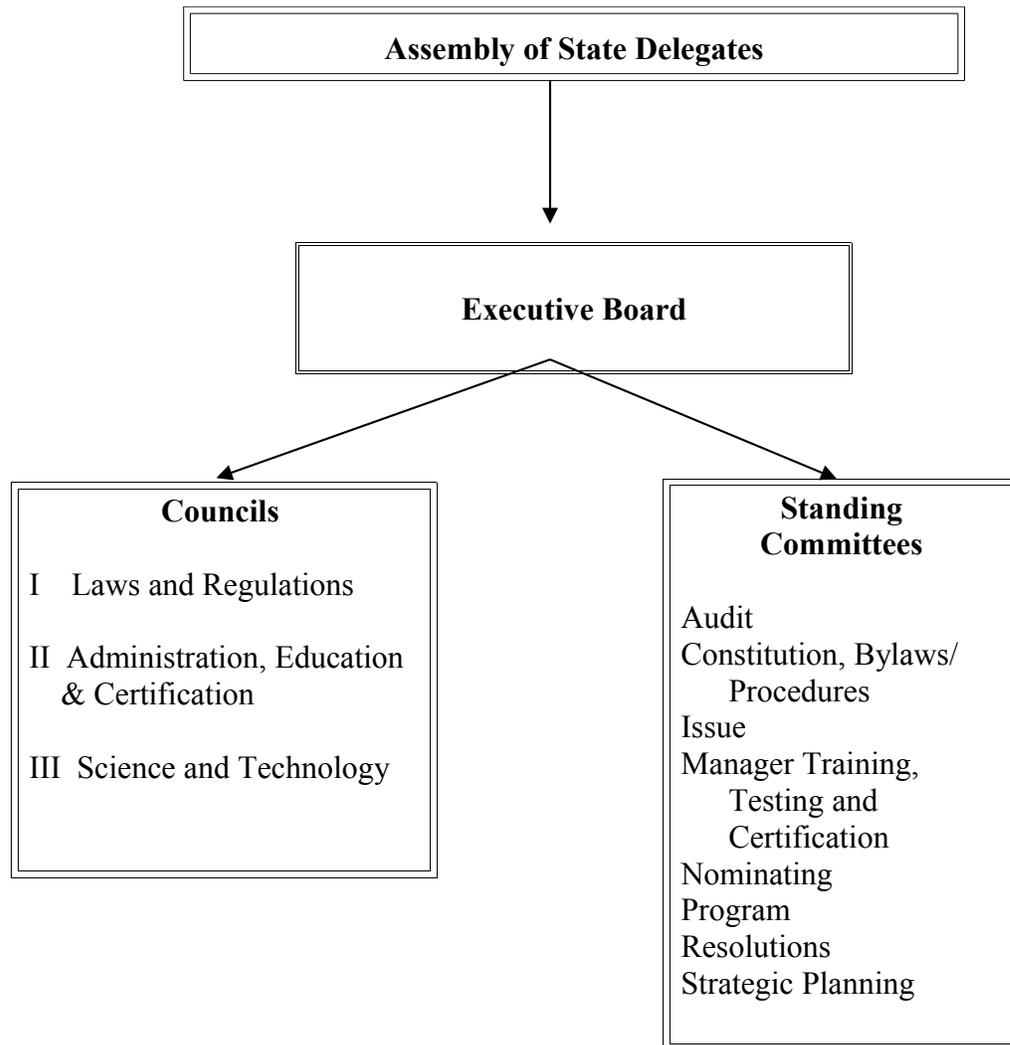


Non-contiguous states and territories not shown on map

*Used in Allocating Members of Executive Board

| <u>Mid-Atlantic</u> | <u>Midwest</u> | <u>Pacific</u> | <u>Southeast</u> | <u>Northeast</u> | <u>Southwest</u> |
|---------------------|----------------|----------------|------------------|------------------|------------------|
| DE | IL | AK | AL | CT | AR |
| DC | IN | AS | FL | MA | CO |
| KY | MI | AZ | GA | ME | IA |
| MD | MN | CA | LA | NH | KS |
| OH | ND | CM | MS | NY | MO |
| NJ | SD | GU | NC | RI | NE |
| PA | WI | HI | PR | VT | NM |
| VA | | ID | SC | | OK |
| WV | | MT | TN | | TX |
| | | NV | VI | | UT |
| | | OR | | | WY |
| | | TT | | | |
| | | WA | | | |

Conference for Food Protection Organizational Chart



***Organizational Structure Composition
Assembly of State Delegates***

| | |
|------------------------------|--|
| Role: | Approves or rejects all Council recommendations |
| Chair and Vice-Chair: | Conference Chair and Vice-Chair preside at meetings of the Assembly |
| Delegates: | Designated by 57 food regulatory agencies representing: 50 States 6 Territories <ul style="list-style-type: none">• American Samoa• Guam• Northern Mariana Islands• Puerto Rico• Trust Territory• U.S. Virgin Islands 1 District of Columbia |
| Voting: | 53 ^{1/2} total possible 50 States have 1 vote each; those States with multiple State regulatory jurisdictions may divide vote equitably 6 Territories and DC have ½ votes each |

Executive Board

| | |
|------------------------------|--|
| Role: | Manages the affairs of the Conference |
| Chair and Vice-Chair: | Elected from Board Voting Membership |
| Members: | 23 elected to staggered terms by caucus of registrants in each respective group; federal members are appointed by agency head |
| Voting | 6 State regulatory agencies (1 each per CFP Region) 6 Local regulatory agencies (1 each per CFP Region) 3 Agencies (FDA, USDA and CDC)) 6 Food Industries 1 Academic Institution 1 Consumer Representative |
| Non-Voting Ex-Officio | 1 Immediate Past Chair 3 Chairs of each Council 3 Vice Chairs of each Council 1 Program Chair 1 Issue Chair 1 Constitution and Bylaws/Procedures Chair 4 International Representatives ;(i.e. Canada, Mexico, etc.) 1 Executive Director 1 Executive Treasurer 1 Executive Assistant |

Councils

- Role:** Deliberate assigned Issues and develop recommendations for Assembly consideration
- Chairs and Vice-Chairs:** 2 appointed by Conference Chair with approval of Board. For Councils I and II, if the Chair has a regulatory affiliation, the Vice-Chair is to be an industry affiliate, and vice versa. The Chair affiliation alternates back and forth each term.
- Members:** 20 selected by Council Chair and Vice-Chair for appointment by Conference Chair with approval of Board
- I. Council on Laws and Regulations
- Regulatory (including Chair or Vice Chair)
- 4 Local
4 States
2 Territorial, DC
or Federal
- Industry (including Chair or Vice Chair)
- 1 Food Processing
2 Food Service
2 Food Store
1 Food Vending
4 Not specified
- Consumer and Academia
- 1 Consumer
1 Academic
- II. Council on Administration, Education and Certification
- Membership allocated as shown in Council I
- III. Council on Science and Technology
- 5 Regulatory agencies (min.) selected from State and Local
- 5 Food industry (min.) with at least 1 each from food processing, food service, food stores and food vending

10 At-large including consumer and academia and may include federal and other

Consultants:

9 possible

4 Designated Federal Agencies

3 Designated International Organizations

Additional if necessary, as deemed by the Board.

Voting:

Chair votes only to break a tie; Vice-Chair does not vote.

Committees

Appointments

All appointments to Conference Committees shall be made to provide a balance in representation of the stakeholders in the particular matter under consideration.

Standing Committees:

Audit Committee

Role: Except when a certified public accountant conducts an audit of the Conference's financial records, the Audit Committee audits the Conference's financial records annually. Committee reports to the Board.

Chair: Appointed by Conference Chair

Constitution and Bylaws/Procedures Committee

Role: Submits recommendations to improve Conference administrative functions through proposals to amend the Constitution and Bylaws. Reviews proposed memoranda of understanding and ensure consistency among the memoranda of understanding, the Conference Procedures manual, the Constitution and Bylaws and other working documents. Reports all recommendations to the Board prior to Council II deliberation and follows the direction of the Board. Committee reports to the Board.

Chair: Appointed by Conference Chair

Issue Committee

Role: Reviews all Issues submitted to Conference and assigns to Councils for deliberation. Committee reports to the Board.

Chair: Appointed by Conference Chair

Managers Training, Testing and Certification Committee

Role: Reports to the Board. Works with the accreditation organization for food protection manager certification programs to:

- a. Establish and refine policies and standards to which certifiers may conform in order for them to be accredited;

- b. Provide Conference input into the development of accreditation standards for certifying organizations specific to food protection manager certification programs;
- c. Develop strategies for enhancing equivalence among food protection manager certificates issued by certifiers; and
- d. Promote universal acceptance of certificates issued by accredited certifiers.

Chair: Appointed by Conference Chair

Nominating Committee

Role: Selects the nominee for the Conference Chair and Vice Chair. Committee reports to the Board.

Chair: Immediate Past Chair of the Conference

Program Committee

Role: Assists in planning and arranging of ~~CFP Biennial Conference~~ Meeting. Committee reports to the Board.

Chair: Appointed by Conference Chair

Resolutions Committee

Role: Except for thank you resolutions, the Resolutions Committee prepares all necessary resolutions for Board approval. Committee reports to the Board.

Chair: Appointed by Conference Chair

Strategic Planning Committee

Role: Develops a strategic plan which includes better ways to market the Conference as well as short-range and long-range strategic issues using the mission and vision of the Strategic Plan as guidance. Committee reports to the Board.

Chair: Appointed by Conference Chair

Other Committees

Appointed as needed to carry out Conference objectives.

Conference Meeting

CONFERENCE FOR FOOD PROTECTION



BIENNIAL MEETING / CONFERENCE PROCEDURES 2008

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Lincoln, CA 95648
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Website: www.foodprotect.org

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Prepared by: Constitution and Bylaws / Procedures Committee

As Amended by 2004 [CFP Biennial Conference Meeting](#) (Chandler, Arizona)

As Amended by 2006 [CFP Biennial Conference Meeting](#) (Columbus, Ohio)

As Amended by 2008 [CFP Biennial Conference Meeting](#) (San Antonio, Texas)

[As amended by 2012 CFP Biennial Meeting \(Indianapolis, Indiana\)](#)

Conference for Food Protection
Biennial Meeting / Conference Procedures

I. Introduction

Biennial Meeting /Conference Procedures are intended to supplement the Constitution and Bylaws in the conduct of Conference meetings and other Conference business.

II. Conference/Biennial Meeting Orientation

A brief orientation shall be conducted for attendees at the beginning of the CFP Biennial Conference Meeting. The orientation is solely for the purpose of explaining and answering questions relative to the structure of the Conference and procedures governing its operation.

III. Conference Resolutions

Resolutions that have been submitted in writing and have received prior approval by a majority of the Executive Board shall be presented for voting at the Assembly meeting.

IV. Conference Issues

A. Issue Submission

1. The Executive Board shall approve an Issue Submission Form.
2. Within the time specified in the Constitution and Bylaws, the Issue Submission Form shall be made available to Conference members and to other interested parties by 150 days prior to the Biennial Meeting.
3. Issue submissions shall be made electronically through the internet. Issues may be submitted to the Executive Board only in the event of a late-breaking food safety Issue. Current instructions for submission and the form are available through the internet on the Conference web site or from the Executive Director.
 - a. For the purpose of this Section a late-breaking food safety Issue is defined as an Issue that specifically relates to an event, practice or circumstance creating a situation requiring the immediate attention of the Conference that has occurred between the deadline of the Conference Issue submission deadline and the Biennial Mmeeting.
4. The deadline for Issues and their attachments is the date specified in the Constitution and Bylaws.

B. Issue Acceptance Criteria

1. In order for the Issue to be accepted by the Conference and considered for Council deliberation, all sections of the form must be completed. The Issue must be described completely, with its impact on retail distribution identified. The food protection or public health aspect of the Issue must be clearly stated to be easily understood. A suggested solution or rationale for the Issue must be sufficiently detailed to cover all aspects of the submission.
2. When the recommended solution is to change the wording of a document, such as the Food Code or a Conference document, the portion of the document to be changed must be accurately identified, the change that is requested must be specified (e.g., actual language for replacement, addition, change or deletion), and the recommended language provided.
3. A late-breaking food safety Issue submitted after the deadline may be considered for assignment to a Council if it has first been presented to the Conference Executive Board for review and acceptance. The Conference Executive Board shall inform the Issue Committee Chair of its decision to accept or reject any Issue submitted after the Issue deadline.

C. Issue Withdrawal Criteria

1. The Issue submitter can remove the Issue from the Conference before it has been assigned by the Issue Committee to a Council.
2. Once an Issue has been assigned to a Council, the Council is required to review the Issue, and at that time they can vote to remove the Issue.

D. Issue Committee Assignment of Issues to Councils

1. Immediately after the deadline for Issue submission, the Issue Committee reviews submitted Issues for their compatibility with the Conference objective, as stated in the Constitution and Bylaws, and for their public health significance and completeness.
2. The Committee Chair consults with Issue submitters as needed. Those Issues fulfilling the criteria for acceptance are numbered and assigned to one of three Councils for consideration at the [CFP Biennial Conference Meeting](#):

| | | |
|-------------|----|---|
| Council I | -- | Laws and Regulations |
| Council II | -- | Education, Certification and Administration |
| Council III | -- | Science and Technology |

3. Once an Issue is assigned to a Council, it may be given to a Committee to review in depth and develop a position for the Council to consider at the meeting. For a limited number of key Issues, Council Chairs may request a white paper be developed.

E. Issue Rejection Process

1. All Issues must be received in final form by the deadline date. If an Issue received prior to the deadline date does not meet the criteria set forth in IV. B., the Issue Chair will make a reasonable attempt to contact the submitter with a brief explanation of the problem. Failure of the submitter to correct and/or resubmit the Issue prior to the deadline date will result in rejection of the Issue.
2. At least ~~forty~~thirty(40) days before the Conference meeting, the submitter of an Issue that does not meet the criteria for acceptance or is not in the jurisdiction of the Conference is notified with a copy to the Conference Chair of the reason(s) why the proposed Issue is not acceptable. A rejected Issue may be considered a "Special Issue" if accepted by the Board and submitted by the Board to the Council at the beginning of the CFP Biennial Conference Meeting.

F. Numbering of Issues

Each Issue is given a number. The number shall reflect the year, Council assignment, and the sequence within that Council. For example, Issue 98-III-15 was submitted for the 1998 CFP Biennial Meeting, and is the fifteenth such issue assigned to Council III.

G. Presentation of the Issue to the Council

The submitter of each Issue, or the submitter's representative, is afforded the opportunity to verbally present the Issue to the Council as it is opened for discussion and to address questions that arise during its deliberation.

H. Supplemental Material to Issues

Supplemental reports, studies and other written materials required to explain an Issue should be submitted as an attachment to that Issue or as a link to an existing document on a publicly accessible website to ensure timely review by the

Councils. If that is not possible, written materials relating to an Issue may be made available to Council and Assembly members during CFP Biennial Meeting deliberations. Sufficient copies must be provided by the presenters for the Council members and provided in advance to the Council Chair for distribution. However, submitters may not expect that such materials will be read due to the press of business at the CFP Biennial Meeting. Therefore, providers may be asked to provide a brief oral summary of those materials during the appropriate Council or other meeting.

1. Conference Board members, Council members and Assembly Delegates will receive supplemental material that has been developed immediately before and during the CFP Biennial Meeting at no charge.
2. Late developing Conference committee updates shall be presented both orally and in writing.

I. Issues Packet

An Issues Packet shall be sent to all Conference members. The Issues Packet contains Issues arranged in the order assigned by the Issue Committee although the order may be rearranged prior to or during Council meetings based on a variety of considerations.

V. Councils

A. Meeting Arrangements

1. Council Chairs meet prior to the Issue deliberation to review and have a common understanding of uniform procedures to be followed during the Council meetings. This meeting is chaired by the Constitution and Bylaws/Procedures Committee Chair and the Parliamentarian will be present to answer any questions.
2. A meeting room is assigned to each of the Councils for the duration of the CFP Biennial Conference Meeting. Should Councils wish to meet at other times than scheduled, a notice must be posted as to when and where so all attendees are advised. In addition, the Executive Director must be notified of such a meeting. The Executive Director and the Chair of the Local Arrangements Committee shall assist in arranging a room.
3. Councils will post, in a conspicuous place, agendas that show the sequence in which the Issues will be discussed and will update the agenda as they dispense with each Issue. This allows a submitter or interested parties to move from Council to Council to present multiple Issues, if necessary.

4. If there are conflicts in agendas, i.e., where two or more Issues that were submitted by the same person are scheduled for discussion at the same time, the submitter should notify the Council Chairs as soon as a conflict is identified. The Council Chairs will make every effort to rearrange their agendas to accommodate presentation of the Issues by the submitter or the submitter's representative.

B. Council Member Application Process

New Council members and alternates are selected for the next CFP Biennial Conference Meeting from applications submitted to the Executive Director. All selected Council members and alternates will receive notification of their appointment from the Council Chair.

C. Conducting Business

1. Rules

Before beginning Council deliberations, each Council Chair announces the respective rules to be followed, in addition to Robert's Rules of Order, reviews the agenda, schedules, limits of time for deliberation on each Issue by any individual, voting on Issues (i.e., acceptance, no action or referral) and any other pertinent information.

2. Referral of Issues to Another Council

If a Council decides by a simple majority vote that it is necessary to refer an Issue to another Council, the Council Chair immediately notifies the Issue Chair. The Council Vice-Chair works with the Issue Chair to ensure that the Issue and all supporting documentation and rationale for reassignment is successfully communicated and assigned to the new Council. Issue Chair reassigns the Issue and confirms that a notice has been posted on the agendas of all involved Councils. Sufficient copies of the reassigned Issue shall be provided to the new Council for its use in reviewing the Issue. A reassigned Issue is generally considered at the end of the Council agenda or can be grouped with like Issues.

3. Recorder

Each Council has a recorder pre-selected by the Conference Chair assigned for the purpose of noting significant information and recommendations generated in that Council. The recorder should be reasonably free of advocacy positions with the respective Council.

4. Participation in Other Council Meetings

Council members can leave their meeting to participate in other Council meetings for a particular Issue. Council Chairs should be told beforehand by their members if they are going to do this. Councils post an agenda of Issues along with action status to keep attendees informed and to facilitate scheduling for attendee. Council members are encouraged to participate in all deliberations in their assigned Council.

5. Council Deliberations and Voting Process

- a. Councils deliberate Issues beginning with Issue 01. Should any Council member wish to change the order of discussion, the Chair requests a vote by the Council. If acceptable, the Chair tells the audience and posts a note on the door of the meeting room with the changes. Issues addressing similar subjects may be grouped under one Issue by consent of the Council members. A note describing the groupings is also posted on the door.
- b. The Council Chair reads each Issue to the Council and entertains a motion and a second in order to bring the Issue to the floor for discussion. For discussion purposes, the Council Chair recognizes members of the Council first, the submitter and then those in the audience. Should members of the audience wish to be recognized by the Chair, they need to raise their hand, await recognition by the Chair, and then step forward to address the Council. The audience may come and go in an orderly fashion should they wish.
- c. The following recommendations can be made by a Council:
 - **ACCEPT AS WRITTEN**
Goes to Assembly of State Delegates as submitted.
 - **ACCEPT AS AMENDED**
Goes to Assembly of State Delegates as amended.
 - **NO ACTION**
Goes to the Assembly of State Delegates as submitted, with reason for “No Action.”

In all cases the recommendation shall begin with the phrase “The Conference recommends...”

6. Council Reports

a. Upon conclusion of the Council meetings, each Council prepares a report. Each report will have two parts:

- (1) Part I: Issues that were recommended “Accepted As Written” and Issues that were recommended “Accepted As Amended”;
- (2) Part II: Issues that were recommended as “No Action”

b. These reports are duplicated and distributed to the CFP Biennial Meeting Conference attendees before the Assembly of State Delegates session.

VI. Caucus/Consensus Building Meetings

Caucus and consensus building meetings are held at various times during the CFP Biennial Conference Meeting for five groups: academia, consumers, local regulatory agencies, state regulatory agencies and industry. These meetings enable constituent groups to:

1. Select representatives from their respective groups to fill current or pending vacancies on the Conference Executive Board; and
2. Discuss proposed issues or issues that have been deliberated by the Councils.

VII. Assembly of Delegates

A. Role of the Assembly

The Assembly is to approve or reject recommendations from the three Councils, including amendments to the Constitution and Bylaws.

B. Workings of the Assembly

1. The Council Chairs present their reports to the Assembly in sequence beginning with Council I. Part I of each Council report is

presented first by each Council. After the Part I portion of the reports is completed the Part II portion follows.

2. Delegate voting options include “Yes,” “No,” or “Abstain.”

If a majority (simple or two-thirds as prescribed in the Constitution) of the voting Delegates vote “Yes” on Issues “accepted as submitted” or “accepted as amended” by the Council (contained in Part 1 of the Council Chair’s report to the Assembly of State Delegates) the action recommended by the Council will be taken.

If a simple majority of Delegates vote “No” on any Issues “accepted as submitted” or “accepted as amended” by the Council (contained in Part 1 of the Council Chair’s report to the Assembly of State Delegates) the Conference will take no action on the Issue.

If a simple majority of the voting Delegates vote “Yes” on Issues on which the Council took no action (contained in Part 2 of the Council Chair’s report to the Assembly of State Delegates) the Conference will take no action on the Issue.

If a simple majority of the voting Delegates vote “No” on Issues on which the Council took no action (contained in Part 2 of the Council Chair’s report to the Assembly of State Delegates) the Issue shall be referred to the Executive Board for consideration. The Executive Board will then determine the appropriate action to be taken.

3. The Delegates are asked to identify any Issues from the Council’s report they wish to extract for separate, individual discussion.
4. Issues dealing with the Constitution and Bylaws and Procedures of the Conference are automatically extracted from the Council II report.
5. The Conference Chair asks for a motion to accept the Council report minus the extracted Issues. After the motion is made, the Conference Chair requests a second to the motion. The Council report, minus the extracted issues, is voted upon. Voting options are “Yes”, “No”, or “Abstain”.
6. The Conference Chair asks for a motion to accept the Council recommendation for each extracted Issue. A second to the motion is requested for each extracted Issue.

7. Each extracted Issue before the Assembly can be discussed for clarification prior to a vote. Extracted Issues cannot be amended by the Assembly.
8. Any delegate may request the Conference Chair to announce the final vote totals on any Issue to the delegation and recorded in the Conference minutes.

VIII. Committees

A. Ad-Hoc Committees

1. Committees shall be created based on recommendations from Council and approved by the Delegates. Council Chairs shall submit for the Board approval the names of the Committee Chairs and membership of all the Committees assigned to the Council by the Executive Board meeting following the [CFP](#) Biennial Meeting.

B. Standing Committees

1. The following standing committees shall be established: the Audit Committee; Constitution and Bylaws/Procedures Committee, Issues Committee; Managers Training, Testing, and Certification Committee; Nominating Committee; Program Committee; Resolutions Committee; and Strategic Planning Committee.

C. Committee Membership

Whenever possible, depending upon the nature of the Issue, membership of the Committees should be made up of representatives from around the country and from regulatory, industry, consumers and academia.

D. Appointment of Members

1. The incoming Council Chairs appoint the Chairs of each Committee formed within their Council with the concurrence of the Conference Chair. The Conference Chair will confirm the appointment of the Committee Chair and then notify the person of their appointment. Once confirmed, the Committee Chair will select the remaining members of the Committee and submit them to the Conference Chair for final Board approval. Accepting a committee chair or member assignment requires a commitment of time and resources as described in the Constitution and Bylaws.
2. Federal participants (FDA/USDA/CDC) may appoint a member and an alternate for each Committee. The member participates in

discussion but does not vote. The alternate may act in the member's place if the member is unable to attend.

E. Committee Chair

Committee Chairs serve until the Committee charge is completed or until replaced, whichever occurs first. Under direction and guidance from the Council Chair, Committee Chairs shall develop a work plan and establish time frames to accomplish their work plan. A Committee Chair may appoint subcommittees in order to accomplish the work plan. The Conference Chair or the Chair's designee establishes a calendar for submission of interim and final Committee reports.

A Committee Chair's term shall be from appointment and last through the Executive Board Meeting following the next [CFP](#) Biennial Meeting.

F. Duties of Committee Members and the Chair

1. Committee members shall make every effort to attend meetings and participate in conference calls.
2. Committee members shall have the responsibility to notify the Committee Chair of their inability to attend a committee meeting or participate in a conference call at least fifteen days prior to the scheduled meeting or conference call.
3. Committee members shall have the responsibility to review for comment any standards, reports, recommendations, Issues, or other committee documents distributed within the time frames designated by the committee.
4. Committee members shall have the responsibility to complete work assignments within time frames designated by the committee or to notify the committee Chair or the Chair's designee of their inability to complete a work assignment.
5. A committee member who does not participate in two consecutive meetings and/or conference calls shall have their continued participation as committee members assessed by the committee Chair and evaluated by the committee. The committee member may be subject to removal from the committee. Removal of a committee member for failure to perform duties as specified above shall require the concurrence to of $2/3$ of the voting members of the committee.

G. Term of the Committee

A Committee ceases to exist when its function has been completed and an Issue has been submitted and deliberated at the [CFP Biennial Conference Meeting](#) unless it is a standing Committee, or the Council or Executive Board re-authorizes the Committee to continue to work on the Issue under consideration.

H. Committee Meetings

1. Committees may convene during the two years before the Conference meeting to complete discussions of the Issues assigned to them. The assignments are a result of previous Council recommendations that were passed by the Assembly of State Delegates. Committees can also convene just prior to the Conference meeting at the Conference meeting site.
2. If Committee members are unable to fulfill their obligation, they are to notify the Committee Chair immediately so that the Committee Chair may appoint a replacement. Members who are unable to attend a meeting may not send a substitute, but may forward any material for Committee consideration.
3. Committees may address new Issues, i.e., Issues submitted for the current year's meeting, which have been assigned to the Council, if the Council Chair and Vice-Chair deem it appropriate. The Conference Vice-Chair works with each Council Chair to ensure that Council Committees work on their assigned charges and report back to their respective Councils in a timely manner.
4. Before beginning committee meetings, each Committee Chair announces the respective rules to be followed, in addition to Robert's Rules of Order, reviews the agenda, and any other pertinent information. Only members of the committee can vote on items brought before the committee. A quorum must be participating to adopt a motion. A quorum is defined as a simple majority of committee members.

I. Committee Reports

1. Periodic Status Report

Council Chairs shall submit an interim status report of Committee activities to the Conference Chair no later than thirty (30) days prior to each Executive Board meeting that does not coincide with a Biennial Meeting. The Conference Chair can send a report back to a Council Chair with a request that a committee work further on its report. Council Chairs shall be prepared to discuss the interim report(s) at each Executive Board meeting.

2. Final Report

Committees that are assigned to a Council and Standing Committees that are submitting an Issue shall provide a final report of their activities to the Council with a recommendation in the form of an Issue submitted for Conference deliberation. This shall be done ninety (90) days in advance of the Biennial Meeting as specified in Article II, Section 3, of the Constitution and Bylaws with the report attached to the pertinent Issue.

The Committee Chair or the Committee Chair's designee should be present when the Council meets during the Biennial Meeting to present and discuss the Committee's report.

J. Committee Sign-Up Sheets

At the Conference meeting, the Executive Director will post sign-up sheets for members interested in working on standing and ad hoc Committees.

IX. Conference Recommendations Relating to the FDA Food Code

Conference recommendations to State and local governments and others that pertain to retail food protection matters and that may therefore have relevance to the FDA Food Code are conveyed to the FDA in the following manner.

1. The Conference Chair will convey to the FDA and USDA any recommendations that relate to the Food Code within 45 days of the CFP Biennial Conference Meeting.
2. The FDA and USDA will review and reconsider any material forwarded by the Conference. The FDA and USDA will respond in writing to the Conference Chair on each recommendation from the Conference. The FDA and USDA will make every effort to provide these written comments within 60 days of its receipt of the recommendations.
3. The FDA and USDA will be available to discuss any Issue with the Conference Executive Board in an effort to explore any concerns and identify mutually acceptable approaches for their resolution. The FDA and USDA will arrange to have appropriate staff available so that this discussion may occur at the Fall Board meeting following the CFP Biennial Meeting, unless by mutual agreement an earlier date is appropriate.
4. The FDA and USDA will provide a written update to the Conference Chair as a follow up on each recommendation no later

than 6 months prior to the next CFP Biennial Meeting~~Conference~~.

5. The responses from the FDA and USDA will be posted on the Conference's website as soon as possible.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 116
Issue: 2012 II-004**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Merger and Conformance of CFP Governing Documents

Issue you would like the Conference to consider:

The Constitution and Bylaws/Procedures Committee is seeking to incorporate the *Constitution and Bylaws*, the *Conference Procedures*, the *Conference Biennial Meeting Manual*, position descriptions, Conference policies, etc., into a comprehensive "Conference for Food Protection Manual" that would be divided into multiple "chapters" including the documents listed above and any other relevant items, each as a separate chapter. The *Constitution and Bylaws* will remain as a stand-alone document, potentially as Chapter 1 of the manual, with each of the other complimentary Conference documents as parts of an all-inclusive handbook that can be indexed and cross-referenced. There are areas for improvement in each of these documents (chapters) in the conformance of terminology and language between documents. Also, combining the documents into one master manual will help guarantee that any updates or corrections are performed across the entire manual to ensure that documents match accordingly. The merged and cross-referenced document can be posted to the CFP website in a format similar to the FDA Food Code where each chapter, table of contents, index, etc. shows as an individual link that is part of the whole CFP Manual.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the Constitution and Bylaws and Conference Procedures.

Recommended Solution: The Conference recommends...:

the 2012 - 2014 Constitution and Bylaws/Procedures Committee be charged to:

1. review the Conference for Food Protection governing documents (*Conference for Food Protection Constitution and Bylaws, Conference Procedures, Conference Biennial Meeting Manual, policies, position descriptions, etc.*) to facilitate a merger and conformance of these documents,
2. report back to the Executive Board on the progress of this charge, and
3. present an issue on this charge at the 2014 CFP Biennial Meeting.

Submitter Information:

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*It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name
or a commercial proprietary process.*

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 112
Issue: 2012 II-005**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Definitions for Conference Constituencies

Issue you would like the Conference to consider:

The 2010 - 2012 Constitution and Bylaws/Procedures Committee has created definitions for each of the existing constituencies that represents the Conference for Food Protection membership. Current constituencies include: Regulatory - Local, State, District/Territory and Federal; Industry - Retail, Food Service, Processing and Vending; Academia; and Consumer. While each constituency is identified in the *Conference for Food Protection Constitution and Bylaws* by title, these constituencies do not currently have a clear definition for what comprises each.

Additionally, the Committee has sought to create definitions for several new constituencies that incorporate the expanding types of members who seek to be active participants in the Conference process. The largest majority of current members in the Conference for Food Protection are categorized as "other" because they do not fall within the existing Conference constituencies. New constituencies for consideration by the Conference include: Food Industry Support, Emeritus (retiree), and Student. The Vending Industry constituency has been expanded to include the Distribution Food Industry as a shared constituency titled "Vending and Distribution Food Industry".

Creation of the new constituencies does not alter representation to the CFP Executive Board, Councils, or to the Conference Voting Delegates as currently prescribed in the *CFP Constitution and Bylaws*.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the Constitution and Bylaws and Conference Procedures.

Recommended Solution: The Conference recommends...:

newly created language, noted below, relative to definitions for Conference constituencies, as developed by the Constitution and Bylaws/Procedures Committee, be incorporated into the *Conference for Food Protection Constitution and Bylaws* in Article III Registration and Membership, as a new Section 5 (all new language is in underline format).

Article III Registration and Membership

Section 5. Membership in the Conference is classified into constituencies that are representative of the key stakeholder groups which support the objectives of Article I and facilitate the requirements of Article IV. The Conference constituencies are defined as follows:

Subsection 1. Regulatory is comprised of those officers, agents or authorized representatives having authority over the regulation of food establishments, production, processing, vending, or distribution, or has oversight for prevention of foodborne illness in accordance with rule and/or law in their respective governmental jurisdiction. Sub-categories of this constituency include:

a. Local Regulator = government employee or agent representing a territorial division of local government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

b. State Regulator = government employee or agent representing a territorial division of state government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

c. Federal Regulator = government employee or agent representing a program or agency of the Federal Government with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

d. District/Territory Regulator = government employee or agent representing the U.S. District of Columbia or one of the six U.S. Territories with responsibility for regulation of food establishments, production, processing, vending or distribution, or has oversight for prevention of foodborne illness.

Subsection 2. Industry is comprised of those employees, agents or executives representing business entities that operate food establishment(s), production, processing, vending, or distribution; or, providers of an industry related service to such food operations; or, representatives of a professional organization or trade association that promotes, supports and/or markets to/for the food industry or its related services. Sub-categories of this constituency include:

a. Food Service Industry = employees, agents or executives representing business entities that operate food service establishments. Examples include, but are not limited to, restaurants of all sizes/types/styles of service, caterers, military food service, institutional and other health care food service, schools and university food service, common carrier food service (planes, trains, etc.), corporate food service operations, and government food service.

b. Retail Food Industry = employees, agents or executives representing business entities that operate retail food establishments. Examples include, but are not limited to, grocery stores, supermarkets, convenience stores, retail pharmacies, produce markets, roadside stands, department stores, warehouse sales clubs, seafood markets, retail bakeries, military base PX/groceries, and liquor stores.

c. Processing Food Industry = employees, agents or executives representing business entities that manufacture, process, package or label food items for wholesale sale. Examples include, but are not limited to, commercial food manufacturing, canning, packaging, commercial bakeries, commercial meat slaughter and processing, packing houses and distribution centers, farming and agricultural processing and packing operations, ice processing, and packing plants.

d. Vending and Distribution Food Industry = employees, agents or executives representing business entities that own and/or operate food companies that vend or distribute food either wholesale or retail. Examples include, but are not limited to, coffee and food vending service companies, service companies, commissaries, food supply chain operators, wholesale distributor, shipping lines, brokers, equipment manufacturers, and suppliers of products and services to operating service companies.

Subsection 3. Food Industry Support = employees, agents or executives representing business entities that provide direct or support services to food service establishments, retail food establishments, processing food operations, vending and distribution food operations. Examples include, but are not limited to, professional organizations, trade associations, pest control companies, auditing firms, standards associations, consultants, cleaning and sanitation management operations, training and/or testing companies or services, equipment and supply operations, software and technology, dieticians or dietary managers, media and legal representatives.

Subsection 4. Academia = academic professionals employed by a college or university involved in education or research involving food sciences, food operations, or food safety. Examples include, but are not limited to, professors, adjunct instructors, researchers, teaching assistants, and extension agents.

Subsection 5. Consumer = employees, agents or executives representing consumer advocacy organizations supporting food safety, food wholesomeness, allergen awareness, food policy matters and food standards and guidelines.

Subsection 6. Emeritus = members retired or honorably discharged from full-time work and no longer receiving compensation for work related to the Conference's mission. This constituency is designed for those professionals who, prior to retirement, were members of any Conference stake holder group in good standing of the Conference for Food Protection for at least three biennial cycles (6 years). Previous membership does not have to be in contiguous biennial cycles. An emeritus member may participate as an attendee/observer in all usual Conference functions such as attending the Biennial Meeting, including workshops, Council deliberations, Assembly of Delegates, and social functions. Emeritus members may serve as a member of a Council Committee, as a Council Committee Chair and participate and vote in constituency caucus meetings. The Executive Board may elect to assign an emeritus member to participate in other Conference related activities.

Subsection 7. Student = any student enrolled in a two-year, four-year, or graduate program in a college or university involving food sciences, food operations or food safety. A student member may participate as an attendee/observer in all usual Conference functions such as attending the Biennial Meeting, including workshops, Council deliberations, Assembly of Delegates, and social functions. Student members may serve as a member of a Council Committee. The Executive Board may elect to assign a student member to participate in other Conference related activities.

Submitter Information:

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It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 113
Issue: 2012 II-006**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Council Committee Size and Constituency

Issue you would like the Conference to consider:

The 2010 - 2012 Constitution and Bylaws/Procedures Committee has addressed recommendations from the 2010 Biennial Meeting as specified in Issue 2010 II-035. The Committee was charged with developing guidelines regarding committee structure, participant responsibilities, membership size, and constituency representation. To meet this charge, a new Article XV, Section 8, has been developed that clarifies committee size and constituency. Additionally, it is recommended that Section VIII, Paragraph D of the *CFP Conference Procedures* be moved into Article XIV, Section 1, of the *CFP Constitution and Bylaws* with minor revisions.

Language to amend the *CFP Constitutions and Bylaws* was developed to incorporate a minimum and maximum council committee size along with a balanced constituency [note: council committees (ad-hoc) are those established or re-created following every Biennial Meeting and report to a designated Council Chair]. This language provides for establishment of a manageable committee size to accommodate and achieve a voting quorum as well as incorporate active input and participation from other CFP member volunteers. The recommended amendment also provides a procedure structure for committee turnover between subsequent biennial meetings and for changes to members and/or constituencies between biennial meetings.

The recommendation to amend and move language from the *CFP Conference Procedures* into the *CFP Constitution and Bylaws* is also consistent with the charge specified in Issue 2010 II-035 and relevant to identification of committee membership. This language clarifies the appointment of committee chairs and committee members with Board approval and the appointment of Federal participants to each committee as a non-voting member.

Public Health Significance:

The Constitution and Bylaws/Procedure Committee shall submit recommendations to improve the Conference administrative functions through proposals to amend the *CFP Constitution and Bylaws* and *CFP Conference Procedures*.

Recommended Solution: The Conference recommends...:

1) that relevant sections in paragraph D. Appointment of Members, under Section VIII. Committees, in the *CFP Conference Procedures*, including the subsection on Federal agency participation, be moved to Section 1 of Article XIV Committees, in the *CFP Constitution and Bylaws*; and

2) that newly created language relative to Council Committee size and constituency be incorporated into the *CFP Constitution and Bylaws* in Article XV, as a new Section 8.

The recommended language changes are noted as follows (new language is underlined; language to be deleted is in strikethru format):

CFP Conference Procedures

VIII. Committees

A. thru C. No change.

D. Appointment of Members

~~1. The incoming Council Chairs appoint the Chairs of each Committee formed within their Council with the concurrence of the Conference Chair. The Conference Chair will confirm the appointment of the Committee Chair and then notify the person of their appointment. Once confirmed, the Committee Chair will select the remaining members of the Committee and submit them to the Conference Chair for final Board approval. Accepting a committee chair or member assignment requires a commitment of time and resources as described in the Constitution and Bylaws.~~

~~2. Federal participants (FDA/USDA/CDC) may appoint a member and an alternate for each Committee. The member participates in discussion but does not vote. The alternate may act in the member's place if the member is unable to attend.~~

E. thru J. No language change - renumbering only as paragraphs D through I.

CFP Constitution and Bylaws

Article XIV Committees

Section 1. All appointments to Conference Committees shall be made to provide a balance in representation of the stakeholders in the particular matter under consideration.

Subsection 1. The incoming Council Chairs appoint the Chairs of each Committee formed within their Council with the concurrence of the Conference Chair. The Conference Chair will confirm the appointment of the Committee Chair and then notify the person of their appointment. Once confirmed, the Committee Chair will select the remaining members of the Committee and submit them to the Conference Chair for final Board approval.

Subsection 2. Federal participants (FDA/USDA/CDC) may appoint a member and an alternate for each Committee. The member participates in discussion but does not vote. The alternate may act in the member's place if the member is unable to attend.

Section 2. thru 5. No change.

Article XV Duties of the Committees

Section 8. Council Committee Size and Constituency: Committee membership discussion is limited to Council committees only. Membership on Standing Committees or Executive Board Ad Hoc Committees is defined by the CFP Executive Board.

Subsection 1. Committee size.

Voting membership for council committees should be comprised of at least eleven (11) voting members with a maximum of no more than twenty-three (23) voting members.

a. Minimum size: Voting membership for a minimum size committee is the Chair, Vice Chair, two (2) representatives from state regulatory, two (2) representatives from local

regulatory, two (2) representatives from industry, one (1) from an academic institution, one (1) consumer representative, and one elective (1) representative which may be selected from any Conference constituency.

b. Maximum size: Voting membership for a maximum size committee is the Chair, Vice Chair, four (4) representatives from state regulatory, four (4) representatives from local regulatory, eight (8) representatives from industry, one (1) from an academic institution, one (1) consumer representative, and three elective (3) representatives that may be selected from any Conference constituency.

c. Any committee comprised of membership numbers between the minimum and maximum shall make every reasonable effort to maintain constituency balances.

Subsection 2. The Chair and Vice Chair of a council committee may be selected from any of the Conference constituencies as approved by the Council Chair and the Executive Board, provided each is from a different constituency. If a Committee Chair does not receive sufficient volunteers in the appropriate constituencies, they shall confer with the Council Chair to seek volunteers from the Conference membership making every reasonable effort to maintain constituency balances. The Committee Chair, in conference with the Council Chair and/or Executive Board, shall have the flexibility to fill vacancies in the voting membership with unbalanced constituency representation if deemed necessary to reach a minimum of 11 voting committee members. All proposed committee members must be approved by the Executive Board in accordance with Article XIII, Section 6, Subsection 4 of the Constitution and Bylaws.

Subsection 3. A maximum of 23 voting members are permitted on a council committee. All volunteers not selected for a voting position shall be offered an "at-large" non-voting position on the committee. There is no limit to the number of at-large non-voting members that may participate. At-large members will be included and allowed to participate in all committee functions, including but not limited to, meetings, conference calls, emails, deliberations, research and activities, but will not have an individual vote on committee actions. All voting members and at-large non-voting members shall be identified as such on the committee roster along with their respective constituency.

Subsection 4. In the event a council committee voting member departs such committee during a biennial cycle, an at-large member of the same constituency as the departing member shall be selected by the Council Chair to fill the vacancy, subject to approval by the Council Chair and Executive Board in accordance with Article XIII, Section 6,

Subsection 4 of the Constitution and Bylaws. If a council committee voting member changes constituency during a biennial cycle, and there is no vacancy in that member's new constituency, the member will need to transition from service as a voting member on that committee and may continue to serve as an at-large non-voting member for the remainder of the biennial cycle. This transition will occur upon notification to the Committee Chair.

Subsection 5. The Chair of a council committee that continues over more than one biennial cycle shall assess the immediate previous committee membership to ensure at least 50% of the ongoing committee's voting membership are new members that did not serve as voting members on the immediate previous committee. This will ensure that an increased number of at-large members or others have an opportunity to participate as a voting member over time when there are a large number of volunteers.

Submitter Information:

Name: Lee M. Cornman, Chair
Organization: Constitution and Bylaws Committee
Address: FL Dept. of Agriculture and Consumer Services 3125 Conner Blvd. MS
C-18
City/State/Zip: Tallahassee, FL 32399
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*It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name
or a commercial proprietary process.*

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 080
Issue: 2012 II-007**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Limit Hand Hygiene Committee Size

Issue you would like the Conference to consider:

A separate issue addressed re-creation of the Hand Hygiene Committee. The 2010-2012 Hand Hygiene Committee believes that action on the complex topic of Hand Hygiene would be enhanced by limiting the committee size to facilitate involvement of all committee members on conference calls.

Public Health Significance:

The 2010-2012 Hand Hygiene Committee believes that progress towards its charge was impeded because of committee size. Interest in participating in the Committee was very high, with 50+ people volunteering to serve. The Committee divided into three sub-committees to address the charge, and attempted to use a steering committee to review progress made by the three groups. This multiplied the time commitment for steering committee members and sub-committee chairs who wished to participate in each of the sub-committees. Many committee members dropped out because of the extra time commitment, which hindered continuity. Additionally, the discussions in one committee would have benefited progress of other committees in making informed recommendations on specific situations where application of alternatives to handwashing may be appropriate to reduce public health risk.

The Committee recommends that a limited committee size will lead to a more coordinated work product for this complex topic. While the CFP conference call system can accommodate up to 25, scheduling a conference call for this number of people is problematic.

Recommended Solution: The Conference recommends...:

the size of the 2012-2014 Hand Hygiene Committee to be limited to less than 20 members (including advisors and chairs), to facilitate participation of the full committee on conference calls while maintaining adequate representation from relevant stakeholders.

Submitter Information:

Name: Mark Sampson, Co-Chair
Organization: 2010-2012 Hand Hygiene Committee

Address: Sterilox Food Safety, 162 Ash Way
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E-mail: msampson@puricore.com

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 026
Issue: 2012 II-008**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report - Issue Committee

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Issue Committee requests acknowledgement of its final committee report and requests that the committee be assigned continuation charges to continue improving the Issue submission and review process.

Public Health Significance:

Clarification and improvement of the CFP Issue process will ensure that concerns brought forward from all stakeholders are given an equal opportunity for consideration and final approval.

Recommended Solution: The Conference recommends...:

1) 2012 Issue Committee Final Report (attached) be acknowledged along with the following supporting attachments:

- a. *Council I 2010 Final Issue Recommendations with Actions*
- b. *Council II 2010 Final Issue Recommendations with Actions*
- c. *Council III 2010 Final Issue Recommendations with Actions*
- d. *Committee Submitted Issues - Review Process and Checklist*
- e. *2010-12 Issue Committee Roster*

2) Issue Committee members be thanked for their service.

3) 2012-14 Issue Committee be assigned the following continuation charges with the requirement to report back to the 2014 Biennial Meeting:

a. Complete the charge from Issue 2010 II-30 to "Expand Archive and Posting Capabilities of CFP Approved Documents" on the Conference web site and develop a process / procedure to ensure posting of all:

- i. Documents and attachments modified or edited after Issue packets are made available with reference to the original Issue number and attachment titles;
- ii. Documents and attachments modified during and after Council deliberations at the Biennial Meetings; and

iii. Final version of conference approved guides, documents, and presentations in both PDF and the original editable format.

- b. Work with the Constitution, Bylaws, and Procedures Committee to review, consolidate, and update CFP governing documents, guidelines, and instructions regarding:
- i. Preparation, submission, and presentation of Issues, final committee reports, and Issue attachments.
 - ii. Roles and responsibilities for each biennium.
- c. Review the *CFP Commercialism Policy* as it relates to Issue "attachments" (e.g., peer reviewed articles, industry sponsored studies, letters of recommendation, presentations).
- d. Develop a "masthead, flag, nameplate, or style guide" to readily identify approved and posted documents as belonging to the Conference.

Submitter Information:

Name: Aggie Hale, Issue Co-Chair
Organization: Issue Committee
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City/State/Zip: Tallahassee, FL 32399-1650
Telephone: (850) 245-5549 Fax:
E-mail: aggie.hale@freshfromflorida.com

Attachments:

- "Council I 2010 Final Issue Recommendations"
- "Council II 2010 Final Issue Recommendations"
- "Council III 2010 Final Issue Recommendations"
- "Issue Review Checklist - Committee Issues"
- "Issues Committee Final Roster"
- "Issue Committee FINAL Report 2012"

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LETTER CHARGES CFP WEB POSTING

Issue: 2010 I-002 Title: Report – Plan Review Committee

Recommended Solution:

The Conference recommends re-creation of the committee to review and update the following Conference for Food Protection documents and present their finding at the 2012 CFP Biennial Meeting:

- Temporary Food Establishments
 - Permanent Outdoor Cooking Operations
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 I-008 Title: Wild Harvested Mushrooms

Recommended Solution:

The Conference recommends that the Council consider forming a committee to continue discussion of this issue and that the following language and attachments for consideration to be placed on the CFP website as guidance listing steps that states can use to develop and implement a wild harvested mushroom program for their state. The charges will be:

- Develop guidelines to help regulators address the issue of wild mushrooms in food establishments
 - Report back at the 2012 CFP.
 - The name of the committee will be Wild Harvested Mushrooms Committee.
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 I-010 Title: USFDA Recall Policy Revision

Recommended Solution:

The Conference Recommends that a Recall Evaluation Committee be formed and work with FDA, USDA, and states on the following charge:

- Clarify the system of classification for recalls established by USDA and FDA.
 - Create clarifying instructions and procedures that industry and consumers can easily understand and comply with.
 - Recommend enforceable and reasonable time frames for execution of recall communications and actions.
 - Clarify the information required to be included in supplier recall notifications.
 - Recommend expectations for the notification of end-users, including restaurant and retail customers as well as school and institutional food service.
 - Report back to the 2012 Biennial Meeting.
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 I-011 Title: Signage Requirement on Reporting of Employee Health Conditions

Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending that Section 2-103.11 be amended.

Amend Section 2-103.11 Person in Charge by adding Paragraph (N) to read:

(N) " A verifiable system needs to be in place to communicate to employees the importance of employee health as described in, Subparagraphs 2-201.11 (A)(1), (2), (3), (4), and (5) to the permit holder, such as posting a sign, written agreement, or training related to reporting symptoms and diagnosis."

LETTER **CHARGES** **CFP WEB POSTING****Issue: 2010 I-015****Title: Criticality Implementation & Education Committee – Criticality Training Slides****Recommended Solution:**

The Conference recommends

- acceptance of the PowerPoint presentation and speaker notes titled "Re-designation of Food Code Provisions" and place it in a downloadable format under the "Conference Developed Guidance and Documents" section of the Conference web site.
- that a letter be sent to FDA requesting the same PowerPoint presentation and speaker notes be made available through its web site.

 LETTER **CHARGES** **CFP WEB POSTING****Issue: 2010 I-016****Title: Criticality Implementation & Education Committee – Frequently Asked Questions****Recommended Solution:**

The Conference recommends that a letter be sent to FDA requesting that they:

- provide answers to the list of FAQs included in the attached document.
- have the FAQs and answers available for stakeholders on or before June 30, 2010 by posting on the FDA website.

 LETTER **CHARGES** **CFP WEB POSTING****Issue: 2010 I-017****Title: Criticality Implementation & Education Committee – Timely Correction of****Violations****Recommended Solution:**

The Conference recommends that a letter be sent to the FDA requesting revision and/or addition to the following three sections in Chapter 8, Compliance and Enforcement in the FDA

See final Issue Recommended Solution for full details to include in letter **LETTER** **CHARGES** **CFP WEB POSTING****Issue: 2010 I-019****Title: 4-501.114-Manual and Mechanical Warewashing Equipment Chemical Sanitation****Recommended Solution:**

The Conference recommends that a letter be sent to FDA requesting that Section 4-501-114 be revised as follows:

See final Issue Recommended Solution for full details to include in letter **LETTER** **CHARGES** **CFP WEB POSTING****Issue: 2010 I-021****Title: 3-304.14 Wiping Cloths, Use Limitation****Recommended Solution:**

The Conference recommends that a letter be sent to FDA requesting written clarification in the Food Code or Annexes on how the FDA may recognize the appropriate use of dry cloths, including disposable towels, for wiping down counters and equipment.

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 I-022 Title: Key Drop

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting the following changes to the Food Code:

that § 2.103.11 of the FDA Food Code be amended by adding a new ¶ 2.103.11 (F), and renumbering subsequent paragraphs in this Section appropriately, to specifically allow for the practice of key access deliveries by including the following language:

See final Issue Recommended Solution for full details to include in letter

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 I-024 Title: Management Responsibility Code Section 2-101.11

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting that the language in Food Code Section 2-101.11 (Responsibility and Assignment) be added with the following language and that additional changes to Chapter 2 be made as necessary to be consistent with this change.

Responsibility 2-101.11 Assignment*

(C) The PERMIT HOLDER through the certified food manager or person in charge (PIC) shall ensure that standard operating procedures that ensure compliance with the requirements of this Code are developed & implemented as specified under 8-201.12 (E) & (F);

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 II-021 Title: Food Protection Manager Certification

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting a change to the Food Code to require that at least one Person in Charge in each food establishment (exempting certain low risk establishments) be certified in food protection through a manager certification program that conforms to the Conference for Food Protection Standards for Accreditation of Food Protection Manager Certification Programs.

See final Issue Recommended Solution for full details to include in letter

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 II-002 Title: Amend "Outcome" Section of Program Standard No. 5

Recommended Solution:

The Conference recommends that a letter be written to FDA endorsing and recommending that the amendment below (indicated in underline format) be included to the appropriate Section of FDA's *Voluntary National Retail Food Regulatory Program Standards, Standard 5 - April 2009*:

See final Issue Recommended Solution for full details to include in letter

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 II-003 Title: Report and Re-creation – Interdisciplinary FBI Committee

Recommended Solution:

The Conference recommends re-creation of the Foodborne Illness Training Committee with the following charges:

- continuing to track the progress of prominent disease training programs currently in development; and
 - reporting back to the 2012 Biennial Meeting of the Conference for Food Protection.
-

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 II-005 Title: Re-create – Inspection Form Scoring Committee

Recommended Solution:

The Conference recommends re-creating the Inspection Form Scoring Committee during 2010-2012 to:

1. Continue working with academic researchers to:

- investigate and determine the most effective Foodservice Establishment scoring system, based on the current identified risk factors and interventions identified in the FDA Food Code, and for use with the current FDA Food Establishment Inspection Form; including the possible development of a scoring system for the FDA Model Food Establishment Inspection Report Form.
- determine the most effective way to communicate the Food Establishment Inspection scores to the public so they have access to information in advance of choosing where to dine or where to purchase food items; including the possible development of a method to post inspection scores so that the public has access to the information in advance of choosing where to dine and purchase food items.
- identify funding sources to conduct research and provide a letter of support for funding already identified.

2. Report the committee's findings back to the Conference for Food Protection at the 2012 Biennial Meeting.

LETTER **CHARGES** **CFP WEB POSTING**

Issue: 2010 II-006 Title: Report – Electronic Reporting Committee

Recommended Solution:

The Conference recommends that a more prominent link be provided on the CFP web site to the 2006-2008 Electronic Data Capture and Reporting Committee Survey.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-007

Title: Re-create – Electronic Reporting Committee (title changed: Electronic Reporting)

Recommended Solution:

The Conference recommends that the Conference Chair write a letter to the Food and Drug Administration (FDA) requesting that they develop a database management tool that will enable the analysis of future baseline survey data collected by regulatory agencies to assess and enhance the effectiveness of food safety programs and report back to the Conference for Food Protection.

 LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-009

Title: Allergen Management Course Addition to Appendix B-1, Standard 2

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting:

- that upon its completion the FDA Allergen Management Course be reviewed by the re-created CFP Food Allergen Committee.

See final Issue Recommended Solution for full details to include in letter

 LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-010

Title: Emergency Management Course Additions to Appendix B-1, Standard 2

Recommended Solution:

The Conference recommends that a letter be sent to the FDA requesting that Appendix, B-1, Standard 2 - Trained Regulatory Staff, FDA Draft Voluntary National Retail Food Regulatory Program Standards (2009) be revised to:

See final Issue Recommended Solution for full details to include in letter

 LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-011

Title: Clarifying Language for Step 2, Standard 2 – Program Standards

Recommended Solution:

The Conference recommends that a letter be sent to the FDA requesting that Standard 2 - Trained Regulatory Staff, *FDA Voluntary National Retail Food Regulatory Program Standards (2009)* be revised as follows:

See final Issue Recommended Solution for full details to include in letter

 LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-012

Title: Clarifying Definitions for Step 4, Standard 2 – Program Standards

Recommended Solution:

The Conference recommends that a letter be sent to the FDA requesting:

- that the terms "Trainer" and "Training Standard" as defined in the FDA Voluntary National Retail Food Program Standards (2009) be revised to reflect the language below.
- that Step 4, Standard 2 be revised to include clarification regarding the "Training Standard" requirements as presented below.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-013 Title: Re-create – CFSRP Work Group

Recommended Solution:

The Conference recommends that a 2010-2012 Certification of Food Safety Regulation Professionals (CFSRP) Work Group be re-created to address the following charges:

1. Collaborate with the FDA Center for Food Safety and Applied Nutrition and the FDA Division of Human Resource Development to:
 - Review all initiatives: existing, new or under development; involving the training, evaluation and/or certification of Food Safety Inspection Officers. This collaborative working relationship will ensure the sharing of information so as not to create any unnecessary redundancies in the creation of work product or assignment of tasks/responsibilities.
 - Review and revise, as needed, Standard 2 classroom curriculum, time frame for completion of Steps 1 through 4 for new hires or staff newly assigned to the regulatory retail food protection program.
 - Determine if the CFP Field Training Manual and forms have completely addressed all recommendations received as part of the 2007 Assessment of Training Needs (ATN) pilot project.
2. Eliminate the potential redundancy of multiple verification tools (*FDA Retail Food Level I Performance Audit and FDA Procedures for Standardization and Certification of Retail Food Inspection / Training Officers*) utilized by FDA programs, work in collaboration with FDA's Center for Food Safety and Applied Nutrition, FDA's National Retail Food Team and the FDA's Division of Human Resource Development to:
 - Conduct a pilot project over the next year using the *FDA Retail Food Level I Performance Audit* with a limited and selected number of jurisdictions. The *FDA Performance Audit* will be piloted for use during the two joint inspections conducted as part of the quality assurance component of *Standard 4 - Uniform Inspection Program*. An outline of the pilot project objectives, protocol, and projected timeline is included as Attachment A with this Issue. The CFP CFSRP work group will submit a report to the 2012 Biennial Meeting that documents the result of the pilot project and any recommendations for the use of verification tools as part of the FDA Program Standards; and,
 - Conduct a joint assessment of *FDA Standardization Procedures* and *FDA Performance Audit* documents to determine if both verification tools are equally viable with distinct purposes and outcomes; and,
 - Explore the feasibility of merging these existing verification tool documents and provide a plan for consolidation of such; and,
 - Upon determination, assess the placement and administration of final verification tool(s) within the *FDA Program Standards* as appropriate, or separately as appropriate; and,
 - With input and guidance from the CFSRP Work Group, FDA will determine if modifications to their draft *FDA Performance FDA Retail Food Level I Performance Audit* and/or *Standardization* documents are needed. Any modifications that would include changes to the Program Standards will be submitted as Issues by the CFP CFSRP Work Group to the 2012 Biennial Meeting.
3. Collaborate with FDA, other federal agencies, professional and industry associations to research what criteria is currently being used to assess the education and training qualifications of independent third party auditors that have been contracted to conduct institutional foodservice, restaurant, and retail food compliance inspections in lieu of a State/local/tribal regulatory retail food program. The re-created Work Group is to provide a report to the 2012 Biennial Meeting that:
 - Assesses the number of jurisdictions and geographic areas where retail food compliance Inspections are conducted by independent third party auditors in lieu of a regulatory compliance program;
 - Delineates the reasons jurisdictions have moved to a third party auditor inspection compliance program;

- Summarizes criteria used to select third party auditors for inspection compliance oversight responsibilities including, but not limited to, education and training qualifications;
 - Assesses and determines appropriate training and standardization processes/protocols for third party auditors, and
 - Identifies any agencies/organizations/working groups currently addressing education and training standards for third party auditors conducting retail food compliance inspections.
- Based on the above research, the work group will provide a recommendation to the Conference as to what actions/initiatives, if any, need to be undertaken to provide a national structure for ensuring that third party auditors possess the necessary knowledge, skills, and abilities to conduct retail food program compliance inspections.
4. Evaluate and determine the best approaches to promoting awareness and implementation of the national training model contained in the CFP Field Training Manual and forms, Appendix B-2, Standard 2. The Work Group will:
 - Research the use of websites, list serves, newsletters, testimonials, presentations, and training workshops, etc.
 - Assess opportunities for enhancing the electronic versions of the CFP Field Training Manual and forms to minimize paperwork.
 5. Report back to the 2012 Biennial Meeting its findings regarding the above charges.

LETTER CHARGES CFP WEB POSTING OTHER
Issue: 2010 II-015 Title: FPMTTC Committee – Amend Training Language in Standards
Recommended Solution:

The Conference recommends revising the *Standards for Accreditation of Food Protection Manager Certification Programs*, Annex B, Section B 3, as noted below to clarify information available regarding food safety content to assist training program developers and evaluators.
Note: new language below is in underline format; language to be deleted is in strike through
See final Issue Recommended Solution for full details regarding edits

LETTER CHARGES CFP WEB POSTING OTHER
Issue: 2010 II-016 Title: FPMTTC Committee – Amend Section 5 of the Standards for Accreditation
Recommended Solution:

The Conference recommends revising the *Standards for Accreditation of Food Protection Manager Certification Programs*, Section 5 - *Food Safety Examination Administration* with substantial revisions as follows:
See final Issue Recommended Solution for full details regarding edits

LETTER CHARGES CFP WEB POSTING OTHER
Issue: 2010 II-017 Title: FPMTTC Committee – Remove "monitor" from Standards for Accreditation
Recommended Solution:

The Conference recommends removing the definition and use of the term "monitor" from the *Standards for Accreditation of Food Protection Manager Certification Programs* in the following sections:
See final Issue Recommended Solution for full details regarding edits

LETTER CHARGES CFP WEB POSTING OTHER
Issue: 2010 II-018 Title: FPMTTC Committee – Name Change
Recommended Solution:

The Conference recommends

- Changing the name of the CFP standing committee **from** "Managers Training, Testing and Certification Committee" (as listed in the *CFP Constitution and Bylaws*), and "Food Protection Manager Training, Testing and Certification Committee" (as listed in the *FPM TTC Committee Bylaws*) **to** "Food Protection Manager Certification Committee" in all CFP documents, including the *CFP Constitution and Bylaws 2008* in Article XIV Committees, Section 2. Subsection 4: Food Protection Managers Training, Testing and Certification Committee.
- Adding a new article to the *FPM TTC Committee Bylaws* specifying the full name of the committee and re-numbering all subsequent sections: Article I. Name. The Name of the Committee is Food Protection Manager Certification Committee.

The Conference further recommends that all other references in the CFP Constitution and Bylaws, FPM TTC Committee Bylaws, and information on the CFP Website be updated to reflect the new full committee name or the acronym FPMCC.

Refer to the FPM TTC Committee Report Issue attachment *Food Protection Manager Training, Testing, and Certification Committee Bylaws* for complete proposed revision.

LETTER

CHARGES

CFP WEB POSTING

OTHER

Issue: 2010 II-019 Title: FPM TTC Committee – Revise Bylaws

Recommended Solution:

The Conference recommends adopting the Committee Bylaw revisions as proposed by the Food Protection Manager Training, Testing and Certification Committee.

See final Issue Recommended Solution for full details regarding edits

LETTER

CHARGES

CFP WEB POSTING

Issue: 2010 II-020 Title: New or Continuation Charges for the Renamed FPM TTC Committee

Recommended Solution:

The Conference recommends that the Food Protection Manager Certification Committee (FPMCC), a standing committee of the Conference be charged to:

- continue working with the CFP Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the *Standards for Accreditation of Food Protection Manager Certification Programs* in an up-to-date format.
- request that ANSI and the Certification Providers will examine all options for resolving the exam security and independence issues as they pertain to trainers serving as test administrators and come to consensus with a suggested action plan as follows:
 - By April of 2011, a recommended solution to be reviewed by the ANSI / Certification providers workgroup
 - By June of 2011 the FPMCC, Certification Providers and ANSI have reached consensus on the recommended solutions
 - The draft recommendations will be submitted to the Executive Board for their review at the August 2011 Board meeting
 - Recommendations approved by the Executive Board will be submitted as an issue at the 2012 biennial meeting
- Pending Conference approval, the new requirements will be implemented no later than January of 2013. Investigate if the *Standards for Accreditation of Food Protection Manager Certification Programs* should create more alignment with ISO (International Standards Organization) 17024 and propose changes if needed.
- determine how Committee membership vacancies and change of membership representation are addressed in the Committee bylaws and propose changes if needed.
- report back to the Executive Board and the 2012 Biennial Meeting of the Conference for Food Protection.

LETTER **CHARGES** **CFP WEB POSTING**
Issue: 2010 II-022 Title: Report – Program Standards Committee
Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending that:

- the FDA continue to send the Retail Resource Disk to all enrolled jurisdictions and that a hard copy be provided to enrolled jurisdictions only if requested.
- the following documents be made available on the FDA web site:
 - summary of Program Standards changes from 2007 and 2009
 - the two most current versions of the Program Standards (currently, 2007 and 2009)
 - all Supplemental Tools and Materials
 - the FDA Data Collection Manual

LETTER **CHARGES** **CFP WEB POSTING**
Issue: 2010 II-023 Title: New Definition for Voluntary Retail Food Regulatory Program Standards
Recommended Solution:

The Conference recommends that the Conference Chair send a letter to the FDA Commissioner requesting:

- that the Definitions in the Program Standards be amended to include designation in numerical order, and
- that the following definition be added:
 Self-Assessment Update - Comparison of one or more program elements against the Voluntary *National Retail Food Regulatory Program Standards* between the required 60-month, periodic Self-Assessments.

LETTER **CHARGES** **CFP WEB POSTING**
Issue: 2010 II-024 Title: Amendments to Program Standard No. 9 – Program Assessment
Recommended Solution:

The Conference recommends that the Conference Chair send a letter to the FDA Commissioner requesting that Program Standard No. 9 be amended to read as specified in the attached document titled: *Proposed Amendments to Standard No. 9 - Program Assessment*.

See final Issue Recommended Solution for full details to include in letter

LETTER **CHARGES** **CFP WEB POSTING**
Issue: 2010 II-025 Title: Financial Support for Voluntary Retail Food Regulatory Program Standards
Recommended Solution:

The Conference recommends that the Conference Chair send a letter to the FDA Commissioner recommending that FDA enhance national food safety by providing multi-year funding through appropriate mechanisms to state, territorial, tribal, and local food safety agencies enrolled in the Voluntary National Retail Food Regulatory Program Standards to build the necessary infrastructure to assess, implement and audit program efforts to attain standards.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-026 Title: Re-create – Program Standards Committee

Recommended Solution:

The Conference recommends re-creating the Program Standards Committee to work on the following charges:

1. Serve as a stakeholder group to provide input to an FDA internal working group which will be considering administrative functions such as:
 - Criteria for verification auditors
 - Recommending additional changes or improvements to the Program Standards
2. Formulate resolutions to issues brought before the committee.
3. Report back to Conference at the 2012 CFP Biennial Meeting.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-027 Title: Change in Program Standard No. 6 and Appendix F, Compliance and Enforcement

Recommended Solution:

The Conference recommends that a letter be sent to the FDA requesting that the modified language proposed be incorporated into Standard 6 and Appendix F, Supplement to Standard 6 - Compliance and Enforcement of the Voluntary National Retail Food Regulatory Program Standards.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING

Issue: 2010 II-028 Title: Report – Constitution and Bylaws Committee

Recommended Solution:

The Conference further recommends that the Constitution and Bylaws/Procedures Committee continue their review of the provisions concerning definitions of membership categories, report back to the Executive Board, and submit, if deemed necessary, recommended changes as an issue at the 2012 Biennial Meeting.

LETTER CHARGES CFP WEB POSTING OTHER

Issue: 2010 II-029 Title: Constitution – New Article Titled "Parliamentary Authority"

Recommended Solution:

The Conference recommends that a new Article, entitled Parliamentary Authority, be added to the Constitution and Bylaws and placed before the current Article XIX of the Constitution. The new Article would become Article XIX, the current Article XIX would become Article XX, and the current Article XX would become Article XXI.

Article XIX Parliamentary Authority

The rules of parliamentary procedure comprised in the current edition of Roberts Rules of Order, Newly Revised, shall govern all proceedings of the Conference and the Executive Board, subject to such special rules as have been or may be adopted.

LETTER CHARGES CFP WEB POSTING**Issue: 2010 II-030****Title: Expand Archive and Posting Capabilities of CFP Approved Documents****Recommended Solution:**

The Conference recommends expanding capabilities for archiving and posting documents on the Conference web site, and charging the Issue Committee with the development of a process and procedure to ensure posting of all:

- a) documents and attachments modified or edited after the Issue packets are made available with reference to the original Issue number and attachment titles;
 - b) documents and attachments modified during and after Council deliberations at the Biennial Meetings; and
 - c) final version of conference approved guides, documents and presentations in both PDF and the original editable format.
-

 LETTER CHARGES CFP WEB POSTING**Issue: 2010 II-031****Title: Coordination of the Two Current FDA Food Program Standards****Recommended Solution:**

The Conference recommends that a letter be sent to FDA asking them to work with appropriate interested parties to study the differences and similarities of both the Voluntary National Retail Food Regulatory Program Standards and the Manufactured Food Regulatory Program Standards and identify areas where harmonization can be achieved, and report back to the Conference.

 LETTER CHARGES CFP WEB POSTING**Issue: 2010 II-033****Title: Barriers to Bare Hand Contact Training Materials****Recommended Solution:**

The Conference recommends approval of the following guidance documents (submitted as attachments to the Issue titled: *Report - Food Contact and Utensil Barrier Usage Committee*):

1. Barrier to Bare Hand Contact Reference Document - English and Spanish
2. Barrier to Bare Hand Contact PowerPoint Presentation - English and Spanish

The Conference further recommends that these documents be posted to the CFP web site.

 LETTER CHARGES CFP WEB POSTING**Issue: 2010 II-035****Title: Limiting Committee Member Numbers (title changed: Committee Participation)****Recommended Solution:**

The Conference recommends the Constitution and Bylaws Committee develop guidelines regarding committee structure, participant responsibilities, membership size, and constituency representation and report back to the Executive Board no later than the August 2011 Executive Board Meeting with recommendations regarding proposed changes to policies and/or governing documents.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-001 Title: Report and Re-creation – Food Allergen Committee

Recommended Solution:

The Conference recommends re-creation of the Food Allergen Committee to extend the reach of food allergy education, training and awareness as follows:

- Identify appropriate strategies to develop an FDA "endorsed" Allergen Management Course, including the review of course curriculum.
 - Review the pending publication of FDA materials and guidance document(s) related to allergen management.
 - Utilize the strengths of groups like FAAN and IFIC Foundation (in cooperation with the CFP Food Allergen Committee) to define and lead a health professional outreach activity such as a "food allergy resource page" of educational materials suitable for state/local regulatory officials, food managers, and food employees.
 - Add a CDC representative to serve on the CFP Food Allergen Committee to help enhance our current public health perspectives and assist in the development and dissemination of a health professional outreach activity.
 - Report back to the 2012 Biennial Meeting with the outcome of these charges.
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-005 Title: On-Site Generation of Antimicrobial Pesticides

Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending changes to the Food Code as detailed in the attached "Food_Code_Recommendations_for_On-site_Generation_of_Antimicrobials" (extracted from Table 1 of the CFP 2008-10 Sanitizer Committee Final Report). Detailed rationales for the recommended changes are included in the table.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-006 Title: 4-501.19 Manual and Mechanical Warewashing Equipment, Wash Solution Temperature

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting that section 4-501.19 be revised to remove the minimum wash solution temperature and be classified as a Core C item by removing the "Pf" and substituting "C" at the end of the section as indicated below AND requests that the Annex 3 entry for this section be amended as stated below.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-007 Title: Reduced Minimum Temperatures for Mechanical Warewashing Equipment

Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting the FDA Food Code be revised as follows:

4-501.110 Mechanical Warewashing Equipment, Wash Solution Temperature.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING
Issue: 2010 III-010 Title: Guidelines for Producing or Cooking Mechanically Tenderized Beef for Retail

Recommended Solution:

The Conference recommends approval of the new revised guidance document titled "Guidelines for Producing or Cooking Mechanically Tenderized Beef for Retail and Food Service Establishments" and that it be made available to interested stakeholders on CFP's web site.

LETTER CHARGES CFP WEB POSTING
Issue: 2010 III-012 Title: Re-create – Hot Holding Committee

Recommended Solution:

The conference recommends that the Conference send a letter to FDA recommending that the issue of evaporative cooling and its relationship to pathogen growth during hot holding be investigated as a research priority.

LETTER CHARGES CFP WEB POSTING
Issue: 2010 III-013 Title: Bare Hand Contact for RTE Ingredients that are Fully Cooked After Handling

Recommended Solution:

The Conference recommends that the Conference send a letter to FDA requesting that provisions to allow for use of Ready-to-Eat FOOD ingredients from containers that are used exclusively in food products which are subsequently fully cooked or reheated should be added to the Food Code.

LETTER CHARGES CFP WEB POSTING
Issue: 2010 III-015 Title: Temperature of Water for Handwashing Sinks

Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending changes to the Food Code section 5-202.12 Handwashing Sink, Installation to read as follows:
 5-202.12 Handwashing Sink, Installation.

(A) A handwashing sink shall be equipped to provide warm water at a temperature of 85oF (29.5oC) or above through a mixing valve or combination faucet.

LETTER CHARGES CFP WEB POSTING
Issue: 2010 III-016 Title: Sequential Application of Hand Antiseptic for Use in No-Water Situations

Recommended Solution:

The Conference recommends that a committee be formed to include appropriate stakeholders including Center for Food Safety and Applied Nutrition (CFSAN), CDC and Center for Drug Evaluation and Research (CDER) to address:

- the efficacy/risk reduction strategies of alternative hand hygiene regimes compared to handwashing with respect to foodborne pathogens including viruses
 - identify settings where alternatives to handwashing are appropriate. and
 - report back to the 2012 Conference.
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-018 Title: Updating ROP Criteria with regard to Cook Chill and Sous Vide
Recommended Solution:

The Conference recommends the formation of a new committee charged with the following:

- create a guidance document detailing the scientific evidence of ROP HACCP controls and preventive measures and provide implementation suggestions.
 - recommend clarifications to the Food Code based on charge one.
 - report back to the Conference in 2012.
-

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-020 Title: 3-302.11 Packaged and Unpackaged Food – Separation
Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting that Section 3-302.11 have (A)(1)(d) added as follows:

3-302.11 Packaged and Unpackaged Food - Separation, Packaging, and Segregation.
 (d) *Packaged raw Ground beef may be stored or displayed with or above other cuts of packaged raw beef*

and Annex 3 (Public Health Reasons/Administrative Guidelines) be amended.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-022 Title: Antimicrobial Treatments for Washing Fruits and Vegetables
Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending the following changes to the Food Code: Annex 3 §3-302.15 Washing Fruits and Vegetables.

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-023 Title: Food Establishment Response Procedure to Vomiting and Diarrheal Contamination
Recommended Solution:

The Conference recommends that a letter be sent to FDA requesting modification of the 2009 Food Code to require that food establishments have access to a plan for responding to unexpected events that result in the discharge of vomitus or feces in any area other than a toilet.

LETTER CHARGES CFP WEB POSTING

Issue: 2010 III-024 Title: Drying Agents
Recommended Solution:

The Conference recommends that a letter be sent to the FDA recommending the following changes to the Food Code,

7-204.14 Drying Agents, Criteria

See final Issue Recommended Solution for full details to include in letter

LETTER CHARGES CFP WEB POSTING **OTHER**

DELEGATE ACTION: rejected

**Issue: 2010 I-005 Title: Consumer Advisory for pinned/injected/tenderized meats:
Food Code 3-603.11**

Recommended Solution:

The Conference recommends no action.

Reason:

Food establishment operators may not be aware of what products have been tenderized because there is no requirement for labeling.

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

TIMELINE

NOVEMBER 2011

- Issue submission template and instructions available online by end of month

FRIDAY, DECEMBER 5, 2011

- Deadline** for CFP committee chairs to submit final committee reports along with ALL prospective Issues and accompanying documents to their Council Chair for **preliminary review and approval**
 - **ALL CFP committee generated documents** MUST go through a formal **review** process PRIOR to online submittal; documents needing review include committee reports, Issues, and all attachments (see process and “Review Checklist” below)
 - Once approved by Council Chairs, all Issues and attachments MUST then be submitted via the online process prior to the posted deadline
 - **STANDING COMMITTEES:**
 - All Standing Committee reports and prospective Issues and accompanying documents are to be submitted to the Executive Director for review and approval.
 - For Standing Committee reports and Issues, the Executive Director will fulfill the same review functions as the Council Chair

FRIDAY, JANUARY 6, 2012

- Deadline for online Issue submittal** is 9:00 PM EST – this deadline applies to ALL Issues including CFP committee submitted Issues and independently submitted Issues
 - Once submitted online, the Issue Committee will conduct a final review and work with submitters and Council Chairs to clarify any questions or concerns
- Submittal of Issues in advance of the deadline is highly encouraged
- The only Issues that can be submitted AFTER the deadline must meet the “*Late Issue Submittal Policy*” http://www.foodprotect.org/media/policy/Policy_CFP_Late_Issue_Submission.pdf

SUNDAY, MARCH 4, 2012

- Online Issue packets available

PRELIMINARY REVIEW – PRIOR TO ONLINE SUBMITTAL

PRELIMINARY REVIEW PROCESS

- Preliminary Review:
 - All CFP committee generated documents are subject to a formal “offline” preliminary review process – Issues are NOT to be submitted online until the preliminary review has been conducted and approval granted by the respective Council Chair
 - During the preliminary review process, Council Chairs, Council Vice Chairs, and the Issue Chair(s) will serve as reviewers of CFP committee submitted documents
 - Council Chairs will forward documents submitted by the committee chairs to their respective Vice Chair and to the Issue Chair(s)
 - Council Chairs will serve as the primary contact with their respective committee chairs
 - Issue Chair(s) and Council Vice Chairs will forward any comments, questions, or concerns to the Council Chairs

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

- All reviewers will follow the “Review Checklist” (see below)
- When editing documents, “tracked changes” should be used whenever possible; once document review is complete, all track changes must be accepted or removed before submitting online
- Council Chairs will notify via email the Issue Chair(s) when the preliminary review process for each committee is complete and approval has been given for online submittal of Issues and accompanying documents; a copy of the final approved committee documents will be forwarded via email to the Issue Chair(s)
 - Committee Issues are NOT to be submitted via the online submittal process until the preliminary review has been completed
 - Final review by the Issue Committee will NOT begin until approval is received from the Council Chair
 - Preliminary review process MUST be completed far enough in advance to allow committee chairs to meet the online Issue submittal deadline
 - Any changes made to a committee report, document, or Issue after the preliminary review process MUST be approved by the respective Council Chair

REVIEW CHECKLIST

A. SCOPE OF ISSUE

PLEASE NOTE: reviewing the “scope of issue” is the MOST critical aspect of the preliminary review. Limiting the scope AND clearly defining the intent of each Issue will facilitate a logical and sequential deliberation within Council. To facilitate the process, it is recommended to divide issues containing multiple actions or directives; single Issues containing multiple actions or directives are cumbersome to deliberate and may lead to confusing or contradictory recommended solutions. Once the online Issue submittal deadline has passed, the automated process does NOT allow the submittal of additional Issues; therefore, committee reports can NOT be divided into multiple Issues after the deadline has passed.

- The majority of CFP committees will submit more than one Issue...
 - **First Committee Issue** – essentially a presentation of the committee report. The “Recommended Solution” of the first committee Issue contains **four (4) elements**:
 1. Statement to “acknowledge attached committee report” (*reports are NOT “accepted” or “approved” as this implies the entire content of the report has been debated and agreed upon by Council*)
 - ✓ Reports are to follow the approved Committee FINAL report format and include the following information: (*see Committee FINAL Report template*)
 - ▲ full list of committee charges from the previous Biennial Meeting (or as subsequently assigned by the Executive Board)
 - ▲ details of committee activities and recommendations
 - ▲ specific outcome(s) and disposition(s) for each assigned charge
 - ▲ specific direction regarding the future of the committee
 - ▲ new or continuation charges to be addressed during the upcoming biennium
 - ▲ list of all committee submitted Issues and attachments
 - ▲ list of committee members
 2. List of attachments (titles) for ALL committee generated “content documents” (*see description below regarding “content documents” vs. “supporting attachments”*)

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

3. Specific direction regarding the future of the committee, such as:

- ✓ Committee to be disbanded:
 - ▲ all charges previously assigned to committee have been completed
 - ▲ disbanded committees may NOT have continuation or new charges
- ✓ Committee to be re-created, along with specifics regarding:
 - ▲ continuation charges (i.e., incomplete or ongoing charges from the previous Biennial Meeting)
 - ▲ requirement to “report back to the next Biennial Meeting”

NOTE: newly created charges (not carried over from the previous Biennial Meeting) that the committee would like to address during the next biennium are best included in a subsequent stand-alone Issue, especially if it is anticipated that requesting the new charge(s) will result in debate within Council

NOTE: if a decision to re-create a committee with continuation charges is dependent on the outcome of a subsequent Issue, the continuation charges and the report back requirement should be included in a subsequent stand-alone Issue and not included within the first committee Issue

NOTE: standing committee final reports are required to be submitted as an Issue ONLY when council action is required (e.g., to approve or modify a CFP governing document or policy). By the designated deadline, all Standing Committees are required to submit their final committee report, prospective Issue(s), and any accompanying documents to the Executive Director for review and approval.

NOTE: except for standing committees that report directly to the Executive Board, all CFP committees must be either disbanded or re-created each biennium

4. Thank you statement to committee members

- **Subsequent Committee Issue(s)** – the actual number or subsequent committee Issues will depend on the work completed by a committee. Committee generated documents, or specific elements of a committee report that need to be formally debated and approved, are to be submitted as subsequent stand-alone Issues; examples include:
 - Policy or guidance documents created by the committee
 - ✓ It is recommended that a separate Issue is submitted for each independent document
 - EXCEPTION: large documents divided to meet attachment size restrictions should be presented within a single Issue*
 - Committee recommendations regarding controversial or substantial changes to policy or practice
 - EXCEPTION: non-substantive changes can be presented together as a single Issue (e.g., grammatical or editorial changes to existing approved documents)*
 - New charges assigned to a re-created committee
 - NOTE: the actual number of subsequent Issues submitted by a committee should be determined on a case-by-case basis depending on the complexity of the information to be presented; the Issue Chair(s) and Council Chairs can assist committee chairs in determining the best approach in submitting committee Issues.*

B. CONTENT REVIEW – ISSUE and ATTACHMENTS

The goals of content review are to increase readability and understanding, and to minimize confusion during Council deliberation.

- General review includes...
 - Verification that all sections of the Issue submission form are complete
 - Spelling and grammar

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

- Content and clarity
- Document titles are in quotes or italics
- Narrative is gender non-specific
- Correct capitalization (e.g., committee names, Issue titles)
- Multiple page documents contain page numbers (“page __ of __” is the preferred format)
- Correct use of organizational terminology and titles (e.g., “Conference,” “Biennial Meeting,” “Food Code” or “FDA Food Code”)
- Correct use of strikethrough/underline format for changes to existing CFP documents, FDA Food Code, or other regulatory documents (i.e., underlining of “new or proposed” language with “~~strikethrough~~” for language to be deleted)
- Adherence to “CFP Commercialism Policy” (i.e., Issues may NOT be commercial in nature) http://www.foodprotect.org/media/policy/Policy_CFP_Commercialism.pdf
- Issue Title...
 - Limited to 75 characters
 - Title uniquely describes purpose of Issue
NOTE: Issue titles may be modified by the Issue Chair for clarification in the event of duplicate submittals
 - Use of standardized “prefix” for CFP committee submitted Issue titles:
 - Report – _____ (insert committee name)
 - Re-Create – _____ (insert committee name)
 - Report and Re-Create – _____ (insert committee name)
NOTE: this dual format is rarely used; see Issue Chair(s) for guidance
- Issue Description...
 - Briefly describes the problem or concern to the retail food industry
- Public Health Significance...
 - Describes impact this Issue will have on the industry
 - Clearly stated and easily understood
- Recommended Solution...

NOTE: the “recommended solution” is the ONLY portion of the Issue that will appear in the Conference Proceedings; therefore, it needs to be as complete and as clearly written as possible.

 - Rationale of recommended solution must be sufficiently detailed to cover all aspects of the submission
 - All recommendations made by a CFP committee must be extracted from the committee report and captured within the recommended solution section of the Issue submittal form
 - Lists the exact titles of any subsequent committee Issue(s) and attachments (*recommend using a “cut-and-paste” of the title directly from the committee report*)
 - When edits or modifications are proposed for an existing document (e.g., CFP governing document, FDA Food Code, other regulatory document), relevant sections are to be “cut-and-pasted” into the recommended solution using strikethrough/ underline format

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

- Acronyms must be spelled out when the term is first used
EXCEPTIONS: FDA, USDA, CDC, EPA, CFP
- Any new or continuation charges assigned to a committee must be included within the recommended solution along with a requirement to “report back to the next Biennial Meeting”
- Direction(s) MUST be given to CFP regarding final disposition of the Issue, such as:
 - “a letter be sent to the FDA requesting...”
 - “modified language be incorporated into...”
 - “final guidelines to be posted on the CFP web site”
 - “a committee be created to study...”
- Attachments...
 - There are two (2) different kinds of attachments:
 1. **“Content Documents”** – this is the body of work created by a committee that MUST be reviewed and approved via the Council deliberation process (e.g., guidelines, policy documents, suggested revisions to existing documents and regulatory codes)
 - ✓ Content documents should be “attached” only once to the first committee Issue along with the committee report
 - ▲ In subsequent committee Issues, the attachment should be referenced by the exact name of the attachment and the name of the Issue where the attachment can be found (for example: “See *Report – ABC Committee*, Attachment #1, titled: XYZ”)
 2. **“Supporting Attachment”** – this is information presented ONLY to assist in understanding the specific Issue (e.g., abstracts, articles, studies, reference material)
 - ✓ Large documents posted online (e.g., Food Code) are to be referenced only by the web address along with a notation of the specific page and/or section numbers; large publicly available documents are NOT to be attached in their entirety
 - Attachment format:
 - All attachments MUST be in a format compatible with MS Word (.doc), as a PDF (portable document format)... or as a web address for existing documents
 - ✓ Content Attachments submitted as a PDF must be made available by the submitter in advance to the Council Scribe in a format compatible with MS Word (.doc) to facilitate editing during Council deliberations
 - Attachments should use a header or footer that includes both the document title and page numbers (“page __ of __” is the preferred format)
 - Name of each attachment must be specific AND consistently referenced throughout all material submitted by the committee
 - Attachments over 2 megabytes (2 MB) must be divided into multiple smaller documents in a logical sequence
 - All Macros are to be removed from attached documents
 - Council Chairs will work with committee chairs and the Issue Chair(s) to determine the best format and method of attaching documents to their Issues

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

- Submitter name...
 - CFP committee chair(s) is to be listed as the “submitter” (e.g., Jane Doe, Chair)
 - CFP committee name is to be listed as the “organization” (e.g., ABC Committee)

FINAL REVIEW – AFTER ONLINE SUBMITTAL

FINAL REVIEW PROCESS

- All CFP committee Issues MUST be approved by the respective Council Chair through the preliminary review process PRIOR to online submittal (see above)
- Once submitted online, the final review process for that Issue begins:
 - During the final review, the Issue Committee will serve as the primary contact with all Issue submitters via the online review process
 - CFP committee submitted Issues will be forwarded by the Issue Committee to Council Chairs for final review and approval via the online review process
- Revisions to an Issue after the submittal deadline will be limited to those requested by the Issue reviewers
 - Via the online Issue Management web site, the Issue submitter will receive edits and comments from the reviewers; the submitter can either:
 - “accept” the Issue (indicating it is ready for finalization)
 - submit another round of revisions (this part of the review process can go back-and-forth as many times as necessary until an Issue is ready to be finalized), or
 - “withdraw” the issue
- Once accepted and finalized, an Issue can no longer be edited until it is deliberated in Council.

FINAL REVIEW CHECKLIST

- Verify Council Chair approval of CFP committee submitted Issues
 - Any changes made to a committee report after the preliminary review process MUST be approved by the respective Council Chair
- Ensure that the final Issue meets CFP’s Issue Acceptance “*Terms and Conditions*” as posted on the CFP web site
- Review all Issues and attachments using “Review Checklist” (noted above)
- Verify documents referenced in an Issue or in a committee report:
 - All attachments listed or referenced are actually “attached” to the appropriate Issue
 - All relevant attachment pages are included
 - All attached documents readily print and are in a readable format
 - All web address links are correct
- Issue Committee will conduct a final edit to standardize content of all Issues, for example:
 - Re-name multiple Issues with similar titles

ISSUE REVIEW CHECKLIST – FOR COMMITTEE SUBMITTED ISSUES

FOR THE 2012 CFP BIENNIAL MEETING

NOTE: A SEPARATE AND LESS EXTENSIVE CHECKLIST EXISTS FOR INDEPENDENT (NON-COMMITTEE) ISSUES

- Ensure submitter's name and information follows a standardized format
NOTE: the submitter's employer contact information is to be entered in the "submitter information" section at the bottom of the submittal form; it is NOT entered under "submitter name" at the top of the form
- Remove redundant or auto-generated wording from final Issue, for example:
 - Recommended Solution... deletion of the words "The Conference Recommends..." from the final submittal as this wording will be auto-generated in the final Issue packet
- Submitter will be notified via email when Issue has been accepted and finalized

Committee Name:

2010-2012 Issues Committee

| | | | | | | | | | | |
|----------|----------|--|---|-------------------------------------|------------------------|----|----------------|----------------|----------------------------------|---------------------------|
| Armatis | David | Industry - | Safe Foods First | 135 Townsend Street, Suite 617 | San Francisco CA | | 94107 | (650) 274-8573 | travelingchef@hotmail.com | |
| Bacon | Brenda | Industry - Retail Food Stores | Harris Tetter | 701 Crestdale Road | Matthews | NC | 28105 | (704) 844-4443 | bbacon@harristeeter.com | Council-I Vice Chair |
| Bhatt | Chirag | Industry | CHB Consulting | POBOX 680932 | Houston | TX | 77268 | (281) 684-6883 | chiragbhattTX@gmail.com | Council-II Chair |
| Casazza | Gene | Other - Restaurant Association | Jetro/Restaurant Depot | 133-11 20th Avenue | College Point | NY | 11356 | (718) 412-4517 | gcasazza@jetror.com | |
| Cornman | Lee M. | Regulatory - State | Florida Dept of Agriculture and Consumer Services/Food Safety Division | 3125 Conner Boulevard, MS C-18 | Tallahassee | FL | 32399- 1650 | (850) 245-5547 | lee.cornman@freshfromflorida.com | |
| Elizondo | Marcel | Regulatory - Local | Austin/Travis Co Health and Human Services | 15 Waller St | Austin | TX | 78702 | (512) 974-8068 | marcel.elizondo@ci.austin.tx.us | |
| Everly | Vicki | Regulatory - Local | Santa Clara County Dept. of Environmental Health - Retired | | San Jose | CA | | (510) 501-0417 | vicki.everly2@gmail.com | C'ee Co- Chair |
| Gaither | Marlene | Regulatory - Local | Coconino County (AZ) Health Department | 2500 N. Fort Valley Road | Flagstaff | AZ | 86001 | (928) 527-8520 | mgaiter@coconino.az.gov | |
| Gifford | David | Regulatory - State | Washington State Dept. of Health | | | | | | | Council-III Vice Chair |
| Guzzle | Patrick | Regulatory - State | Idaho Department of Health and Welfare | 450 West State Street, 4th Floor | Boise | ID | 83720 | (208) 334-5938 | guzzlep@dhw.idaho.gov | Council-II Vice Chair |
| Hale | Aggie | Regulatory - State | Florida Dept. of Agriculture and Consumer Services | 3125 Conner Boulevard, MS C-26 | Tallahassee | FL | 32399- 1650 | (850) 245-5549 | aggie.hale@freshfromflorida.com | C'ee Co- Chair |
| Harris | Craig K. | Academia | Michigan State University | 4564 Nakoma | Okemos | MI | 48864 | (517) 256-2234 | harrisc@msu.edu | |
| Hazan | Stan | Other - Standards and Compliance | NSF International | 789 Dixboro Road | Ann Arbor | MI | 48105 | (734) 769-5105 | hazan@nsf.org | |
| Lewis | Glenda | Regulatory - Federal | Leader, Retail Food Protection Team | 5100 Paint Branch Parkway | College Park | MD | 20740 | 240-402-2150 | glenda.lewis@fda.hhs.gov | |
| Linton | Richard | Academia | The Ohio State University | 2015 Fyffe Rd. | Columbus | OH | 43210 | (614) 247 7881 | linton.60@osu.edu | Council-III Chair |
| Marlow | Deborah | Regulatory - Local | Williamson County (TX) & Cities Health District | 303 Main Street | Georgetown | TX | 78626 | (512) 943-3620 | dmarlow@wcchd.org | Council-I Chair |
| Martin | Eric D. | Industry - Food Service | Margaritaville Enterprises, Inc. | 6800 Lakewood Plaza Drive | Orlando | FL | 32819 | (407) 224-3216 | emartin@margaritaville.com | |

| Committee Name | | Industry | Company | Address | City | State | Zip | Phone | Email |
|----------------|----------|-------------------------------|--|----------------------------------|------------------|-------|------------|----------------|-------------------------------|
| Moore | Eric | Industry - Food Service | Aramark | 1717 Arch St. | Philadelphia | PA | 19103 | (215) 409-7343 | moore-eric2@aramark.com |
| Odom | Alan | Industry - Food Service | Compass Group | 310 West Church St. | Benton | IL | 62812 | (618) 439-9753 | alan.odom@compass-usa.com |
| Patnoad | Martha | Academia | University of Rhode Island/Nutrition & Food Sciences | 106 Ranger Hall, URI | Kingston | RI | 02881 | (401) 874-2960 | mpatnoad@uri.edu |
| Reid | Karen | Industry - Food Service | Walt Disney Parks and Resorts US | PO Box 10000, | Lake Buena Vista | FL | 32830-1000 | 407-827-6971 | karen.reid@disney.com |
| Reinhard | Robert | Industry - Food Processing | Sara Lee Corporation | 3500 Lacey Road | Downers Grove | IL | 60515 | (630) 598-8058 | bob.reinhard@saralee.com |
| Rosenwinkel | Kenneth | Industry - Retail Food Stores | Jewel-Osco/Supervalu | 150 Pierce Road, Suite 200 | Itasca | IL | 60143 | (630) 948-6787 | ken.rosenwinkel@supervalu.com |
| Sandford | Mary | Industry - Food Service | Burger King Corporation | 5505 Blue Lagoon Drive | Miami | FL | 33126 | (305) 378-7917 | msandford@whopper.com |
| Starobin | Dr. Anna | Other - Sanitation Services | Ecolab | 8300 Capital Drive | Greensboro | NC | 27409 | (336) 931-2185 | anna.starobin@ecolab.com |
| Weddig | Lisa | Industry - Food Processing | Better Seafood Board | 7918 Jones Branch Dr., Suite 700 | McLean | VA | 22102 | (703) 752-8886 | lweddig@nfi.org |
| Whiteside | Jayne | Other - Medical Services | Coastal Dialysis | 55 Congress Avenue | Bath | ME | 04530 | (207) 443-7485 | jelizwhiteside@yahoo.com |
| Williams | Dee | Industry - Food Service | Jack in the Box Inc. | 9330 Balboa Aevnue | San Diego | CA | 92123 | (858) 571-2550 | dee.williams@jackinthebox.com |
| Wright | Lisa | Other - CFP Administration | Conference for Food Protection | 11080 Tondino Road | San Diego | CA | 92131 | (858) 536-8030 | ewright1@san.rr.com |

Conference for Food Protection 2012 Issue Committee FINAL Report

COMMITTEE NAME: Issue Committee
COUNCIL: Standing Committee – Council II
DATE OF REPORT: December 28, 2011
SUBMITTED BY: Aggie Hale and Vicki Everly, Issue Co-Chairs

COMMITTEE CHARGE(s):

Constitutional Charge

Article XV Duties of the Committees

Section 1. The Issue Committee shall review all Issues submitted at least ninety (90) days before the Conference meeting. The Issue Committee shall assign for Council deliberation those Issues that have met the Issue acceptance criteria specified in the Conference Procedures Manual. Issue assignments shall be made in accordance with Article XIII, Section 1, Subsection 1; Section 2, Subsection 1; and Section 3, Subsection 1.

Charges Established by Issue

Issue 2010 II-30 "Expand Archive and Posting Capabilities of CFP Approved Documents"

The Conference recommends expanding capabilities for archiving and posting documents on the Conference web site, and charging the Issue Committee with the development of a process and procedure to ensure posting of all:

1. Documents and attachments modified or edited after the Issue packets are made available with reference to the original Issue number and attachment titles;
2. Documents and attachments modified during and after Council deliberations at the Biennial Meetings; and
3. Final version of conference approved guides, documents, and presentations in both PDF and the original editable format.

Charges Established by Executive Board

1. Clarify concerns regarding "final" committee reports, Issues, and attachments, including:
 - a) Requirements for content and format.
 - b) Instructions regarding the process for review and online submittal.
 - c) Clarification of roles of Council Chair and Issue Chair in final approval.
 - d) Clarification of when Standing Committee final reports need to be submitted as an Issue.
2. Revise, modify, or clarify Issue submittal criteria and review tools, including:
 - a) Issue "rejection" process and procedure, including roles and responsibilities for committee-submitted documents and "independent" submittals.
 - b) *CFP Commercialism Policy* as it relates to Issue "attachments" (e.g., peer reviewed articles, industry sponsored studies, letters of recommendation, presentations).
 - c) Appropriate location of Issue "endorsements" (i.e., by an organization, agency, or individual) within the Issue submittal documentation.
 - d) Final Issue submittal deadline (current deadline of 11:59 PM EST requires East Coast Council Chairs to be on "stand-by" until midnight).
3. Clarify concerns regarding "content attachments" (i.e., attachments reviewed and approved by council) that become Conference developed guides and documents, including:
 - a) The review and approval process prior to Issue submission.
 - b) Development of a "masthead, flag, nameplate, or style guide" to readily identify approved and posted documents as belonging to the Conference.
 - c) Archive and posting of documents revised after Issue submittal (currently, the only version routinely archived is the original document attached to the submitted Issue even when the document is revised in council). (see "charges established by Issue" above)
4. Review and update CFP governing documents and position descriptions regarding the Issue process and responsibilities, including:
 - a) Procedures and responsibilities for each biennium.
 - b) Tools to facilitate tracking of charges to aid in review of committee reports and attachments.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS (with completion date noted):

1. **May 2010** – Developed a tool to facilitate tracking of committee charges between biennial meetings (see attached documents for each Council titled "*2010 Final Issue Recommendations with Actions*"); documents provided to Executive Director and Conference Chair in May 2010 and to the Executive Board in August 2010.

2. *July 2010* – In conjunction with the Executive Director, established Issue related deadline dates for the 2012 Biennial Meeting:
 - o November 2011 – Issue Pre-Submission Form available online
 - o Friday, December 5, 2011 – deadline for Committee Reports and prospective Issues to be submitted to Council Chairs for review
 - o Friday, January 6, 2012 – Issue submission deadline (constitutionally mandated not less than 90 days before Biennial Meeting)
 - o February 17, 2012 – Issue Committee deadline to finalize Council assignments
 - o March 4, 2012 – Issue Packets made available by Director (constitutionally mandated at 40 days before Biennial Meeting)
3. *August 2011* – Received approval from Executive Board for a change in the final Issue submittal deadline time to 9:00 PM EST (previously set at 11:59 PM EST).
4. *August 2011* – Received approval from Executive Board for a modified review checklist to assist Council Chairs and the Issue Committee in the review of final committee reports and draft Issues (see attached document titled *“Committee Submitted Issues – Review Process and Checklist”*).
 - o This comprehensive document was subsequently shortened into a separate checklist for independent (non-committee) submitted Issues by removing details specific to CFP committees; both checklists are available on the CFP web site as PDFs to assist Issue submitters.
5. *August 2011* – Executive Board approved language to clarify the appropriate location within an Issue for inclusion of “endorsements” (i.e., by an organization, agency, or individual). The following approved language was placed on the Issue submission web site for the 2012 Biennial Meeting:
 - o *Endorsements of an Issue by an organization, agency, or individual are to be placed in the Issue Submission Form section titled “Issue you would like the Conference to Consider” or “Public Health Significance”; endorsements are not to be placed within the “Recommended Solution.” Endorsement letters or copies of email communication may be submitted with an Issue as a supporting attachment.*
6. *August 2011* – Drafted modified language for Conference Procedures, Section IV, Conference Issues; language reviewed and approved by the Conference Executive Board at their August 2010 meeting and is presented at the 2012 Biennial Meeting as an Issue titled *“Procedures for Conference Issues – New Wording”* (all new wording underlined; there is no deleted language).
 - a) Clarification of the requirement for the submittal of **Standing Committee** final reports and Issues. *Conference Procedures, Section IV, Conference Issues:*
 - A. *Issue Submission*
 1. *The Executive Board shall approve an Issue Submission Form.*
 2. *Within the time specified in the Constitution and Bylaws, the Issue Submission Form shall be made available to Conference members and to other interested parties by 150 days prior to the Biennial Meeting.*
 3. *Issue submissions shall be made electronically through the internet. Issues may be submitted to the Executive Board only in the event of a late-breaking food safety Issue. Current instructions for submission and the form are available through the internet on the Conference web site or from the Executive Director.*
 - a. *For the purpose of this Section a late-breaking food safety Issue is defined as an Issue that specifically relates to an event, practice or circumstance creating a situation requiring the immediate attention of the Conference that has occurred between the deadline of the Conference Issue submission deadline and the Biennial meeting.*
 4. *The deadline for Issues and their attachments is the date specified in the Constitution and Bylaws.*
 - a. *Standing committee final reports are required to be submitted as an Issue ONLY when council action is required (e.g., to approve or modify a CFP governing document or policy). By the designated deadline, all Standing Committees are required to submit their final committee report, prospective Issue(s), and any accompanying documents to the Executive Director for review and approval.*
 - b) Clarification of **Issue Acceptance Criteria** and the **Issue Rejection Process:** *Conference Procedures, Section IV, Conference Issues:*
 - B. *Issue Acceptance Criteria*
 1. *In order for the Issue to be accepted by the Conference and considered for Council deliberation, all sections of the form must be completed. The Issue must be described completely, with its impact on retail distribution identified. The food protection or public health aspect of the Issue must be clearly stated to be easily understood. A suggested solution or rationale for the Issue must be sufficiently detailed to cover all aspects of the submission.*
 - a. *Prior to finalization, all Issues are to be in a “finished form” (e.g., no annotations or unaccepted edits, all attachments present and complete). Issues that are not in this format may be rejected if the submitter*

fails to make requested revisions. Documents containing "track changes" or comments from reviewers cannot be accepted because they are, by definition, unfinished and incomplete; the Council will not know what wording to act upon.

- b. Issues will NOT be rejected based on content; the only reason for rejection will be non-compliance with the requirements for Issue acceptance.
2. *When the recommended solution is to change the wording of a document, such as the Food Code or a Conference document, the portion of the document to be changed must be accurately identified, the change that is requested must be specified (e.g., actual language for replacement, addition, change or deletion), and the recommended language provided.*
3. *A late-breaking food safety Issue submitted after the deadline may be considered for assignment to a Council if it has first been presented to the Conference Executive Board for review and acceptance. The Conference Executive Board shall inform the Issue Committee Chair of its decision to accept or reject any Issue submitted after the Issue deadline.*

E. Issue Rejection Process

1. *All Issues must be received in final form by the deadline date. If an Issue received prior to the deadline date does not meet the criteria set forth in IV. B., the Issue Chair will make a reasonable attempt to contact the submitter with a brief explanation of the problem. Failure of the submitter to correct and/or resubmit the Issue prior to the deadline date will result in rejection of the Issue.*
 - a. Issue Chair will notify submitter in writing that Issue cannot be accepted as currently written and will be rejected if not submitted in a finished form.
 - 1) Notification to include: specific required changes, deadline date, reference to Issue acceptance Criteria, and a recommendation that Issue can be rewritten and referred to a committee if unable to finalize language.
 - 2) If Issue was submitted by a CFP committee, the respective Council Chair will also be notified; the Executive Director will be notified regarding Issues submitted by standing committees.
 - 3) If submitter is non-responsive, he/she will be notified a second time by the Issue Chair that Issue will be rejected if not submitted in a finished form.
 - b. If no response is forthcoming from the submitter after the second notification, the Issue Chair will notify the Executive Director that the Issue is pending rejection.
 - 1) The Executive Director will evaluate the Issue Chair recommendation for rejection and agree or disagree based on the criteria spelled out in the Conference Procedures for Issue Acceptance; the Executive Director may elect to contact the submitter directly.
 - a) If the Executive Director agrees with the Issue Chair decision to reject, he/she will forward the Issue to the Conference Chair and Vice Chair for their review.
 - The Conference Chair and/or Vice Chair may elect to contact the submitter directly to determine if he/she is willing to bring the Issue into compliance; thus, the submitter may have one last chance.
 - If the Conference Chair or Vice Chair do NOT choose to contact the submitter, the Issue will be rejected.
 - If the Conference Chair and Vice Chair disagree as to whether the Issue should be rejected, the matter will be referred to the Executive Board for resolution.
 - b) If the Executive Director disagrees with the Issue Chair and determines the Issue (as written) meets the Issue acceptance requirements, he/she will send the Issue back to the Issue Chair with a written explanation; the Issue Chair may appeal such a finding to the Executive Board.
 2. *At least forty (40) days before the Conference meeting, the submitter of an Issue that does not meet the criteria for acceptance or is not in the jurisdiction of the Conference is notified by the Executive Director with a copy to the Conference Chair and the Issue Chair of the reason(s) why the proposed Issue is not acceptable. A rejected Issue may be considered a "Special Issue" if accepted by the Board and submitted by the Board to the Council at the beginning of the Conference meeting.*
7. *November - December 2011 – Updated instructions within the Issue Management Program (IMP) web site and worked with CFP Executive Assistant to conduct a beta test of the revised site.*
 8. *December 2011 – Worked with Council Chairs to review all CFP committee final reports, content attachments, and draft issues.*
 9. *January 2012 thru February 2012 – Completed constitutional charge for review and assignment of all Issues and attachments submitted for the 2012 Biennial Meeting.*

REQUESTED ACTION:

The Issue Committee will be submitting two (2) Issues to the 2012 CFP Biennial Meeting:

1. Report – Issue Committee
 - Content attachment title: 2012 Issue Committee Final Report
 - Supporting attachment titles:
 - *Council I 2010 Final Issue Recommendations with Actions*
 - *Council II 2010 Final Issue Recommendations with Actions*
 - *Council III 2010 Final Issue Recommendations with Actions*
 - *Committee Submitted Issues – Review Process and Checklist*
 - *2010-12 Issue Committee Roster*
2. Procedures for Conference Issues – New Wording
 - No attachments to this Issue

The Issue Committee is a standing committee of the Conference for Food Protection and does not need to be re-created; it is, therefore, recommended that the following continuation charges be assigned to the 2012-14 Issue Committee with a requirement to report back at the 2014 Biennial Meeting:

1. Complete the charge from Issue 2010 II-30 to expand archive and posting capabilities of CFP approved documents on the Conference web site and develop a process / procedure to ensure posting of all:
 - a. Documents and attachments modified or edited after Issue packets are made available with reference to the original Issue number and attachment titles;
 - b. Documents and attachments modified during and after Council deliberations at the Biennial Meetings; and
 - c. Final version of conference approved guides, documents, and presentations in both PDF and the original editable format.
2. Work with the Constitution, Bylaws, and Procedures Committee to review, consolidate, and update CFP governing documents, guidelines, and instructions regarding:
 - a. Preparation, submission, and presentation of Issues, final committee reports, and Issue attachments.
 - b. Roles and responsibilities for each biennium.
3. Review the *CFP Commercialism Policy* as it relates to Issue “attachments” (e.g., peer reviewed articles, industry sponsored studies, letters of recommendation, presentations).
4. Develop a “masthead, flag, nameplate, or style guide” to readily identify approved and posted documents as belonging to the Conference.

COMMITTEE MEMBER ROSTER:

- See attached PDF document titled *2010-12 Issue Committee Roster*.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 027
Issue: 2012 II-009**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Procedures for Conference Issues - New Wording

Issue you would like the Conference to consider:

The Issue Committee seeks approval of language within the Conference Procedures to further clarify the Issue submission, acceptance, and rejection process.

Public Health Significance:

Clarification and improvement of the CFP Issue process will ensure that concerns brought forward from all stakeholders are given an equal opportunity for consideration and final approval.

Recommended Solution: The Conference recommends...:

adoption of the following new language in the Conference Procedures, Section IV, Conference Issues: (new wording underlined; there is no deleted language):

(NOTE: only relevant sections are included below... please refer to the full Conference Procedures document available at www.foodprotect.org)

A. Issue Submission

4. The deadline for Issues and their attachments is the date specified in the Constitution and Bylaws.

a. Standing committee final reports are required to be submitted as an Issue ONLY when council action is required (e.g., to approve or modify a CFP governing document or policy). By the designated deadline, all Standing Committees are required to submit their final committee report, prospective Issue(s), and any accompanying documents to the Executive Director for review and approval.

B. Issue Acceptance Criteria

1. In order for the Issue to be accepted by the Conference and considered for Council deliberation, all sections of the form must be completed. The Issue must be described completely, with its impact on retail distribution identified. The food protection or public health aspect of the Issue must be clearly stated to be easily understood. A suggested solution or rationale for the Issue must be sufficiently detailed to cover all aspects of the submission.

a. Prior to finalization, all Issues are to be in a "finished form" (e.g., no annotations or unaccepted edits, all attachments present and complete). Issues that are not in this format

may be rejected if the submitter fails to make requested revisions. Documents containing "track changes" or comments from reviewers cannot be accepted because they are, by definition, unfinished and incomplete; the Council will not know what wording to act upon.

b. Issues will NOT be rejected based on content; the only reason for rejection will be non-compliance with the requirements for Issue acceptance.

E. Issue Rejection Process

1. All Issues must be received in final form by the deadline date. If an Issue received prior to the deadline date does not meet the criteria set forth in IV. B., the Issue Chair will make a reasonable attempt to contact the submitter with a brief explanation of the problem. Failure of the submitter to correct and/or resubmit the Issue prior to the deadline date will result in rejection of the Issue.

a. Issue Chair will notify submitter in writing that Issue cannot be accepted as currently written and will be rejected if not submitted in a finished form.

1) Notification to include: specific required changes, deadline date, reference to Issue acceptance Criteria, and a recommendation that Issue can be rewritten and referred to a committee if unable to finalize language.

2) If Issue was submitted by a CFP committee, the respective Council Chair will also be notified; the Executive Director will be notified regarding Issues submitted by standing committees.

3) If submitter is non-responsive, he/she will be notified a second time by the Issue Chair that Issue will be rejected if not submitted in a finished form.

b. If no response is forthcoming from the submitter after the second notification, the Issue Chair will notify the Executive Director that the Issue is pending rejection.

1) The Executive Director will evaluate the Issue Chair recommendation for rejection and agree or disagree based on the criteria spelled out in the Conference Procedures for Issue Acceptance; the Executive Director may elect to contact the submitter directly.

a) If the Executive Director agrees with the Issue Chair decision to reject, he/she will forward the Issue to the Conference Chair and Vice Chair for their review.

- The Conference Chair and/or Vice Chair may elect to contact the submitter directly to determine if he/she is willing to bring the Issue into compliance; thus, the submitter may have one last chance.
- If the Conference Chair or Vice Chair do NOT choose to contact the submitter, the Issue will be rejected.
- If the Conference Chair and Vice Chair disagree as to whether the Issue should be rejected, the matter will be referred to the Executive Board for resolution.

b) If the Executive Director disagrees with the Issue Chair and determines the Issue (as written) meets the Issue acceptance requirements, he/she will send the Issue back to the Issue Chair with a written explanation; the Issue Chair may appeal such a finding to the Executive Board.

2. At least forty (40) days before the Conference meeting, the submitter of an Issue that does not meet the criteria for acceptance or is not in the jurisdiction of the Conference is notified by the Executive Director with a copy to the Conference Chair and the Issue Chair of the reason(s) why the proposed Issue is not acceptable. A rejected Issue may be considered a "Special Issue" if accepted by the Board and submitted by the Board to the Council at the beginning of the Conference meeting.

Submitter Information:

Name: Aggie Hale, Issue Co-Chair
Organization: Issue Committee
Address: FL Dept. of Agriculture 3125 Conner Boulevard, MS C-26
City/State/Zip: Tallahassee, FL 32399-1650
Telephone: (850) 245-5549 Fax:
E-mail: aggie.hale@freshfromflorida.com

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 036
Issue: 2012 II-010**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report- Interdisciplinary Foodborne Illness Training Committee

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Interdisciplinary Foodborne Illness Training Committee (IFITC) seeks Council II's

1. Acknowledgement of its final committee report.
2. Thanking committee members for their work.

Public Health Significance:

Delays in reporting or investigating a possible foodborne disease outbreak can prolong an outbreak event, potentially resulting in further illness or economic disruption. Effective training of professionals in outbreak response can mitigate the effects of an outbreak. Many states indicate utilizing some form of foodborne epi education programs, but there is great variability in training offerings. Training programs in outbreak investigation should have some consistency and a minimal level of proficiency to ensure rapid response and communication, amongst investigating parties.

The mere existence of programs does not guarantee efficacy of the training. Accreditation or voluntary standards can provide a level of quality assurance and/or consistency amongst foodborne illness training programs to ensure that professionals are comfortably prepared to investigate outbreaks, institute proper control measures, and correspond appropriately amongst the many other parties and jurisdictions involved.

Recommended Solution: The Conference recommends...:

to acknowledge the report and to thank the committee for its work.

Submitter Information:

Name: Anna Starobin, MD, CP-FS Co-Chair
Organization: Interdisciplinary Foodborne Illness Training Committee
Address: Ecolab8300 Capital Dr.
City/State/Zip: Greensboro, NC 27409
Telephone: 336 931 2185 Fax: 336 668 0744
E-mail: anna.starobin@ecolab.com

Attachments:

- "Interdisciplinary Foodborne Illness Training Committee Report"
- "Attachment A IFITC IFPTI Courses"
- "Attachment B IFITC CIFOR Courses"
- "Attachment C Committee Roster"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

Conference for Food Protection Committee FINAL Report

COMMITTEE NAME: Interdisciplinary Foodborne Illness Training Committee

COUNCIL: II

DATE OF REPORT: 12/28/11

SUBMITTED BY: Anna Starobin, Co-Chair
Michèle Samarya-Timm, Co-Chair

COMMITTEE CHARGE(s):

1. Continue to track the progress of prominent disease training programs currently in development; and
2. Report back to the 2012 Biennial Meeting of the Conference for Food Protection.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

- The Interdisciplinary Foodborne Illness Training Committee (IFITC) created a regular schedule of monthly conference calls to accomplish the committee charges.
- Programs were identified and tracked (see IFITC Attachment A IFITC IFPTI Courses and Attachment B IFITC CIFOR Courses. A significant amount of time was spent clarifying the committee charge and ensuring the work being done stayed within these parameters.
- IFITC defined “prominent disease training programs” as accessible foodborne illness prevention/response education opportunities, of any length, offered at the state or national level.

The IFITC challenged members with the following action items:

1. Identify educational opportunities (trainings, courses, etc.) relevant to the committee charge.
2. Catalogue and compare existing foodborne illness training programs
3. Identify the target audience for existing foodborne illness training programs

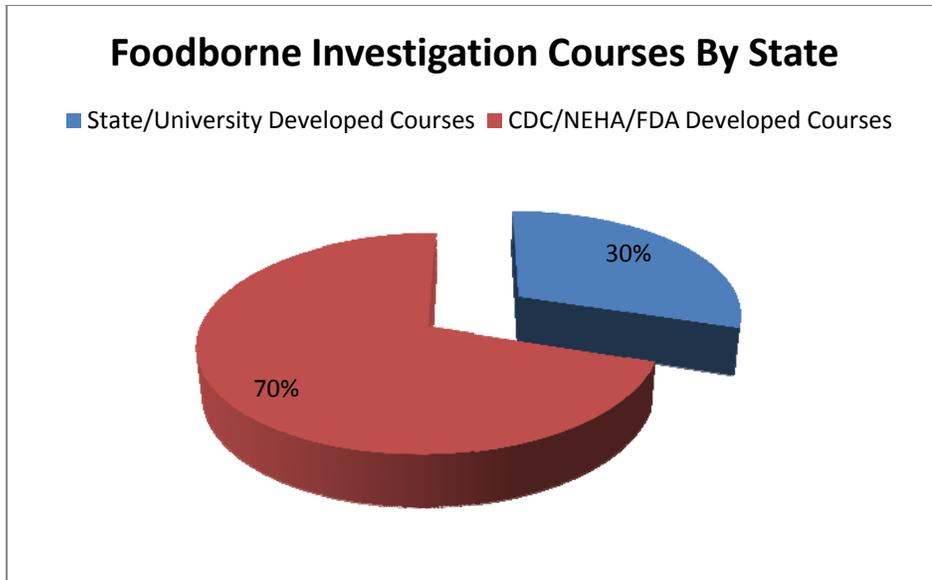
IFITC identified The International Food Protection Training Institute (IFPTI) (www.IFPTI.org) as having a growing database of epidemiology–based trainings for foodborne disease response. IFITC sifted through IFPTI’s course catalogue, and charted all entries that meet the definition of prominent disease training programs.

Individual states were contacted for information regarding their use of foodborne disease training programs. States which are using non-mainstream training programs were asked to describe the courses they use. Most of the states’ training programs are not open to the public or are only available to a limited audience so they are not considered to meet this committee’s definition of prominent courses.

IFITC also identified similar work by the Council to Improve Foodborne Outbreak Response (CIFOR). Prominent disease training programs from CIFOR’s assessment were charted for reference.

Findings:

1. Nationally available training programs
35 states (AK, AR, AZ, CA, CO, DE, FL, HI, ID, IL, IN, KY, LA, ME, MN, MS, MT, NC, ND, NE, NH, NJ, NV, OH, OK, PA, SC, SD, TN, TX, UT, VA, WA, WI, WY) utilize one or more of the following Foodborne Disease Investigation Training resources:
 - FDA ORA-U Foodborne Illness Investigations class
 - CDC/NEHA’s Epi-Ready Foodborne Illness Response Strategies Team Training
2. State developed training programs
15 states (AL, CT, GA, IA, KS, MA, MD, MI, MO, NM, NY, OR, RI, VA, WV) have developed state specific training materials independently or in conjunction with a University.



- IFITC created a chart identifying course parameters, cost, credits, applicability, etc. This information is in two attachments to this report.

Committee Recommendations:

1. To re-create the IFITC to continue to track the progress of prominent disease training program currently developed, identify essential educational content of foodborne disease outbreak training programs; establish evaluating and ranking criteria for identified courses; identify any gaps in foodborne disease outbreak training; consider if levels of foodborne disease outbreak training/retraining are needed;
2. Report back to the 2014 Biennial Meeting of the Conference for Food Protection.

COMMITTEE SUBMITTED ISSUES AND ATTACHMENTS:

- Issue # 1 The Interdisciplinary Foodborne Illness Training Committee Final Report
- Issue # 2 Re-create the Interdisciplinary Foodborne Illness Training Committee
- Attachment A IFITC IFPTI Courses
- Attachment B IFITC CIFOR Courses
- Attachment C 2010-2012 Interdisciplinary Foodborne Illness Committee Roster

CFP Interdisciplinary Foodborne Illness Training Committee, 2010-2012

IFITC IFPTI Courses

| Program Title | Course ID | IFPTI # | Publisher/ Agency | Format and Duration | Target Audience | Charge for The Program | Type of CEUs offered |
|---|------------|----------|--------------------------------|------------------------------|---|------------------------|----------------------|
| Produce Farm Investigations | ER321 | 7.6.0002 | FDA ORA-U | Classroom, field instruction | Inspectors and investigators | not listed | 1.8 CEU |
| Epi-Ready for Response Teams | ER324 | 7.6.0003 | FDA ORA-U | Classroom | FDA and State RRT team | not listed | 1.8 CEU |
| Foodborne Illness Investigations | ER325 | 7.6.0004 | FDA ORA-U | Classroom | Sanitarians, Inspectors, Lab, Epi, Nursing | not listed | 1.9 CEU |
| Food & Feed Rapid Response Training | ER422 | 7.6.0008 | FDA ORA-U | Workshop | FDA and State RRT team | not listed | not listed |
| Surveillance Investigations and Enforcement Methods | not listed | 7.6.0277 | U.S. Department of Agriculture | not listed | not listed | not listed | not listed |
| Enforcement, Investigations and Analysis | not listed | 7.6.0281 | USDA | Classroom | not listed | not listed | not listed |
| Epi-Ready Team Training | not listed | 7.6.0313 | NEHA | Classroom | Public and and privet sector health professionals | not listed | not listed |

CFP Interdisciplinary Foodborne Illness Training Committee, 2010-2012

IFITC CIFOR Courses

| Program Title | Publisher/ Agency | Format and Duration | Target Audience | Charge for The Program | Type of CEUs offered |
|---|--|--|--------------------------------------|--|-----------------------------|
| Conducting Foodborne Illness Investigations | State of Massachusetts | Classroom 2 days on-site | EH, Epi, Lab | No | Unknown |
| FIRST - Field Investigator Response and Surveillance Training: Building Epi Surge Capacity in Disease Outbreaks | State of Florida | Self-Study on-line and Classroom 1 day on site | EH, Epi, Lab | No | Unknown |
| Food Emergency Response Investigation Training & Exercise | State of Illinois | Classroom 2 days on-site | EH, Epi, Lab | No | Unknown |
| Principles of Epidemiology | State of Missouri | Self-Study on-line and Classroom 2 days on-site | EH, Epi, Lab | No | Unknown |
| Field Epidemiology and outbreak Investigation | Winnebago County Rockford, IL | Classroom 2 days on-site | EH, Epi, Lab | No | Unknown |
| School Nurses Responding to the Challenges of Foodborne Illness | American Nurses Foundation | Classroom 2 – days on-site | School Nurses | No | Unknown |
| Epi-Ready | NEHA/CDC | Classroom 2 – days on –site Optional 3 rd day – Food Defense and Train the trainer | EH, Epi, Lab, Nurses with team focus | Yes if attending at NEHA conference otherwise no if sponsored by CDC or State Agency | Unknown |
| Laboratory Investigation of Foodborne Illness | American Public Health Laboratories (APHL) | Classroom 4.5 days | Public Health Laboratorians | No | Unknown |
| State of Indiana | Environmental Outbreak Investigation | Classroom 2 days on-site | EH, Epi, Lab | No | Unknown |
| State of Virginia | Outbreak Investigation Training – Foodborne Module | 2 days on-site | EH, Epi, Lab | No | Unknown |
| Food and Drug Administration | Foodborne Illness Investigation FD325 | Classroom 2 ½ days on-site | EH, Epi, Lab | No | Unknown |

Committee: Interdisciplinary FBI

| Last Name | First Name | Position (Chair/Member) | Constituency | Employer | City | State | Telephone | Email |
|--------------------|---------------|-------------------------|-------------------------------|--|---------------|-------|----------------|--|
| Wallace | Susan M. | Member | Academia | Johnson and Wales University | Providence | RI | (401) 598-1706 | Susan.Wallace@jwu.edu |
| Armatis | David | Member | Industry - Food Service | Safe Foods First | San Francisco | CA | (650) 274-8573 | travelingchef@hotmail.com |
| Mohyla | Paulo | Member | Industry - Food Service | McDonald's | Oak Brook | IL | (630) 623-7319 | paulo.mohyla@us.mcd.com |
| Stevens-Grobbelaar | Becky | Member | Industry - Food Service | Yum! Brands, Inc. | Griffin | GA | (770) 228-8319 | becky.stevens-grobbelaar@yum.com |
| Mitchell | Timothy | Member | Industry - Retail Food Stores | Publix Super Markets, Inc. | Lakeland | FL | (863) 688-1188 | Tim.Mitchell@publix.com |
| Nicholson | Gina | Member | Industry - Retail Food Stores | The Kroger Company | Westerville | OH | (614) 898-3413 | gina.nicholson@kroger.com |
| Baker | Rance | Member | Other - Association | National Environmental Health Association | Denver | CO | (303) 756-9090 | rbaker@neha.org |
| Bugden | Elizabeth | Member | Other - Consulting Services | Bugden Solutions, Inc. | Manchester | NH | (603) 625-2606 | bugdene@comcast.net |
| Starobin | Dr. Anna | Chair | Other - Sanitation Services | Ecolab | Greensboro | NC | (336) 931-2185 | anna.starobin@ecolab.com |
| Nardone | Ernesto | Member | Other - Software Solutions | N2N Global | Longwood | FL | (407) 331-5158 | enardone@us.n2nglobal.com |
| Sharp | Donald | Member | Non-Regulatory - Federal | USCDC | Atlanta | GA | (404) 639-2213 | das8@cdc.gov |
| Lawrence | Michael David | Member | Regulatory - Local | Fairfax County Health Department | Fairfax | VA | (703) 246-8435 | david.lawrence@fairfaxcounty.gov |
| Samarya-Timm | Michele | Co-Chair | Regulatory - Local | Somerset County Department of Health | Franklin Park | NJ | (732) 297-0750 | SamaryaTimm@co.somerset.nj.us |
| Mack | James | Member | Regulatory - State | State of WI Dept of Health and Family Services | Madison | WI | (608) 266-8351 | james.mack@wisconsin.gov |
| Williams | Janet | Consultant | Regulatory - Federal | FDA/CFSAN | College Park | MD | 301-796-4534 | Janet.Williams@fda.hhs.gov |
| Smith | Chris | Consultant Alternate | Regulatory - Federal | FDA | Atlanta | GA | 404-253-1264 | Chris.Smith@fda.hhs.gov |
| Barlow | Kristi | Consultant | Regulatory - Federal | USDA/FSIS | Washington | DC | 202-690-7739 | kristina.barlow@fsis.usda.gov |

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 037
Issue: 2012 II-011**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Re-Create-Interdisciplinary Foodborne Illness Training Committee

Issue you would like the Conference to consider:

To continue tracking the progress of prominent disease training program (an accessible foodborne illness prevention/response education opportunities, of any length, offered at the state or national level). currently developed, identify essential educational content of foodborne disease outbreak training programs; evaluate and rank identified courses for relevance and content; identify any gaps in foodborne disease outbreak training; consider if levels of foodborne disease outbreak training/retraining are needed.

Public Health Significance:

Delays in reporting or investigating a possible foodborne disease outbreak can prolong an outbreak event, potentially resulting in further illness or economic disruption. Effective training of professionals in outbreak response can mitigate the effects of an outbreak. Many states indicate utilizing some form of foodborne epidemiological education programs, but there is great variability in training offerings. Training programs in outbreak investigation should have some consistency and a minimal level of proficiency to ensure rapid response and communication, amongst investigating parties. The mere existence of programs does not guarantee efficacy of the training. Accreditation or voluntary standards can provide a level of quality assurance and/or consistency amongst foodborne illness training programs to ensure that professionals are comfortably prepared to investigate outbreaks, institute proper control measures, and correspond appropriately amongst the many other parties and jurisdictions involved.

Recommended Solution: The Conference recommends...:

- that the Interdisciplinary Foodborne Illness Training Committee be re-created ; and
- Report back to the 2014 Biennial Meeting of the Conference for Food Protection.

Submitter Information:

Name: Anna Starobin, MD, CP-FS Co-Chair
Organization: Interdisciplinary Foodborne Illness Training Committee
Address: Ecolab8300 Capital Dr.
City/State/Zip: Greensboro, NC 27409

Telephone: 336 931 2185 Fax: 336 668 0744
E-mail: anna.starobin@ecolab.com

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 078
Issue: 2012 II-012**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report - Food Protection Managers Certification Committee (FPMCC)

Issue you would like the Conference to consider:

Please acknowledge the attached final report as submitted and thank the 2010-2012 Food Protection Manager Certification Committee (FPMCC) members for their effort in addressing the charges from the 2010 Biennial Meeting of the Conference for Food Protection.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference for Food Protection (dated April 5, 2006, and referenced on the Conference website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*.

http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

acknowledging the attached Food Protection Manager Certification Committee (FPMCC) report with attachments, and extending thanks to the Committee members for their work.

Submitter Information:

Name: Joyce Jensen, REHS, CP-FS, Committee Chair
Organization: Food Protection Manager Certification Committee
Address: 3140 N Street
City/State/Zip: Lincoln, NE 68510
Telephone: (402) 441-8033 Fax: (402) 441-6206
E-mail: jjensen@lincoln.ne.gov

Attachments:

- "FPMCC Final Report"
- "ANSI-Certification Providers Workgroup Report"
- "Proposed Standards Revision"
- "Proposed FPMCC Bylaws Revision"

- "FPMCC Roster"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

1 Conference for Food Protection Committee FINAL Report

COMMITTEE NAME: Food Protection Manager Certification Committee

COUNCIL (I, II, or III): Council II

DATE OF REPORT: January 6, 2012

SUBMITTED BY: Joyce Jensen, REHS, CP-FS, Committee Chair

COMMITTEE CHARGE(S):

Issue: 2010 II-020

The Conference recommends that the Food Protection Manager Certification Committee (FPMCC), a standing committee of the Conference be charged to:

- 1) Continue working with the CFP Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the *Standards for Accreditation of Food Protection Manager Certification Programs* in an up-to-date format.
 - Request that ANSI and the Certification Providers will examine all options for resolving the exam security and independence issues as they pertain to trainers serving as test administrators and come to consensus with a suggested action plan as follows:
 - By April of 2011, a recommended solution to be reviewed by the ANSI / Certification providers workgroup;
 - By June of 2011 the FPMCC, Certification Providers and ANSI have reached consensus on the recommended solutions;
 - The draft recommendations will be submitted to the Executive Board for their review at the August 2011 Board meeting;
 - Recommendations approved by the Executive Board will be submitted as an issue at the 2012 biennial meeting; and
 - Pending Conference approval, the new requirements will be implemented no later than January of 2013.
- 2) Investigate if the *Standards for Accreditation of Food Protection Manager Certification Programs* should create more alignment with ISO (International Standards Organization) 17024 and propose changes if needed.
- 3) Determine how Committee membership vacancies and change of membership representation are addressed in the Committee bylaws and propose changes if needed.
- 4) Report back to the Executive Board and the 2012 Biennial Meeting of the Conference for Food Protection.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

Meetings and Workgroup Assignments:

The FPMCC was charged with very important work to be completed by the 2012 CFP Biennial meeting. To accomplish those charges, each committee member was asked to participate on at least one workgroup. The FPMCC Chair Joyce Jensen and Vice-Chair Jeff Hawley selected workgroup chairs as follows:

| <u>Workgroup</u> | <u>Chair</u> | <u>Function</u> |
|-----------------------|-------------------|--|
| Logistics | Geoff Luebkekmann | Arrange for meetings, conference calls, scribe assignments, and minutes |
| Communications | George Roughan | Prepare communication re: Standards, FAQ, and CFP webpage |
| Standards | Kate Piche | Maintain the Standards, and propose revisions |
| Bylaws | Vicki Every | Review and recommend revisions to FPMCC Bylaws |
| ANSI/Providers | Jeff Hawley | Examine all options for resolving the exam security and independence issues as charged by the 2010 CFP |

The FPMCC held three face-to-face meetings: August 25-26, 2010 in Rosemont, IL; April 6-8, 2011 in Indianapolis, IN; and October 5-7, 2011 in Las Vegas, NV. In addition, a face-to-face ANSI/ Certification Provider Workgroup meeting was held December 13-15, 2010, in Orlando FL. A fourth FPMCC face-to-face meeting is scheduled on April 13, 2012, just prior to the 2012 CFP Biennial Meeting.

A new committee member orientation was presented just prior to our first face-to-face meeting on August 25, 2010. This orientation provided important information about the committee's history, the Standards (*Standards for Accreditation of Food Protection Manager Certification Programs*), the terminology, and about ANSI and ACAC so new members are better prepared to participate in the committee meetings. This 2010 PowerPoint presentation is available on the CFP website.

FPMCC conference calls (or webinars) were held on: December 7, 2010; February 10, 2011; March 22, 2011; June 24, 2011; and November 16, 2011. An additional conference call is scheduled for early 2012 to review the Communication Workgroups recommendations for the CFP FPMC webpage. Changes to the webpage will be worked out with CFP Executive Director and Assistant. In addition, numerous workgroup conference calls were held in preparation for the FPMCC meetings/calls.

Exam Security per Issue: 2010 II-020 1) and 2):

Following the April 2010 CFP Biennial meeting, the FPMCC Chair and Vice Chair had the task to establish an ANSI-Certification Providers (ANSI-CP) Workgroup by June 2010 to begin the work on the charge to examine all options for resolving the exam security and independence issues as they pertain to trainers serving as test administrators, and come to consensus with a suggested action plan. The workgroup members agreed that John Marcello, with FDA's permission, should facilitate the problem resolution process to meet our committee charge.

The ANSI-CP Workgroup had monthly conference calls with homework assignments from the facilitator to clarify and quantify the exam security issues that were experienced by the certification providers or identified by ANSI. All data submitted were sanitized by the facilitator to allow for candid and accurate information being provided by all; it was necessary to understand the scope of the problem before addressing solutions. After much "homework" collecting, quantifying, and categorizing the security issues, the workgroup held a three day face-to-face meeting in December 2010 to complete the problem resolution process and establish the recommendations to be presented to the FPMCC.

The ANSI-CP Workgroup examined all of the exam security issues experienced by the certification providers. The workgroup established both short-term and long-term objectives for improving exam security. Recommendations were presented to address all of the short-term objectives for improvement of the entire testing process based on logistics, acceptability, cost, technology, and complexity. Recommended changes to the Standards were unanimously agreed on by the workgroup to address each of the security issues identified.

Exam Security Recommendations:

- **Exam Development** – Increase the exam form item bank from 600 to 1000.
- **Test Administrator/Proctor's Roles and Responsibilities** - Clearly delineate all Test Administrator/Proctor roles and responsibilities.
- **Training of Test Administrators/Proctors** - Require the certification organizations to provide a training program for Test Administrators/Proctors based on learning objectives that reflect their roles/responsibilities.
- **Verification of Test Administrators** - Require certification organizations to notify ANSI when Test Administrator/Proctor has been removed.
- **Exam Item Exposure** - Require certification organizations to have a system to track all examinations (exam books and/or answer sheets).
- **Exam Shipping and Handling** - Restructure Standards to include provisions that ensure security for all shipping and handling of exams by certification organizations and Test Administrators/Proctors.

- **Test Sites** - Require a private room accessible only to Test Administrators/Proctors and Examinees during test administration.
- **Certificates** - Require certification organizations to have a system to provide verification to the current validation of individual certificates.
- **Advertising Standards** - Test Administrator/Proctor cannot make statements or claims, nor have affiliation with any organization making statements or claims, such as guarantees of passing the exam.
- **Management Systems** - Include a new section to the Standards that contains requirements for the implementation of management systems that include document control, internal audits, and management review.

On March 22, 2011, the ANSI-CP Workgroup and John Marcello presented the Workgroup's process and recommendations to the FPMCC in a Webinar in preparation for the April 6-8, 2011, FPMCC meeting held in Indianapolis. Attached is the document "ANSI-Certification Providers Workgroup Report" that is a detailed summary report of the process the ANSI/Certification Providers Workgroup took to come to consensus on the recommendations.

At the April 2011 meeting the full FPMCC voted to accept the Workgroup's recommendations with just one opposing vote. The opposing concern was that while these recommendations increase exam security, they did not separate the roles of trainer and test administrator/proctor at this time. The FPMCC then began the specific work of incorporating the recommendations into the Standards. The recommended revision to the Standards, especially establishing the new Standard Section 9.0 - Management Systems, creates greater alignment with ISO (International Standards Organization) 17024 as identified in Issue: 2010 II-020.

As proposed in the FPMCC charges for 2014, the FPMCC will establish criteria and protocols to evaluate the effectiveness of the increased exam security resulting from these recommendations by December 2012. The results of the final evaluation of the exam security improvements will be presented to the 2016 CFP. At that time, the FPMCC will propose when and how FPMCC will move forward to meet the long-term objective to eliminate the inherent conflict of interest within the testing process and to meet all applicable nationally accepted personnel certification Standards based on the evaluation of exam security resulting from the implementation of the new Standards. This long-term objective will create alignment with International Standards Organization (ISO) 17024 per Issue: 2010 II-020.

These exam security recommendations resulted in the most substantial revision to the Standards since the Standards were adopted. Several of these recommendations have already been implemented by the certification organizations, who have reported a significant improvement in exam security as a result.

Using the FPMCC approved recommendations from the ANSI-CP Workgroup, the Standards Workgroup then drafted proposed revisions to address exam security and proposed additional clarifications to the Standards. This includes revisions to ensure terminology used was consistent

throughout the Standards and reorganization of the Standards to eliminate redundancy when possible.

A draft of the Standards revisions was presented to the CFP Executive Board at the August 30, 2011, meeting in Ann Arbor, Michigan. The Board asked questions and then voted to accept the report and recommendations presented by the FPMCC.

The FPMCC held a meeting in Las Vegas on October 5, 6, and 7, 2011, to refine the proposed revisions to the Standards to ensure clarity and consistency. A FPMCC conference call in November finalized the last of the wording changes made in a few areas.

The two FPMCC Issues submitted related to the *Standards for Accreditation of Food Protection Manager Certification Programs* have been separated into the substantive revisions related to exam security, and non-substantive cleanup revisions which include consistent terminology and a new numbering system. (See Issues titled “Standards - Strengthening Exam Security” and “Standards - Non-Substantive Revisions.”)

Evaluating Effectiveness of Revised Standards on Exam Security

It is important to the FPMCC that the results of these revisions address the short term objectives as identified by the ANSI-CP Workgroup for: improving the entire testing process based on logistics, acceptability, cost, technology and complexity to enhance procedures and accountability of the test administrators, proctors and certification organizations; and to formalize a management system that creates systematic, continuous improvement process through document control, internal audits and management review.

The outcome of the proposed Standards revisions must then be evaluated to ensure that they are resulting in substantial improvement in exam security. The FPMCC is proposing a plan to work with ANSI to update the ANSI accreditation application to incorporate the final changes approved at the 2012 Biennial Meeting Standards, develop surveillance documents, establish an analysis framework and research plan for data collection and evaluation of improvement in exam security, complete a preliminary study to ensure that the evaluation tool works, and report to the 2014 Biennial Meeting.

Following the 2014 Biennial Meeting the FPMCC will then be prepared to complete an evaluation of the results of the 2012 Standards revision with a complete year of data from the certification organizations after implementation of the revised Standards. The FPMCC would then propose reporting back to the 2016 Biennial Meeting the results of the evaluation, and where the process is at relative to the long term objectives as identified by the ANSI-CP Workgroup for eliminating the inherent conflict of interest within the testing process and meeting all applicable nationally accepted certification standards.

The FPMCC understands that with improved surveillance and the implementation of the formal management systems (proposed new section of the Standards) there will be an initial increase of identified security breaches as compared to the information collected in 2010 by the ANSI-CP Workgroup. We recognize that this would not be reflecting an increase in actual security breaches, but rather a better system for identifying and reporting of these breaches.

To ensure that this evaluation work will be completed, the FPMCC has established the following work plan to be used for proposed FPMCC charges for both the 2012 and the 2014 Biennial Meetings of the Conference for Food Protection.

FPMCC Plan for Evaluation of the New Security Standards

April 2012 – Recommend to the CFP by approval of Continuing Charges to the FPMCC the formation of the Security Evaluation Workgroup for the purpose of starting the evaluation process by July 1, 2012.

June 30, 2012 - Establish an ad hoc workgroup (Security Evaluation Workgroup) for the purpose of:

- 1) Drafting ANSI revisions to the accreditation application,
- 2) Developing surveillance documents, and
- 3) Establishing an analysis framework and research plan for data collection and evaluation of improvement in exam security.

The FPMCC Chair will form the Security Evaluation Workgroup which will include:

- ANSI representative
- ANSI field research design (data) subject matter expert
- CFP ACAC representative
- One representative from each Certification Organization
- FPMCC Chair & Vice Chair
- One food industry representative
- One food regulatory representative

The Security Evaluation Workgroup will formulate a foundation for quantitative/qualitative analysis that addresses the long term goal to eliminate the inherent conflict of interest within the testing process by reducing undue trainer influence (when a trainer acts as a test administration/proctor) on exam administration and report its results of the analysis at the CFP 2014 Biennial Meeting.

July 2012 – The Security Evaluation Workgroup begins their work with a deadline to report findings to the FPMCC by December 1, 2012.

August 2012 – The FPMCC members are approved for the 2012-14 biennium.

October 2012 – The Security Evaluation Workgroup reports progress to full FPMCC meeting.

December 1, 2012 – The FPMCC receives, reviews, and approves the report of the Security Evaluation Workgroup.

June 30, 2013 – the deadline for full implementation of security Standards as approved at the 2012 Biennial Meeting.

June through October 2013 – The collection period of data compiled by ANSI for preliminary review and validation of the research plan, data collection instruments, and methods.

October or November 2013 – FPMCC meeting, prepare report for the 2014 Biennial Meeting.

December 2013 – FPMCC draft Final Report and proposed Issues submitted for the 2014 Biennial Meeting.

April 2014 - FPMCC reports findings and Issues to the 2014 CFP Biennial Meeting and recommends appropriate action.

June 30, 2014 – “New Security Standards” that are approved at the 2012 CFP Biennial Meeting become auditable with one year of data, to coincide with ANSI accreditation assessment period of the Certification Organizations.

Fall 2014 - FPMCC meeting; ANSI presents report to FPMCC on the quantitative/qualitative analysis findings on “New Security Standards” effectiveness.

Fall 2014 to Fall 2015 – FPMCC formulates recommendations.

December 2015/April 2016 - FPMCC reports findings and Issues to the 2016 CFP Biennial Meeting and recommends appropriate action.

FPMCC Bylaw Revisions (per Issue: 2010 II-020 3):

The Bylaws Workgroup drafted revisions to the FPMCC Bylaws based on the charge and CFP Executive Board input from the August 24, 2010 meeting in Rosemont, Illinois. The Bylaw workgroup was formed at the August 25-26, 2010, FPMCC meeting in Rosemont. Vicki Everly, Workgroup Chair, sought input from Ruth Hendy, the CFP Constitution and Bylaw/Procedures Chair, to address consistence with the CFP Bylaws when possible. The Bylaws Workgroup was tasked to explore the following areas in the FPMCC Bylaws and, if necessary, to make recommendations for language changes:

- Term limits and membership retention.
- Special rules (to replace existing “modified” Robert’s Rules of Order language).
- Language Consistency – both within the FPMCC Bylaws and with the CFP Bylaws.
- Quorum language.
- Committee structure and voting (including workgroups and sub-committees).
- Removal of committee members for non-participation.
- Edit/revise “alternates” language.
- Edit to clarify “issue” terminology.
- Clarification of comments regarding adherence to CFP Bylaws and Robert’s Rules of Order.

Proposed Bylaw revisions were presented and discussed at the April 8, 2011 FPMCC meeting in Indianapolis, and the October 5, 2011 meeting in Las Vegas.

The two FPMCC Issues submitted related to the *Food Protection Manager Certification Committee Bylaws* have been separated into:

- a) the substantive revisions including the new language addressing membership from potential additional certification organizations, adding language to address alternate members and advisors to the committee; and
- b) non-substantive changes which include consistent and accurate terminology and updating to current procedures.

Communication Workgroup:

It is a challenge to keep the information provided on the CFP web page up-to-date and current. The Communication Workgroup, with George Roughan as Chair, reviewed the CFP website. Concerns and broken links were identified, recommendations were provided, and many updates made as a result of their review. In addition, specific changes have been made to the Food Protection Manager Certification page.

The workgroup will continue to review and propose changes to update the webpage to keep it current and to make sure that the work of the FPMCC is available to all who want to keep up with the important work of the committee. Changes to the webpage will be approved by the FPMCC and then forwarded to the CFP Executive Assistant to post.

ANSI/ACAC:

At the August 25-26, 2010 FPMCC meeting, the committee discussed and provided input to the American National Standards Institute (ANSI) regarding proposed amendments to the Accreditation application based on the changes to the Standard approved at the 2010 CFP Biennial Meeting. The FPMCC voted unanimously to accept the changes in the application as amended, and voted unanimously to establish an implementation date of July 2011, the beginning of the next application cycle.

At the August 30, 2011 CFP Executive Board meeting, the Board accepted the FPMCC nomination of Joyce Jensen to serve as one of the two CFP designated ANSI-CFP Accreditation Committee (ACAC) members to begin after her tenure as FPMCC Chair ends at the 2012 CFP Biennial Meeting. Lee Cornman continues to serve as the other ACAC member representing CFP.

Acknowledgments:

The FPMCC would like to thank Dr. Roy Swift, Senior Director, Personnel Credentialing Accreditation Programs, with ANSI, for his work with the FPMCC. He has been a knowledgeable resource in personal certification, providing guidance that helped the FPMCC accomplish significant improvements to the Standards, especially over the past two years.

The FPMCC would like to thank John Marcello, Retail Food Specialist, FDA, for his facilitation of the ANSI-Certification Providers Workgroup. His organization skills and leadership through this process was outstanding. He helped the workgroup identify the problems and then led the group to find solutions that everyone could agree with.

The FPMCC would like to thank Dr. Cynthia Woodley, Vice President, Professional Testing Inc., for updating the orientation PowerPoint and presenting the new member orientation on August 25, 2010. Dr. Woodley was a long time member and past Chair of the FPMCC. This PowerPoint is available on the CFP website for anyone interested in the committee.

To assist with the logistics for the FPMCC meetings, a special thank you to:

- US Food Service for providing the meeting room for the August 25-26, 2010 FPMCC meeting in Rosemont, IL.
- Harris Teeter for hosting the December 7, 2010 conference call.
- National Registry for providing the meeting room and refreshments for the ANSI-Certification Providers workgroup December 14-16, 2010 in Orlando, FL.
- National Restaurant Association Solutions for hosting the February 10, 2011 FPMCC webinar/conference call.
- Prometric for hosting the March 22, 2011 webinar presented by John Marcello.
- The Florida Restaurant Association, the National Restaurant Association Solutions, and the National Registry for providing the meeting room and refreshments for the October 5-7, 2011 FPMCC meeting in Las Vegas, NV.

The Chair would like to recognize and thank the Vice-Chair Jeff Hawley, and the Workgroup Chairs: Kate Piche, Vicki Everly, George Roughan, and Geoff Luebkekmann. They embraced their responsibility to accomplish a significant amount of the committee work during the past two years.

Last, but not least, the Chair would like to recognize and thank the 2010-2012 FPMCC members, and the organizations/agencies they represent, which allowed them to participate on the FPMCC. Without our involved, committed, and active members, we would not have been able to achieve as much as we have. As a result of respectful debate and discussion, a significant impact of the credibility of the Food Protection Manager Certification has been accomplished.

REQUESTED ACTION:

The Committee submits the following Issues to the 2012 CFP Biennial Meeting:

- 1) Report - FPMCC (Food Protection Manager Certification Committee Final Report)
- 2) Standards - Strengthening Exam Security (*Standards for Accreditation of Food Protection Manager Certification Programs Security Revisions*)
- 3) Standards - Non-Substantive Revisions (*Standards for Accreditation of Food Protection Manager Certification Programs Non-Substantive Revisions*)
- 4) FPMCC Bylaw Revision (*Food Protection Manager Certification Committee Bylaws Revisions*)
- 5) FPMCC Bylaw Non-Substantive Revisions (*Food Protection Manager Certification Committee Bylaws Non-Substantive Revisions*)
- 6) FPMCC - New and Continuation Charges

ATTACHMENTS:

- 1) *Standards for Accreditation of Food Protection Manager Certification Programs* (with revisions tracked in legislative format)
- 2) *Food Protection Manager Certification Committee Bylaws* (with revisions tracked in legislative format)
- 3) ANSI-Certification Providers Workgroup Report (process and recommendations for resolving concerns with Food Protection Manager exam security)
- 4) Food Protection Manager Certification Committee Member Roster

NEW OR CONTINUATION CHARGES:

- 1) Continue working with the CFP Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the *Standards for Accreditation of Food Protection Manager Certification Programs* in an up-to-date format.
- 2) Revise/Update the *Standards for Accreditation of Food Protection Manager Certification Programs* Preamble and Annexes.
- 3) Request approval of the formation of the Security Evaluation Workgroup by the FPMCC Chair for the purpose of starting the exam security evaluation process by July 1, 2012, with workgroup representation as follows:
 - ANSI representative,
 - ANSI field research design (data) subject matter expert
 - CFP ACAC representative
 - One representative from each Certification Organization
 - FPMCC Chair & Vice Chair
 - One food industry representative
 - One food regulatory representative
- 4) Evaluate the results of the Standards revisions as approved by the 2012 Biennial Meeting to ensure that they are resulting in substantial improvement in exam security. The FPMCC is proposing a plan to:
 - work with ANSI to update the ANSI accreditation application to incorporate the final Standards changes as approved at the 2012 Biennial Meeting,
 - develop surveillance documents,
 - establish an analysis framework and research plan for data collection and evaluation of improvement in exam security, and
 - complete a preliminary study to ensure that the evaluation tool works.
- 5) Report back to the Executive Board and the 2014 Biennial Meeting of the Conference for Food Protection.

ANSI-Certification Providers Workgroup Report

Process and Recommendations for Resolving Concerns with Food Protection Manager Exam Security

The following summary is based on the Webinar presentation to the FPMCC on March 22, 2011, identifying the process that the ANSI-Certification Providers Workgroup completed, and the recommendations they presented to the FPMCC for the April 2011 Committee meeting. The FPMCC accepted the workgroup recommendations and developed draft Standard Revisions to address all of the recommendations.

ANSI/Certified Provider Workgroup Members

- John Marcello - Facilitator
- ANSI – Roy Swift
- ANSI-CFP Liaison – Lee Cornman
- CFP FPMCC – Jeff Hawley (Workgroup Chair), Joyce Jensen
- National Registry FSP – Larry Lynch
- NRA Solutions – Kate Piche
- Prometric – Ken Walters

Workgroup Meeting Structure

- ANSI/Certification Providers identified primary spokesperson for their organization
- Consensus building voting process used (thumbs up; sideways; down)
- Issue introduced for discussion must be:
 - Specific and Clear,
 - Contain Rationale, and
 - Focus is on one Issue at a Time
- Commitment to complete all sub group assignments within agreed upon time frames

Problem Solving Process

STEP 1 – Develop a Clear Problem Statement

STEP 2 – Analyze the Problem

STEP 3 – Generating Potential Solutions

STEP 4 – Selecting the Solution

STEP 5 – Implementing the Solution

STEP 6 – Evaluating the Solution

STEP 1 –Develop a Clear Problem Statement

- Each workgroup member developed a problem statement and provided specific examples
- Workgroup members ranked and prioritized the problem statements
- Certification Provider were then assigned the task of providing “Actual” documented complaints pertaining to the administration of their exams
- Most Common Incident Reported for Each of the “Problematic Areas”

- Documented complaints were then collated and organized into one comprehensive matrix
 - 6 Credibility / Training of Proctors: Suspected Cheating
 - 59 Handling / Shipping of Exam Packages: Missing exams / incomplete exam returns / past due exams / retired exams
 - 52 Location / Site Irregularities: Lost exams by carrier / inventory errors by test administrators
 - 6 Breach of Provider’s T.A. Requirements: All candidates given same form of the exam

- After reviewing the complaint incident matrix, the workgroup added a 5th “problematic area” – Certification Provider’s Quality Assurance Controls for Test Administration / Test Administrators:
 - ▶ Document Control
 - ▶ Internal Audits
 - ▶ Management Review

STEP 2 – Analyzing the Problem

- Workgroup conducted an assessment of how existing CFP Standards currently addressed the documented “problematic areas” and complaint incidents.
- Specific CFP Section numbers and provisions associated with each “problematic area” and complaint incident were added to the problem-solving matrix.
- Certification Providers identified quality assurance controls they had in place to address “problematic areas” and complaint incidences that are *in addition to* what is required in the CFP Standards.
- Provider’s QA controls were added to the Problem-Solving Matrix.
- Certification Providers identified quality assurance controls they had in place to address “problematic areas” and complaint incidences that are *in addition to* what is required in the CFP Standards.
- Provider’s QA controls were added to the Problem-Solving Matrix.

STEP 3 – Generating Potential Solutions

ANSI / Certification Providers reviewed the problem solving matrix and generated potential solutions / options for minimizing incidents related to document test administration and exam security.

- For each potential solution, ANSI / Certification Providers included rationale as to how the recommendation / option would enhance the test administration process for Food Protection Manager Certification.
- 52 Potential Solutions / Options were generated for the five “Problematic Areas”
 - ▶ Credibility & Training of TA’s/Proctors (15 Solutions / Options)
 - ▶ Handling / Shipping of Exam Packages (10 Solutions / Options)
 - ▶ Location / Site Irregularities (10 Solutions / Options)
 - ▶ Breach of Provider’s T.A. Requirements (9 Solutions / Options)
 - ▶ Providers QA Process / Management System(8 Solutions / Options)

STEP 4 – Selecting the Solution (Completed at the Orlando Face-to-Face meeting)

- Workgroup reviewed, combined, and ranked potential solutions.
- Every potential option or solution was considered.
- Potential Solutions were roughly assessed using one or more of the criteria included in Step 4.

Criteria used to Assess Solutions:

- **Control** – The extent to which the solution is within the control of the FPMCC and CFP
- **Appropriateness** - The degree to which the solution resolves the problem
- **Resource Requirements** - The extent which resources (\$; people, etc.) are required for implement the solution
- **Return on Investment** - Cost-Benefit Analysis
- **Time** - Length of time it will take to resolve problem
- **Acceptability** - Degree to which people involved will accept the changes

Refined and Clarified Problem Statement/Charge:

“Examine all options for resolving the exam security and independence issues as they pertain to trainers serving as test administrators”

Refined and Clarified Overarching Workgroup Objective:

“Enhance the integrity of the entire testing process which included identification and analysis of root causes of security violations and recommended solutions”

Outline a Strategic Direction:

Identified Short-Term Objectives for improvement of the entire testing process based on logistics, acceptability, cost, technology, and complexity to:

- ▶ Enhance procedures & accountability of:
 - a. Test Administrators,
 - b. Proctors, and
 - c. Certification Organizations.
- ▶ Formalize a management system that creates systematic, continuous improvement process through:
 - a. Document Control,
 - b. Internal Audits, and
 - c. Management Review.

Identified Long-Term Objectives:

- ▶ Eliminate the inherent conflict of interest within the testing process.
- ▶ Meet all applicable nationally accepted personnel certification standards.

STEP 5 – Implementing the Solution

The FPMCC accepted the recommendations the ANSI-Certification Providers Workgroup presented. The workgroup provided a rough draft of proposed revisions to the Standards. The FPMCC felt it was important to make the Standard revisions clear and organized. The Standards Workgroup then worked on the details of fine tuning and

reorganizing the proposed revisions to Standard 5 and provided their recommendations to the FPMCC members in July. The draft recommendations will be submitted to the Executive Board in August 2011, for their review.

STEP 6 – Evaluating the Solution

Criteria and Protocol will be established to assess the effectiveness of the short-term solutions:

- Identify and standardize the assessment criteria
- Establish time frames for implementation and evaluation of short term objectives
- Determine who will conduct the effectiveness assessment
- Ensure short term objectives are providing the level of control consistent with the work group's long-term objectives

Workgroup Recommendations for Changes to Standards

Exam Development - On a quarterly basis have a minimum of 2 exam forms based on 1000 item bank (increased from 600).

Test Administrator/Proctor's Roles and Responsibilities - Standards must clearly delineate all Test Administrator/Proctor's roles and responsibilities.

Training of Test Administrators/Proctors - Require the certification organization to provide a training program for Test Administrator/Proctors based on learning objectives that reflect their roles/responsibilities.

Verification of Test Administrators - Require certification organization to notify ANSI when Test Administrator/Proctor has been removed.

Exam Item Exposure - Require the certification organization to have a system to track all examinations (exam books and/or answer sheets).

Exam Shipping and Handling - Restructure Standards to include provisions that ensure security for all shipping & handling of exams by the certification organization and Test Administrator/Proctors.

Test Sites - Require a private room accessible only to Test Administrator/Proctor and Examinees during test administration.

Certificates - Require the certification organization to have a system to provide verification to the current validation of individual certificates.

Advertising Standards – Test Administrator/Proctor cannot make statements or claims, or cannot have affiliation with any organization making statements or claims, such as guarantees of passing the exam.

Management Systems - Include a new section to the Standards that contains requirements for the implementation of management systems that include the following three components: Document Control; Internal Audits; and Management Review.

1. Document Control to include:

- ▶ Lists of all documents pertaining to the certification program
- ▶ Dates for documents approved for implementation by the certification organization
- ▶ Who within the certification organization is responsible for the documents
- ▶ Listing of individuals who have access to the documents

2. Internal Audits to include:

- ▶ Identification of critical activities
- ▶ Data to be collected and how often it is evaluated
- ▶ How an audit should be conducted
- ▶ Who can perform audits
- ▶ How evaluation of critical activities is determined during the audits
- ▶ Determine if any deficiencies have been found

3. Management review to include:

- ▶ At a minimum, an annual review of the results from internal audits
- ▶ A select management staff should comprise the committee that conducts the review
- ▶ Committee reviews the results of audits to determine:
 - √ if corrective actions are needed
 - √ if preventive actions are needed
- ▶ Determine effectiveness of corrective actions and preventive actions

In addition to the proposed changes to the Standards, the workgroup has requested the certification providers to collectively review their best practices / procedures and develop uniform, consistent test administration protocols for:

- ▶ Examination site conformity,
- ▶ Verbal instructions given to examinee at test site, and
- ▶ Classification of security breaches and/or infractions

Certification providers are assessing how they will deliver training programs to test administrators.

April 2010 2012 (January 5, 2012 draft)

Conference for Food Protection

Standards for Accreditation of Food Protection Manager Certification Programs

As Amended by at the 2010 2012 Biennial Meeting of the Conference for Food Protection

Preamble

The Conference for Food Protection, hereinafter referred to as the CFP, is an independent voluntary organization that has identified the essential components of a nationally recognized Food Protection Manager *Certification* Program and established a mechanism to determine if *certification organizations* meet these standards. The CFP Standards for *Accreditation* of Food Protection Manager *Certification* Programs is intended for all *legal entities* that provide *certification* for this profession. The standards have been developed after years of CFP's research into, and discussion about, Food Protection Manager *Certification* Programs.

All ~~certifying~~ *certification organizations* attesting to the *competency* of Food Protection Managers, including *regulatory authorities* that administer and/or deliver *certification* programs, have a responsibility to the individuals desiring *certification*, to the employers of those individuals, and to the public. ~~Certifying~~ *Certification organizations* have as a primary purpose the evaluation of those individuals who wish to secure or maintain Food Protection Manager *Certification* in accordance with the criteria and standards established through the CFP. ~~Certifying~~ *Certification organizations* issue *certificates* to individuals who meet the required level of *competency*.

The CFP standards are based on nationally recognized principles used by a variety of organizations providing *certification* programs for diverse professions and occupations. *Accreditation*, through the process recognized by CFP, indicates that the *certification organization* has been evaluated by a third party *accrediting organization* and found to meet or exceed all of the CFP's established standards.

To earn *accreditation*, the *certification organization* ~~must~~ shall meet the following CFP standards and provide evidence of compliance through the documentation requested in

the application. In addition, the *certification organization* ~~must~~ shall agree to abide by *certification* policies and procedures which are specified by the CFP Food Protection Manager Certification Committee, hereinafter referred to as the FPMC Committee, approved by the CFP, and implemented by the *accrediting organization*.

The *accrediting organization* shall verify and monitor continuing compliance with the CFP standards through the entire *accreditation* period. The CFP FPMC Committee will work directly with the *accreditation organization* to enhance and maintain *certification* policies and procedures that meet the specific needs of Food Protection Managers while ensuring a valid, reliable and *legally defensible* evaluation of *certification* programs.

The American National Standards Institute (ANSI) was selected as the *accrediting organization* for the CFP Standards for *Accreditation* of Food Protection Manager *Certification* Programs and assumed its duties in January, 2003. The CFP FPMC Committee continues to work within the Conference structure to monitor the criteria and selection process for the organization serving as the accrediting body for Food Protection Manager *Certification* Programs.

The CFP strongly encourages regulatory authorities and other entities evaluating credentials for Food Protection Managers to recognize and endorse these standards and the accreditation process. The CFP Standards for *Accreditation* of Food Protection Manager *Certification* Programs provides the framework for universal acceptance of individuals who have obtained their credentials from an *accredited certification program*. In the U.S Food and Drug Administration's ~~Model~~ Food Code, hereinafter referred to as the FDA Food Code, Section 2-102.44 20 recognizes Food Protection Manager *certificates* issued by an *accredited certification program* as one means of meeting the FDA Food Code's "Demonstration of Knowledge" requirement, ~~as prescribed in Section Paragraph~~ 2-102.11(B).

Modifications and Improvements

The FPMC Committee followed the Conference directive to use the 1996 conference working document, Standards for Training, Testing and *Certification* of Food Protection Managers, in the development of accreditation standards. Extensive revision of this document was presented to CFP's ~~2000, and 2002~~ 2012 Biennial Meeting of the Conferences for Food Protection under the title, Standards for *Accreditation* of Food Protection Manager *Certification* Programs.

The charge to the FPMC Committee from the 2010 Biennial Meeting of the Conference for Food Protection resulted in revisions to the *Standards* to enhance the integrity of the entire testing process, which includes identification and analysis of root causes of security violations and implement solutions.

The revision and reformatting of the document were made after a comprehensive FPMC Committee review of each section. ~~The~~ This revision of the *Standards for Accreditation of Food Protection Manager Certification Programs*:

1. adds and improves definitions that are more precise and more consistent with terminology and definitions used in the *psychometric* community and by accreditation organizations;
- ~~2. italicizes defined terms throughout the document;~~
- ~~3. eliminates ambiguities in the 1996 conference working document pertaining to test development and administration;~~
- ~~4. identifies *certification organization* responsibilities to candidates, the public and the *accrediting organization*;~~
- ~~5. adds computer-based test standards; and~~
- ~~6. clarifies demonstration of *continued proficiency*;~~
2. reorganizes *Standards* to eliminate duplication and align with purpose;
3. modifies or creates *Standards* to better address professional credibility and training of test administrators/proctors; handling of examination packages; shipping irregularities; location (site) irregularities; and breach of the *certification organization's test administrators/proctors* protocols and requirements;
4. uses "test administrator/proctor" in the *Standards* to indicate duties for both "test administrator" and "proctor;" and
5. adds a standard for management systems.

Annexes

The annexes located at the back of the document are NOT part of the standards, but provide information to guide those responsible for implementing or reviewing Food Protection Manager *Certification* Programs. Each of the annexes provides guidelines for specific responsibilities that impact the effective implementation of the Conference Standards for *Accreditation* of Food Protection Manager *Certification* Programs.

Annex A provides a "Code of Ethics" for *certification organizations* and test providers responsible for the design of the assessment tool used to measure a candidate's an examinee's competency. *Certification organizations* have a responsibility to ensure that the *certification* process is fair to the candidates examinees and protects their inherent rights.

Annex B provides some guidance to regulatory authorities that incorporate Food Protection Manager *Certification* as part of their requirements to obtain or retain a permit to operate. The CFP *Standards for Accreditation of Food Protection Manager Certification Programs* is designed to be a set of voluntary unifying national standards providing a mechanism for the universal acceptance of food protection managers who obtain their *certificates* from an *accredited certification program*.

Over the past 25 years, many regulatory authorities have developed their own Food Protection Manager *Certification* Programs. This has resulted in a variety of standards for *certification* programs. The CFP national standards for universal acceptance of *Certified Food Protection Managers* provide regulatory authorities reliable and *legally defensible* criteria for evaluating *certification* programs. In addition, they eliminate duplication of testing and additional cost for the industry.

Regulatory authorities that may not be in a position to eliminate their existing programs are encouraged to recognize food protection managers certified in accordance with these standards as fulfilling their program requirements. Annex B provides additional guidance, developed through the CFP, for the implementation of these regulatory *certification* programs.

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(Note: Table of Contents Titles, terminology, and page numbers will be changed as needed to reflect the 2012 Biennial Meeting of CFP approved revisions to the Standards.)

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SECTION 1.0 - DEFINITIONS

1.0 Definitions

- 1.1 **Accreditation** means that an *accrediting organization* has reviewed a Food Protection Manager *Certification* Program and has verified that it meets standards set by the CFP (a review of a ~~*certifying certification organization*~~ by an independent organization using specific criteria, to verify compliance with Food Protection Management *Certification* Program Standards).
- 1.2 **Accrediting organization** means an independent organization that determines whether a Food Protection Manager *Certification* Program meets the standards set by the CFP.
- 1.3 **Accredited certification program** means a Food Protection Manager *Certification* Program that has been evaluated and listed by an *accrediting organization* accepted by the CFP and has met the CFP standards for such programs.
- a: A. refers to the *certification* process and is a designation based upon an independent evaluation of factors such as the sponsor's mission; organizational structure; staff resources; revenue sources; policies; public information regarding program scope, *continued proficiency*, discipline, and grievance procedures; and ~~test~~ examination development and administration.
- b: B. does not refer to training functions or educational programs.
- 1.4 **Algorithm** means a set of procedures or rules pertaining to the selection of ~~test~~ questions on an ~~exam~~ examination.
- 1.5 **Certificate** means documentation issued by a *certification organization*, verifying that an individual has complied with the requirements of an *accredited certification program*.
- 1.6 **Certification** means the process wherein a *certificate* is issued.
- 1.7 **Certification organization** means an organization that provides a *certification* program and issues the *certificate*.
- 1.8 **Certified Food Protection Manager** means a person who has demonstrated by means of a *food safety certification examination* to a ~~*certifying certification organization*~~ that he/she has the knowledge, skills and abilities required to protect the public from foodborne illness. Duties of such persons include but are not necessarily limited to:

- a. A. responsibility for identifying hazards in the day-to-day operation of a *food establishment* that provides food for human consumption;
 - b. B. development or implementation of specific policies, procedures or standards aimed at preventing foodborne illness;
 - c. C. coordination of training, supervision or direction of food preparation activities, and responsibility for taking corrective action as needed to protect the health of the consumer; and
 - d. D. responsibility for completion of in-house self-inspection of daily operations on a periodic basis to see that policies and procedures concerning food safety is are being followed.
- 1.9 Competency** means a defined combination of knowledge, skills, and abilities required in the satisfactory performance of a job.
- 1.10 Competency examination** means an instrument that assesses whether an individual has attained at least a minimum level of *competency* that has been determined to be necessary to perform effectively and safely in a particular occupation or job. It ~~must~~ shall be based on a thorough analysis of requirements for safe and effective performance.
- 1.11 Computer-adaptive testing** means a method of *computer-based testing* that uses *algorithms* based on the statistics of the ~~test~~ examination questions to determine the examinee's proficiency by selecting items at various difficulty levels.
- 1.12 Computer-based testing** means an examination administered on a computer.
- 1.13 Continued proficiency** means a *certification organization's* process or program designed to assess continued *competence* and/or enhance the *competencies* of *Certified Food Protection Managers*.
- 1.14 Demographic data** means the statistical data of a population, especially the data concerning age, gender, ethnic distribution, geographic distribution, education, or other information that will describe the characteristics of the referenced group.
- 1.15 Educator**, in this instance, means a teacher in a secondary or post-secondary program leading to a degree or *certificate* in a course of study that ~~that~~ includes *competencies* in prevention of foodborne illness.
- 1.16 Entry level performance** means carrying out job duties and tasks effectively at a level that does not pose a threat to public safety but not necessarily beyond that level. It requires safe performance of tasks expected of a worker who has had at least the minimal training (either in a formal school setting or on-the-job), but not long experience.

1.17 Equivalency (in “equivalent examinations”) means that there is specific *psychometric* evidence that various forms of an examination cover the same content and their respective passing scores represent the same degree of competence.

1.18 Examination Booklet means the paper version of the *food safety certification examination*.

1.1819 Examination forms means alternate sets of test *examination* questions (with at least 25% alternate questions) to assess the same *competencies*, conforming to the same *examination specifications*.

1.1920 Examination specifications means the description of the specific content areas of an examination, stipulating the number or proportion of items for each area of *competency* and the level of complexity of those items. The specifications are based on the *job analysis* and its verification.

1.20 21 Examination version means a test *an examination* in which the exact set of items in an *examination form* is presented in another order, language, manner or medium.

1.22 Exposure Plan means the policies and procedures in place to ensure that examination items are not exposed to examinees or other people that may result in an examination item being memorized and/or shared.-

1.2123 Food establishment

- a: A. Food establishment means an operation that stores, prepares, packages, serves, vends, or otherwise provides food for human consumption:
 - i: 1) such as a restaurant, satellite or catered feeding location, catering operation if the operation provides food directly to a consumer or to a conveyance used to transport people, market, vending location, conveyance used to transport people, institution, or food bank; and
 - ii: 2) that relinquishes possession of food to a consumer directly, or indirectly through a delivery service such as home delivery of grocery orders or restaurant takeout orders, or delivery service that is provided by common carriers.
- b: B. Food establishment includes including:
 - i: 1) an element of the operation such as a transportation vehicle or a central preparation facility that supplies a vending location or satellite feeding location unless the vending or feeding location is permitted by the *regulatory authority*; and
 - ii: 2) an operation that is conducted in a mobile, stationary, temporary or permanent facility or location; where consumption is on or off the premises; and regardless of whether there is a charge for the food.
- e: C. Food establishment does not include not including:

- ~~i.~~ 1) an establishment that offers only prepackaged foods that are not potentially hazardous;
- ~~ii.~~ 2) a produce stand that only offers whole, uncut fresh fruits and vegetables;
- ~~iii.~~ 3) a food processing plant;
- ~~iv.~~ 4) a kitchen in a private home if only food that is not potentially hazardous is prepared for sale or service at a function such as a religious or charitable organization's bake sale if allowed by law and if the consumer is informed by a clearly visible placard at sales or service locations that the food is prepared in a kitchen that is not subject to regulation and inspection by the *regulatory authority*;
- ~~v.~~ 5) an area where food that is prepared as specified in Subparagraph (c) (iv) of this definition is sold or offered for human consumption;
- ~~vi.~~ 6) a kitchen in a private home, such as a small family day-care provider; or a bed-and-breakfast operation that prepares and offers food to guests if the home is occupied, the number of available guest bedrooms does not exceed 6, breakfast is the only meal offered, the number of guests served does not exceed 18, and the consumer is informed by statements contained in published advertisements, mailed brochures, and placards posted at the registration areas that the food is prepared in a kitchen that is not regulated and inspected by the *regulatory authority*; or
- ~~vii.~~ 7) a private home that receives catered or home-delivered food.

1.2224 Food safety certification examination means an examination in food safety approved in accordance with the provisions of this program.

1.2325 Instructor means an individual who teaches a course that includes *competencies* in prevention of foodborne illness.

1.26 Item means an examination question.

1.2427 Item bank means all of the items that have been developed for the several forms of an examination. It includes all of the items available to create *examination forms*.

1.2528 Item sequence means the presentation order of ~~test~~ examination items in an examination.

1.2629 Job analysis means the description of functions or tasks required for an individual to perform to entry level standards in a specific job or occupation, including information about the attributes required for that performance. It defines the performance dimension of a job and includes knowledge, skills, and abilities necessary to carry out the tasks.

a. A **Tasks** are the individual functions, whether mental or physical, necessary to carry out an aspect of a specific job.

b. B. **Knowledge, skills, and abilities (KSAs)** include the information and other

attributes that the worker ~~must~~ shall possess in order to perform effectively and safely. They include information and understanding as well as learned behaviors and natural attributes.

1.2730Legal entity means an organization structured in a manner that allows it to function legally and be recognized as a responsible party within the legal system.

1.2831Legally defensible means the ability to withstand a legal challenge to the appropriateness of the examination for the purpose for which it is used. The challenge may be made by actual or potential examinees or on behalf of the public. ~~Candidates'~~ Examinees' challenges may pertain to perceived bias of the examination or inappropriately chosen content. Challenges on behalf of the public may claim that the examination does not provide adequate measures of a ~~candidate's~~ an examinee's knowledge, skills, and abilities required to protect the consumer from foodborne illness.

1.2932Overexposure means the relative frequency in which ~~a test~~ an examination item which is presented across all computerized tests has undermined the integrity of the ~~tests~~ examinations. Whether a test item is overexposed or not is based upon the type of ~~exam~~ examination test item (pictorial vs. written) and its frequency of use.

1.3033 Proctor means a person under the supervision of a *test administrator*, assisting by assuring that all aspects of an examination administration are being carried out with precision, with full attention to security and to the fair treatment of examinees. *Proctors* have the responsibility and ~~must~~ shall have the ability to observe examinee behaviors, accurately distribute and collect ~~test~~ examination materials, and assist the *test administrator* as assigned. They ~~must~~ shall have training or documented successful experience in monitoring procedures and ~~must~~ shall affirm in writing an agreement to maintain ~~test~~ examination security and to ~~assure~~ ensure that they have no conflict of interest. There must be at least one proctor for every 35 examinees. The proctor can also be a test administrator.

1.3134Psychometric means scientific measurement or quantification of human qualities, traits, or behaviors.

1.3235Psychometrician means a professional with specific education and training in development and analysis of ~~tests~~ examinations and other assessment techniques and in statistical methods. Qualifications may vary but usually include at least a bachelor's degree and a minimum of two formal courses in ~~test~~ examination development and a minimum of two in statistical methods.

1.3336Regulatory authority means a government agency that has been duly formed under the laws of that jurisdiction to administer and enforce the law.

1.3437Reliability means the degree of consistency with which a test an examination measures the attributes, characteristics or behaviors that it was designed to measure.

1.3538Retail food industry means those sectors of commerce that operate *food establishments*.

1.3639Test administrator means the individual at the test site who has the ultimate responsibility for conducting a *food safety certification examination*. ~~Test administrators must have training, documented successful experience, or a combination of experience and training in test administration and security procedures. They must provide written assurance of maintaining confidentiality of test contents and of adherence to standards and ethics of secure examination administration. Their responsibilities include but are not limited to:~~

- ~~a. verifying that the contents of the examination materials shipment matches the packing list;~~
- ~~b. assuring that the site conforms to requirements;~~
- ~~c. training and supervising *proctors*;~~
- ~~d. assuring accurate identification of examinees;~~
- ~~e. adherence to all procedures and instructions in the examination administration manual;~~
- ~~f. maintaining security of test materials;~~
- ~~g. assuring compliance with procedures for handling any breaches of security that may occur;~~
- ~~h. proper handling of completed examinations;~~
- ~~i. confidentiality of candidate scores; and~~
- ~~j. such unspecified duties as may be required for safe and secure administration of the examination.~~
- ~~k. of the examination.~~

The test administrator can also be a *proctor*.

1.3740Test encryption and decoding means the security aspects of a computer examination to prevent the test examination from being read by unauthorized persons if downloaded or otherwise accessed without authorization. Encryption refers to how a computer examination is coded. Decoding refers to how the computer examination is translated back from the code.

1.3841Trainer, in this instance, means a professional with appropriate expertise who conducts a course in food safety for applicants for *certification* as Food Protection Managers.

1.3942Validity means the extent to which a test an examination score or other type of assessment measures the attributes it was designed to measure. In this instance, does the test examination produce scores that can help determine if examinees are competent to protect the public from foodborne illness in a *food establishment*.

SECTION 2.0 – PURPOSE OF CERTIFICATION ORGANIZATIONS

2.0 Purpose of *Certification Organizations*

- 2.1 The *certification organization* shall have as a purpose the evaluation of those individuals who wish to secure or maintain Food Protection Manager *Certification* in accordance with the criteria and standards established through the CFP, and the issuance of *certificates* to individuals who meet the required level of *competency*.
- 2.2 A ~~*certifying*~~ *certification organization* responsible for attesting to the *competency* of Food Protection Managers has a responsibility to the individuals desiring *certification*, to the employers of those individuals, and to the public.
- 2.3 A *certification organization* for Food Protection Manager *Certification* Programs shall not be the *accrediting organization* nor may the *certification organization* have any conflict of interest with said *accrediting organization*.

SECTION 3.0 – STRUCTURE AND RESOURCES OF CERTIFICATION ORGANIZATIONS

3.0 Structure and Resources of *Certification Organizations*

- 3.1 Structure of *certification organizations*.** The *certification organization* shall be incorporated as a *legal entity* (applies to the parent organization if the *certification organization* is a subsidiary of another organization).
- 3.2** A *certification organization* shall conform to all CFP standards for *accreditation* and demonstrate that the relationship between the *certification organization* and any related association, organization or agency ensures the independence of the *certification* program and its related functions.
- 3.3** If a *certification organization* provides both education and *certification*, the *certification organization* shall administratively and financially separate any education and *certification* functions that are specific to Food Protection Manager *Certification* to ensure that the *certification* program is not compromised. This may be satisfied if the governing structure documents to the *accrediting organization* the distinct separation of the two functions, confirming that no undue influence is exercised over either the education or the *certification* process by virtue of the structure within the association, organization, agency or another entity.
- 3.4 Resources of *Certification Organizations*.** A *certification organization* shall conform to all CFP standards for *accreditation* and demonstrate
- a. A the availability of financial resources to effectively and thoroughly conduct regular and ongoing *certification* program activities.
 - b. B that staff possesses the knowledge and skills necessary to conduct the *certification* program or has available and makes use of non-staff consultants and professionals to sufficiently supplement staff knowledge and skills.

SECTION 4.0 – FOOD SAFETY CERTIFICATION EXAMINATION DEVELOPMENT

(Note; Subsection 4.17 has been modified, and Subsection 4.18 moved; the examination administration elements addressed by these subsections have been included in Section 5)

4.0 Food Safety Certification Examination Development

4.1 Food safety certification examinations administered by ~~accredited certifying programs~~ certification organizations shall comply fully with all criteria set by the CFP and ~~must~~ shall meet explicit and implicit standards to protect the public from foodborne illness. The accredited certification organization shall provide a food safety certification examination that:

- A. conforms to all CFP Standards for Accreditation of Food Protection Manager Certification Programs;
- B. has been developed from an item bank of at least 1000 questions; and
- C. on a quarterly basis is provided in at least two new examination forms in the English language.

4.2 Each certification organization ~~must~~ shall provide evidence that it meets the following professional requirements:

- a: A. ability to conduct or otherwise use a *legally defensible* and psychometrically valid *job analysis*;
- b: B. demonstrated experience in the development of psychometrically valid *competency examinations*;
- e: C. demonstrated capability to develop and implement thorough procedures for security of the *item bank*, printed, taped or computerized examinations, ~~exam~~ examination answer sheets, and ~~candidate~~ examinee scores;
- d: D. data handling capabilities commensurate with the requirements for effective processing, reporting, and archiving of ~~candidate~~ examinee *food safety certification examination* scores; and
- e: E. demonstrated evidence of an understanding of and willingness to abide by the principles of fairness and due process.

4.3 The certification organization ~~must~~ shall provide complete information about the *food safety certification examination*, including that related to procedures and personnel involved in all aspects of the examination development and analysis. The information required for *accreditation* will include but is not necessarily limited to:

- a: A. complete description of the scope and usage of the examination;
- b: B. *job analysis* task list, with knowledge, skills, and abilities (KSAs);
- e: C. *examination specifications*;
- d: D. the number of unduplicated items in the *item bank*;
- e: E. statistical performance of each item in the bank;
- f: F. number of *examination forms* and evidence of their *equivalence* to each other;
- g: G. description of method used to set passing score;

- h. H. copies of all logs, diaries, and personnel lists and descriptions kept as required in the development process;
 - i. I. summary statistics (~~Section 4.16 Periodic Review~~) for each *examination form*; and
 - j. J. names, credentials, and *demographic* information for all persons involved in the *job analysis*, item writing and review, and setting the passing score.
- 4.4 *Job Analysis.*** The content *validity* of a *food safety certification examination* shall be based on a psychometrically valid *job analysis* developed by *psychometricians* and a demographically and technically representative group of individuals with significant experience in food safety. The representative group ~~must~~ shall include but not necessarily be limited to persons with experience in the various commercial aspects of the *retail food industry*, persons with local, state or national regulatory experience in retail food safety, and persons with knowledge of the microbiology and epidemiology of foodborne illness, and ~~must~~ shall be sufficiently diverse as to avoid cultural bias and ensure fairness in content according to all federal requirements.
- 4.5** The *job analysis* ~~must~~ shall provide a complete description of the knowledge, skills, and abilities (KSAs) required to function competently in the occupation of *Certified Food Protection Manager*, with emphasis on those tasks most directly related to the *Certified Food Protection Manager's* role in the prevention of foodborne illness.
- 4.6** Detailed *food safety certification examination* specifications ~~must~~ shall be derived from a valid study of the *job analysis* tasks and their accompanying knowledge, skills, and abilities (KSAs) and ~~must~~ shall be appropriate to all aspects of the *retail food industry*. The *job analysis* ~~must~~ shall include consideration of scientific data concerning factors contributing to foodborne illness and its epidemiology. The *examination specifications*, consisting of percentage weights or number of items devoted to each content area, ~~must~~ shall be available to ~~candidates~~ examinees and to the public.
- 4.7** The *certification organization* or its contracted ~~test~~ examination provider ~~must~~ shall maintain a log and diary of the procedures and a list of the qualifications, identities, and *demographic data* of the persons who participated in development of the *job analysis* and of the *food safety certification examination specifications*. Those materials ~~must~~ shall be provided to the *accrediting organization* on demand.
- 4.8** ~~Certifying~~ The certification organizations ~~are~~ is required to systematically evaluate practices in the *retail food industry* to ~~assure~~ ensure that the *job analysis* on which an examination is based remains appropriate for the development of *food safety certification examinations* on which the universal credential is awarded. The maximum length of use for any *job analysis* is five years from the date of validation.
- 4.9 *Psychometric Standards.*** *Food safety certification examination* development, including setting the passing score, shall be based on the most recent edition of

Standards for Educational and Psychological Testing, developed jointly by the American Psychological Association, American Educational Research Association and National Council for Measurement in Education, and on all appropriate federal requirements (for example, Americans with Disabilities Act). *Food safety certification examinations* ~~must~~ shall be revised as needed to be in compliance with changes in the *Standards for Educational and Psychological Testing* or in any of the federal requirements.

- 4.10 The *food safety certification examination* development procedures shall ensure that the *competencies* assessed in the *accredited certification program* are those required for *competent entry level performance* in the role of *Certified Food Protection Manager*, as defined by law and industry standards, and that they focus on factors related to the prevention of foodborne illness in the *retail food industry*.
- 4.11 The *food safety certification examination* ~~must~~ shall be based on psychometrically valid procedures to ~~assure~~ ensure the relative equivalence of scores from various *examination forms*. The ~~certifying~~ *certification organization* ~~must~~ shall provide evidence of such equivalence as public information.
- 4.12 When the *food safety certification examination* is administered in a medium other than the common pencil-and-paper format, evidence ~~must~~ shall be provided to ~~assure~~ ensure that all *competencies* are assessed in a reliable manner and that the *validity* of the examination is preserved. Evidence of comparability with other *examination forms* ~~must~~ shall be provided.
- 4.13 When any form and/or *item bank* of the *food safety certification examination* is translated into a language other than that in which it is originally developed and validated, the developer of the examination ~~must~~ shall provide evidence of content *equivalency* of the translated version with the original *examination form* and/or *item bank*. The developer ~~must~~ shall provide a detailed description of the translation method(s), including the rationale for selecting the translation method(s), and ~~must~~ shall demonstrate congruence of items and instructions with those of the *examination form* and/or *item bank* that was translated. To avoid potential problems in translation of terms specific or idiomatic to the *retail food industry*, translation should be accomplished with the consultation of food safety personnel competent in the languages of both the original and the translated version of the *food safety certification examination*.
- 4.14 *Food safety certification examination* developers ~~must~~ shall maintain a log and diary of the procedures and a list of the qualifications, identities, and *demographic data* of the persons who participated in item development, examination development, translations, setting the passing score, and the statistical analyses of the ~~test~~ examination items and of the full examination. Those materials ~~must~~ shall be provided to the *accrediting organization* on demand.

All examinations ~~must~~ shall be delivered and administered in a format that ensures the security of the examination (i.e. in a secured environment with a test administrator/proctor.) Un-proctored examinations are not acceptable regardless of the mode of administration.

4.15 Examination Development Security. The ~~certifying~~ certification organization will demonstrate that procedures are developed and implemented to ~~assure~~ ensure that individual items, *item banks*, *food safety certification examinations* presented in all media (printed, taped and computerized), test answer sheets and ~~candidate-examinee~~ examinee scores are and remain secure. Demonstration shall include an overall examination security plan that covers each step in the examination development, culminating in the production of the examination and administration process ~~beginning with examination and item development and including, but not limited to, transportation, administration, personnel, physical security, and disposition of secure materials.~~

4.16 Periodic Review. At least semiannually each ~~certifying~~ certification organization ~~must~~ shall report to the *accrediting organization*, providing a review of its *food safety certification examination(s)*. The report will include the following summary statistics for all examinations (for each ~~exam~~ examination used) administered during the preceding six months, as well as other information that may be reasonably requested by the *accrediting organization*:

- a. A. number of *food safety certification examinations* administered;
- b. B. mean;
- c. C. mode;
- d. D. standard deviation;
- e. E. range;
- f. F. *reliability* coefficient;
- g. G. number and percentage of ~~candidates~~ examinees passing the examination; and
- h. H. the statistics describing the performance of each item used on *food safety certification examinations* administered during the six-month period.

4.17 Specific Procedures Requirements for Examination Standardization.

Administration. *Certification organizations* ~~must~~ shall specify conditions and procedures for administering all *food safety certification examinations* in a standard manner ~~in order to assure~~ ensure that all ~~candidates~~ examinees are provided with the opportunity to perform according to their level of ~~competency~~ ability and to ~~assure~~ ensure comparability of scores. Examination Booklets shall be of high quality printing to ensure ease of reading. ~~Procedures must include, but not be limited to:~~

- a. ~~requirements for qualifications of test administrators and proctors and a suitable training program for each;~~
- b. ~~a complete administration manual describing each step of the test administration process and the rationale for each;~~
- c. ~~clear instructions for candidates both printed for distribution to candidates and read by the test administrator;~~

- d. — high quality printing of examination booklets to assure ease of reading;
- e. — specification of security procedures to assure lack of exposure of test items to unauthorized persons during testing and to prevent theft of examination items or booklets;
- f. — clear criteria (with rationale) for physical facilities for examination administration;
- g. — clear criteria (with rationale) and procedures for adaptations necessary to accommodate qualified candidates with disabilities; and
- h. — clear criteria (with rationale) and procedures for adaptations necessary to accommodate qualified candidates with literacy limitations that may require a reader.

- 4.18** — A *certification organization* must have a published, written policy regarding test-site interpretation of *food safety certification exams*. If a *certification organization* chooses to allow test-site interpretation of food safety exams when an exam is not available in the candidates' native language, the *certification organization* must have a published, formal application process available to all candidates. Procedures must include but not be limited to:
- a. — an application process for candidates that includes an evaluation and documentation component to determine the eligibility of the candidate for test-site interpretation;
 - a. — an application process for interpreters that includes clear and precise qualifications that must include but not be limited to the following:
 - i. — fluent in both languages;
 - ii. — have a recognized skill in interpretation;
 - iii. — trained in the principles of objective test administration;
 - iv. — have no personal relationship with the candidate (may not be another candidate, may not be a relative or friend of the candidate and may not be a co-worker, employer, or an employee of the candidate);
 - v. — may not be a *Certified Food Protection Manager* nor have any vested interest in Food Protection Manager certification or conflict of interest;
 - vi. — provide references or other proof attesting to the interpreter's competencies and professional acumen; and
 - vii. — agree in writing to maintain the security of the examination.
 - b. — must be in a proctored environment where the interpreter and candidate are not a distraction to other candidates; and
 - c. — must be in a proctored environment where the interpreter is not active as the *test administrator* or *proctor*.

SECTION 5 – FOOD SAFETY CERTIFICATION EXAMINATION ADMINISTRATION

(Note: Sections in Standard 5 have been revised and reorganized. They are in the proposed order with the original section number struck out.)

5.0 Food Safety Certification Examination Administration. All sections of these Standards apply to Computer Based Testing (CBT) Administration except Section 5.1.

5.12 5.1 Security for Examination Booklets, Packing, Shipping, and Storage of Examination Materials.

~~Security of the food safety certification examination materials must be maintained in shipments to and from the examination administration site, and must include but not necessarily be limited, and are subject to the following requirements:-~~

- ~~a. secure, tamper resistant packing is required for all materials in all phases of shipment; packing system must be designed to reveal any tampering or violation of the package's security;-~~

A. Securing examination booklets

1) Each individual examination booklet shall be secured in by using one of the following methods both prior to and after administration:

- a. enclosing in a sealed tamper-resistant package;
- b. shrink-wrapping;
- c. sealing on all three open sides with each seal of sufficient size to cover at least one square inch of the front side and to overlap and cover the same amount of space on the back side of the examination booklet; or
- d. using any other technology that ensures that only the examinee can view the contents of the examination booklet.

2) Only the examinee is allowed to break open the examination booklet the packaging or seals.

B. Packaging by certification organization

- 1) Each individual examination booklet shall be securely sealed before packing.
- 2) Secure tamper-resistant shipping material, such as Tyvek envelopes or similar materials that are designed to reveal any tampering or violation of the package's security, is required for all shipment of materials in all phases.
- 3) Packaging must include a packing list that contains:
 - a. examination form language(s) or version(s) enclosed; and
 - b. quantity of examinations enclosed.

~~b. shipping must be done by certifiable, traceable means so that its location can be determined at any given time; and~~

C. Shipping to the test administrator/proctor from the certification organization

- 1) Shipping shall be done by certifiable, traceable means, with tracking numbers so that the location can be determined at any given time.
- 2) A signature is required upon delivery.

- 3) Only an individual authorized by the *test administrator/proctor* may sign for the package.
- e. ~~the packing list must show the number of packages in the shipment and the exact contents of each.~~
- D. Storage by *test administrator/proctor*
 The package(s) of *examination booklets* ~~must shall~~ be placed in secure storage secured at all times immediately upon delivery. ~~They must be kept in secure storage both before and after they are used.~~ Under no circumstances may *examination booklets*, examinee used answer sheets, or other examination materials be kept where other employees or the public has access.
- E. Shipping to the *certification organization* from the *test administrator/proctor*
- 1) After examination administration, *examination booklets* and answer sheets shall remain in secure storage until returned to *certification organization*.
 - 2) The following shall be in tamper-resistant shipping material:
 - a. all used and unused *examination booklets* for each examination administration;
 - b. examinees' used answer sheets; and
 - c. all required *certification organization* forms.
 - 3) Shipping shall be done within two business days following the examination date by certifiable, traceable means, with tracking numbers so that the location can be determined at any given time.
- F. Handling unused *examination booklets* that have been held for up to ninety days. The *test administrator/proctor* will:
- 1) assure ensure that all *examination booklets* are accounted for;
 - 2) package *examination booklets* securely as described above; and
 - 3) ship to the *certification organization* securely packaged and according to these *Standards* and the *Certification Organization's* instructions.

5.16 5.2 Test Site Requirements.

Sites chosen for administering *food safety certification examinations* ~~must shall~~ conform to all legal requirements for safety, health, and accessibility for all qualified ~~candidates~~ examinees.

A. Additionally, the accommodations, lighting, space, comfort, and work space for taking the examination ~~must shall~~ reasonably allow all candidates-examinees to perform at their highest level of ~~competency~~ of ability.

5.17—B. Requirements at each *test* site include, but are not limited to:

- 1) a. accessibility in accordance with the requirements of the Americans with Disabilities Act, ~~must shall~~ be reasonably available for all qualified examinees, whether it be the main site for an administration or in an alternative site meeting all other requirements of the main site the examination administration occurs at the main examination location site, or at an alternative examination location site that meets the same location requirements as the main examination location site;
- 2) b. all sites ~~must conform~~ conformity to all fire safety and occupancy codes-requirements of the jurisdiction in which they are located;

- 3) ~~e. there must be~~ sufficient spacing between each examinee in the area in which the actual ~~testing~~ examination is conducted, or other appropriate and effective methods, to preclude any examinee from viewing another examinee's ~~test~~ examination;
- 4) ~~d.~~ acoustics ~~must allow~~ allowing each examinee to hear instructions clearly, using an electronic audio system if necessary;
- 5) ~~e.~~ lighting at each examinee's work space ~~must be~~ adequate for reading ~~fine print~~; and
- 6) ~~f.~~ ventilation and temperature ~~must be~~ appropriate for generally recognized health and comfort of examinees;
- 7) use of private room(s) where only examination personnel and examinees are allowed access during the examination administration; and
- 8) no further admittance into the test site once examination administration has begun.

4.18 5.3A ~~certification organization must shall~~ have a published, written policy regarding test-site ~~interpretation language translation of food safety certification exams-examinations~~. If a ~~certification organization chooses to allow~~ allows test-site ~~interpretation language translation of a food safety certification exams-examination~~ when an ~~exam examination version~~ is not available in the ~~candidates' native~~ examinees' requested language, the ~~certification organization must shall~~ have a published, formal application process available to all ~~candidates potential examinees~~. Procedures ~~must shall~~ include but not be limited to:

- a. A. An application process for ~~candidates potential examinees~~ that includes an evaluation and documentation component to determine the eligibility of the ~~candidate potential examinee~~ for test-site interpretation language translation,
- b. B. An application process for ~~interpreters translators~~ that includes clear and precise qualifications that ~~must shall~~ include but not be limited to the following:
 - i. 1) being fluent in both languages;
 - ii. 2) have a recognized skill in interpretation language translation;
 - iii. 3) trained in the principles of objective test examination administration;
 - iv. 4) have no personal relationship with the ~~candidate examinee~~ (may not be another ~~candidate examinee~~, may not be a relative or friend of the ~~candidate examinee~~ and may not be a co-worker, employer, or an employee of the ~~candidate examinee~~);
 - v. 5) ~~may not be being~~ a *Certified Food Protection Manager* nor ~~have~~ having any vested interest in Food Protection Manager certification or conflict of interest;
 - vi. 6) provide references or other proof attesting to the ~~interpreter's~~ translator's competencies and professional acumen; and
 - vii. 7) agree in writing to maintain the security of the examination.

- e. C. ~~must be in a~~ A proctored environment where the interpreter translator and candidate examinee are not a distraction to other candidates examinees, and
- d. D. ~~must be in a~~ A proctored environment where the interpreter translator is not active as the test administrator ~~or~~ proctor.

~~5.19~~ **5.4 Scoring and Reporting Requirements.** ~~Completed answer sheets and test booklets (used and unused) must be shipped by the *test administrator* according to the *certification organization's* written security procedures.~~

~~5.20~~ Scoring will be done only by means authorized by the certification organization and approved by the accrediting organization.

A. Only the certification organization may score the examination by methods approved by the accrediting organization. No official scoring is to be done at the test site.

~~5.21~~ B. Food safety certification examination scores will not be released as being official until verified and approved by the certification organization.

~~5.22~~ C. Examinee scores will be confidential, available only to the examinee and to persons or organizations approved in writing by the examinee.

~~5.23~~ D. Score reports will be available to examinees in a time frame specified in the application, which will not ~~be later than~~ exceed fifteen business days following the administration of the food safety certification examination. If there is a delay due to problems in verification or authentication of scores, examinees will be so informed and an approximate date for release of the scores will be announced. The certification organization will have ongoing communication with examinees and with the test administrator/proctor until the scores are verified and released.

~~5.5~~ **Test Administrator/Proctor(s) Role.** Test administrators/proctors shall have successfully completed the *certification organization's* specific training in examination administration and security procedures. They shall provide written assurance of maintaining confidentiality of examination contents, of adhering to the *certification organization's* standards and ethics of secure examination administration, and of agreeing to abide by the *certification organization's* policies, procedures, and rules.

~~5.6~~ The certification organization shall ensure that all test administrators and proctors meet the competency requirements established by the certification organization, and comply with all requirements of the certification organization.

~~5.6~~ **Test Administrator/Proctor Requirements.** To serve as a test administrator/proctor for an accredited certification organization the qualified individual shall complete the certification organization's:

A. signed Application;

B. non-Disclosure Agreement (NDA);

C. training program for test administrators/proctors; and

D. conflict of Interest Disclosure Agreement (can be a part of the NDA).

5.7 Test Administrator/Proctor Renewal. Test administrators/proctors shall renew the training program for test administrators/proctors and Non-Disclosure Agreement with the certification organization every three (3) years.

5.3 5.8 Instructor/Educator/Trainer as Test Administrator/Proctor. ~~When an instructor/educator/trainer of food safety training administers, proctors or monitors a food safety certification examination from an accredited certification program, the accredited certification organization shall provide a food safety certification examination that:~~

- ~~_____ a. _____ conforms to all CFP standards;~~
- ~~_____ b. _____ has been developed from an item bank of at least 600 questions, and~~
- ~~_____ c. _____ minimally on a quarterly basis, is based on a new examination form.~~

~~The certifying organization must have a plan that demonstrates it has controlled for item and examination exposure. The exposure plan must take into account the number of times a test item and form/version is administered.~~

When a person acts as an instructor/educator/trainer and a test administrator/proctor, that person relinquishes the role of instructor/educator/trainer when acting in the role of test administrator/proctor and acts solely as a representative agent of the certification organization.

5.9 Test Administrator/Proctor Responsibilities.

A. 5.18 Examination Scheduling. Schedule examinations. Food safety certification examinations must shall be scheduled far enough in advance to allow for timely shipment of supplies or pre-registration for computer-based examinations.

B. Ensure no destruction of examination booklet materials or computer equipment; _____

C. At all times:

- 1) handle examination materials securely;
- 2) ensure test site conformity;
- 3) space examinees per protocol;
- 4) ensure examinees' rights;
- 5) ensure confidentiality of examinees' personal information;
- 6) ensure standardized procedures are followed;

D. Before the examination:

- 1) check examinees' identification;
- 2) check for and exclude unauthorized objects;
- 3) distribute examination materials;
- 4) read instructions to examinees verbatim;
- 5) ensure examinees complete information section of answer sheet or online registration form.

E. During the examination:

- 1) supervise proctors;
- 2) monitor examinees during examination;
- 3) identify and document cheating incidents;
- 4) check for and exclude unauthorized objects;
- 6) identify and document environmental distractions.

F. After the examination

- 1) collect and return *examination booklets* and answer sheets to *certification organization* or close computer based testing session;
- 2) report possible security breaches and examination administration irregularities in compliance with the *certification organization's* policies.

~~5.13~~ ~~Test administrators are responsible for the organization and administration of all examination site activities and procedures, and for the accurate identification of each examinee. They are also responsible for supervision of the activities of proctors. When the instructor/educator/trainer also serves in the role of test administrator, it is important that the individual clearly recognizes the difference in those two roles.~~

~~5.14 Proctors shall work under the direction of the test administrator. They have the responsibility and must have the ability to observe examinee behaviors, accurately distribute and collect test materials, and assist the test administrator as assigned.~~

~~5.15~~ 5.10 The number of approved *proctors* assigned to a *test administrator* ~~must~~ shall be sufficient to allow each examinee to be observed and supervised to ~~assure~~ ensure conformance to security requirements. There shall be no less than one *test administrator/proctor* for the first thirty-five examinees, plus one additional *test administrator* or *proctor* for each additional 35 examinees or fraction thereof.

5.11 Examination Security

~~5.1~~ A. All aspects of *food safety certification examination* administration are to be conducted in a manner that maximizes the security of the examinations, in keeping with the public protection mandate of the CFP. This ~~must~~ shall be accomplished in a manner that ensures fairness to all ~~candidates~~ examinees.

B. All examinees shall begin taking the examination at the same time. No examinee shall be admitted into the test site once examination administration has begun.

~~5.2 Security of Food Safety Certification Examination Contents. Food safety certification examinations must be presented in a manner that allows absolutely no one other than the examinees to see the contents of the booklet or alternative medium, both before, and after the examination is administered.~~

~~5.9~~ C. Where ~~special~~ reasonable accommodations ~~must~~ shall be made for otherwise qualified ~~candidates~~ examinees under provisions of the Americans with Disabilities Act, ~~arrangements must~~ care shall be taken to ensure that security of the examination is maintained. Arrangements shall be such that the *food safety certification examination* contents are not revealed to any test administration

personnel with any conflict of interest. A written affirmation to that effect and a written nondisclosure statement from the individual who was chosen to assist the otherwise qualified ~~candidate~~ examinee shall be provided to the *certification organization*.

5.10 5.12 The *certification organization* ~~must~~ shall provide procedures to be followed in any instance where the security of a *food safety certification examination* is, or is suspected to be, breached.

A. Included ~~must~~ shall be specific procedures for handling and for reporting to the ~~accrediting~~ *certification organization*, any suspected or alleged:

- 1) cheating incidents;
- 2) lost or stolen ~~booklets~~ examination materials;
- 3) intentional or unintentional divulging of ~~test~~ examination items by examinees or ~~test~~ examination administration personnel; or
- 4) any other incidents perceived to have damaged the security of the examination or any of its individual items.

B. Corrective actions to guard against future security breaches ~~must~~ shall be established and implemented.

C. Documentation of corrective actions and their effectiveness ~~must~~ shall be made available to the ~~accreditation body~~ *accrediting organization*.

5.8 5.13 Item & Examination Exposure. ~~The *certification organization* must demonstrate it has controlled for item and examination exposure. An exposure plan must take into account the number of times a test item and examination form/version is administered, that no examination form is retained for any test administration or by any test administrator/proctor for more than 90 days; and that at all times it can account for all copies of all used and unused examination forms before being returned to the certification organization.~~

The certification organization shall have an exposure plan that:

- A. controls for item and examination exposure;
- B. accounts for the number of times an examination item, examination form, and examination version is administered;
- C. ensures that no examination form is retained by any examination administration personnel for more than 90 days;
- D. at all times accounts for all copies of all used and unused examination booklets; and
- E. systematically and actively demonstrates that every used answer sheet, examination booklet, and any other examination materials and answer keys are accounted for to prevent, reduce, or eliminate examination exposure.

5.4 ~~Test Administrator/Proctor Qualifications, Training and Duties.~~

5.14 ~~Certification Organization's Responsibility to Test Administrators/Proctors.~~

A. The certification organizations must shall specify the responsibilities of test administrators and of proctors ~~test administrator/proctor~~, set minimum criteria for approval of test administrators and for ~~proctors~~, and provide suitable programs of a training program to enable persons applicants to meet those the approval

criteria. Responsibilities, duties, qualifications and training of *test administrators* and */proctors* ~~must shall~~ be directed toward assuring standardized, secure examination administration and fair and equitable treatment of examinees. Policies and procedures for taking corrective action(s) when any *test administrator* or *proctor* fails to meet job responsibilities ~~must be implemented and documented.~~

- 5.5** B. The *certification organization* shall define and provide descriptions for the roles of *test administrators*; */proctors*, and *certification organization* personnel that will clearly delineate clearly indicating the responsibilities of each for these roles. The *certification organization* shall demonstrate how it ensures that all certification personnel, including as well as test administrators and /proctors, understand and practice the procedures identified for their roles.
- C. *Test administrator/proctor* training programs shall include:
- 1) specific learning objectives for all of the activities of test administrator/proctor; and
 - 2) an assessment component that shall be passed before an examinee for test administrator/proctor will be approved.

- 5.7 5.15 Test Administrator/Proctor Agreements.** The *certification organization* shall enter into a formal agreement with the *test administrator/proctor* ~~and shall assess and monitor the performance of test administrators and proctors in accordance with all documented procedures and agreements.~~ The formal agreement shall at a minimum ~~include~~, address:
- A. provisions that relate to code of conduct;
 - B. conflicts of interest; and
 - C. a statement of consequences for breach of the agreement.

- 5.16** The *certification organization* shall assess and monitor the performance of test administrators/proctors in accordance with all documented procedures and agreements.

- 5.17** The *certification organizations* is not permitted to hire, contract with, or use the services of any person or organization that claims directly or indirectly to guarantee passing any certification examination. Instructors/educators/trainers making such a claim, whether as an independent or as an employee of another organization making the claim, are not eligible to serve as test administrators/proctors for any certification organization.

- 5.18** Policies and procedures for taking corrective action(s) when any test administrator or proctor fails to meet job responsibilities shall be implemented and documented. Test administrators/proctors that have been dismissed by the certification organization for infraction of policies or rules, incompetence, ethical breaches, or compromise of examination security will be reported to the accrediting organization.

5.19 The *certification organization* shall provide documentation that verifies compliance with the 1:35 ratio (*test administrator/proctor: examinees*).

~~5.14~~ **5.20 Examination Administration Manual.**

The *certification organization* ~~must~~ shall provide each *test administrator/proctor* with a manual detailing the requirements for all aspects of the *food safety certification examination* administration process. The Examination Administration Manual shall include a standardized script for the paper examination *test administrator/proctor* to read to examinees before the examination commences. For computer based tests (CBT), standardized instructions shall be available for examinees to read.

5.21 **Examination Scripts.** Separate scripts/instructions may be created for different delivery channels or *certification organizations*. *Certification organizations* may customize elements of the scripts to fit their particular processes, but each script shall contain the following:

A. Introduction to the Examination Process

- 1) composition of the examination (number of questions, multiple choice, etc.);
- 2) time available to complete the examination;
- 3) role of the *test administrator/proctor*;
- 4) process for restroom breaks; and
- 5) process for responding to examinee comments and questions.

B. Copyright and Legal Responsibilities

- 1) description of what constitutes cheating on the examination;
- 2) penalties for cheating; and
- 3) penalties for copyright violations.

C. Examination Process

- 1) maintaining test site security;
- 2) description of examination components unique to the *certification organization* (*examination booklet, answer sheet completion, computer process in testing centers, etc.*);
- 3) instructions for proper completion of personal information on answer sheets/online registration and *examination booklets*;
- 4) instructions on properly recording answers on answer sheets or online; and
- 5) instructions on post-examination administration process.

SECTION 6.0 – COMPUTER-BASED TESTING (CBT)

6.0 Computer-Based Test Development and Administration All sections of these Standards apply to Computer Based Testing (CBT) Administration except Section 5.1.

6.1 Computer-Based Test Development. *Examination specifications for computer-based testing must shall* describe the method for development, including the *algorithms* used for test item selection, the item response theory model employed (if any), and examination *equivalency* issues.

6.2 Items ~~must~~ shall be evaluated for suitability for computer delivery, be reviewed in the delivery medium, and be reviewed in the presentation delivery medium. Assumptions ~~must~~ shall not be made that items written for delivery via a paper/pencil medium are suitable for computer delivery nor should it be assumed that computer test items are suitable for paper/pencil delivery.

6.3 When *examination forms* are computer-generated, whether in *Computer-Adaptive Testing (CAT)* or in a simple linear *algorithm*, the *algorithm* for item selection and the number of items in the *item bank* from which the examination is generated shall ~~assure-~~ensure that the items are protected from *overexposure*. Item usage statistics ~~must~~ shall be provided for all available items in the pool.

6.4 Computer-Based Testing Administration. Where examination environments differ (for example, touch screen versus mouse) evidence ~~must~~ shall be provided to demonstrate equivalence of the examinees' scores.

6.5 Tutorials and/or practice tests ~~must~~ shall be created to provide the examinees adequate opportunity to demonstrate familiarity and comfort with the computer test environment.

6.6 If the time available for computer delivery of an examination is limited, comparability of scoring outcomes with non-timed delivery of the exam ~~must~~ shall be demonstrated. Data ~~must~~ shall be gathered and continually analyzed to determine if scoring methods are comparable.

6.7 Evidence of security in the *computer-based testing* environment ~~must~~ shall be provided. Factors affecting test security include, but are not limited to, examinee workspace, access to personal materials, level of examinee monitoring, and *test encryption and decoding*.

6.8 Documentation of precautions to protect *examination forms* and the *item bank* from unauthorized access ~~must~~ shall be provided.

6.9 Policies and procedures regarding the recording and retention of the *item sequence* and item responses for each examinee ~~must~~ shall be developed and followed. Computer examinations using a unique sequence of items for each examinee ~~must~~ shall

record the information necessary to recreate the sequence of items and examinee responses on the computer examination.

6.10 Systems and procedures ~~must~~ shall be in place to address technical or operational problems in examination administration. For example, the examination delivery system ~~must~~ shall have the capability to recover examinee data at the appropriate point in the testing session prior to test disruption. Policies regarding recovery for emergency situations (such as retesting) ~~must~~ shall be developed.

6.11 Due Process. ~~Candidates must~~ Examinees shall be provided with any information relevant to *computer-based testing* that may affect their performance or score. Examples of such information might include but not be limited to: time available to respond to items; ability to change responses; and instructions relating to specific types of items.

SECTION 7.0 – CERTIFICATION ORGANIZATION RESPONSIBILITIES TO ~~CANDIDATES~~ EXAMINEES AND THE PUBLIC

7.0 ~~A~~ *Certification Organization's Responsibilities to Candidates* Examinees and the Public.

7.1 **Responsibilities to Applicants for Certification.** A ~~certifying~~ certification organization shall:

- ~~a.~~A. not discriminate among applicants as to age, sex, race, religion, ethnic origin, disabilities or marital status and shall include a statement of non-discrimination in announcement of the *certification* program;
- ~~b.~~B. make available to all applicants information regarding formalized procedures for attainment of *certification* and provide evidence to the *accrediting organization* of the implementation of the policy;
- ~~c.~~C. have a formal policy for the periodic review of application and examination procedures to ensure that they are fair and equitable and shall give evidence to the accreditation organization of the implementation of the policy (~~Section 4.17~~);
- ~~d.~~D. provide evidence that competently proctored testing sites are readily accessible (~~Section 5.4~~);
- ~~e.~~E. provide evidence of uniformly prompt reporting of *food safety certification examination* results to applicants (~~Section 5.19, 5.9, 5.11 and 5.12~~);
- ~~f.~~F. provide evidence that applicants failing the *food safety certification examination* are given information on general areas of deficiency;
- ~~g.~~G. provide evidence that each applicant's *food safety certification examination* results are held confidential (~~Sections 4.0 5.17 and 5.18~~); and
- ~~h.~~H. have a formal policy on appeals procedures for applicants questioning eligibility or any part of the *accredited certification program*.

7.2 **Qualifications for Initial Certification.** To become a *Certified Food Protection Manager* an individual ~~must~~ shall pass a *food safety certification examination* from an *accredited certification program* recognized by the CFP. The *certificate* shall be valid for no more than 5 years.

~~7.3~~ ~~**Effective Date of Certificate**~~ ~~Certificates~~ issued and electronic listing of ~~certificate~~ holders maintained by *accredited certification programs* shall identify the *food safety certification examination* form recognized by the ~~accrediting-organization~~ and specify the date the examination was taken.

7.3 **Individual Certification Certificates:**

- A. Each certification organization will maintain a secure system with appropriate backup or redundancy to provide verification of current validity of individual certification certificates.

B. Certificates shall include, at a minimum:

- 1) issue date/date examination was taken;
- 2) length of time of certification validity;
- 3) name and certification mark of certification organization;
- 4) ANSI accreditation mark;
- 5) name of certified individual;
- 6) unique certificate number;
- 7) name of certification;
- 8) contact information for the certification organization; and
- 9) examination form identifier

C. Replacement or duplicate certificates issued through an accredited certification organization shall carry the same issue date, or date of examination, as the original certificate, and will be documented by the certification organization.

~~7.4 **Replacement or Duplicate Certificate.** Replacement or duplicate certificates issued through an accredited certification program shall carry the same effective date as the original, with an expiration worded in such a manner that indicates the certification will be valid for no more than five years.~~

7.5 Discipline of Certificate Holders and Applicants. A certification organization shall have formal certification policies and operating procedures including the sanction or revocation of the certificate. These procedures shall incorporate due process.

7.6 Continued Proficiency. An accredited certification program shall include a process or program for assessing continued competence that includes an examination component at an interval of no more than five years. The outcome of the process or program ~~must~~ shall demonstrate that the person has maintained the minimum competencies as determined by the current Job Task Analysis.

7.7 Responsibilities to the Public and to Employers of Certified Personnel. A certification organization shall maintain a registry of individuals certified. Any title or credential awarded by the certification organization shall appropriately reflect the Food Protection Manager's daily food safety responsibilities and shall not be confusing to employers, consumers, related professions, and/or other interested parties.

7.8 Each accredited certification program ~~must~~ shall have a published protocol for systematically investigating problems presented by users of the Program, including specific concerns about examination items, administration procedures, treatment of ~~candidates~~ examinees, or other matters involving potential legal defensibility of the examination or program. The protocol will include a published time frame for reporting findings to the User.

7.9 Misrepresentation. Only Food Protection Manager *Certification* Programs that conform to all requirements of *Standards for Accreditation of Food Protection Manager Certification Programs* and are accredited by the agent selected by the CFP as the *accrediting organization* for such programs are allowed to refer to themselves as being accredited. Those programs may not make any other reference to the CFP in their publications or promotional materials in any medium.

SECTION 8.0 – CERTIFICATION ORGANIZATION RESPONSIBILITIES TO THE ACCREDITING ORGANIZATION

- 8.0** *Certification Organization Responsibilities to the Accrediting Organization.*
- 8.1** *Certifying A certification organizations seeking accreditation for development and/or administration of a certification program shall provide at least the following information, as well as other information that might be requested by the accrediting organization:*
- ~~a.A.~~ The the name and complete ownership of the *legal entity*.
 - ~~b.B.~~ The the address, telephone/fax number(s) and other contact information of the *certification organization's* headquarters.
 - ~~e.C.~~ The the name, position, address and telephone/fax/e-mail information of the contact person for projects related to the CFP Standards for *Accreditation of Food Protection Manager Certification Programs*.
 - ~~d.D.~~ ~~Sueh~~ such fiscal information as may be needed to establish evidence of ability to carry out obligations under these standards.
- 8.2** **Summary Information.** *A certifying certification organization shall:*
- ~~a.A.~~ provide evidence that the mechanism used to evaluate individual competence is objective, fair, and based on the knowledge and skills needed to function as a *Certified Food Protection Manager* (~~Sections 4.3 and 4.4~~);
 - ~~b.B.~~ provide evidence that the evaluation mechanism is based on standards which establish *reliability* and *validity* for each form of the *food safety certification examination* (~~Sections 4.3, 4.4 and 4.6~~);
 - ~~e.C.~~ provide evidence that the pass/fail levels are established in a manner that is generally accepted in the *psychometric* community as being fair and reasonable (~~Section 4.9~~);
 - ~~d.D.~~ have a formal policy of periodic review of evaluation mechanisms and shall provide evidence that the policy is implemented to ensure relevance of the mechanism to knowledge and skills needed by a *Certified Food Protection Manager* (~~Sections 4.8 and 4.16~~);
 - ~~e.E.~~ provide evidence that appropriate measures are taken to protect the security of all *food safety certification examinations* (~~Sections 5.2 through and including 5.15~~);
 - ~~f.F.~~ publish a comprehensive summary or outline of the information, knowledge, or functions covered by the *food safety certification examination* (~~Section 4.6~~);
 - ~~g.G.~~ make available general descriptive materials on the procedures used in examination construction and validation and the procedures of administration and reporting of results (~~Section 4.7~~); and
 - ~~h.H.~~ compile at least semi-annually a summary of *certification* activities, including number of applicants, number tested, number passing, number failing, and number certified (~~Sections 4.16~~).

8.3 Responsibilities to the *Accrediting Organization*. The *certification organization* shall:

- ~~a~~-A make available upon request to the *accrediting organization* copies of all publications related to the *certification* program,
- ~~b~~-B advise the *accrediting organization* of any proposed changes in structure or activities of the ~~certifying~~ *certification organization*,
- ~~e~~-C advise the *accrediting organization* of substantive change in *food safety certification examination* administration,
- ~~d~~-D advise the *accrediting organization* of any major changes in testing techniques or in the scope or objectives of the *food safety certification examination*,
- ~~e~~-E annually complete and submit to the *accrediting organization* information requested on the current status of the Food Protection Manager *Certification* Program and the *certification organization*,
- ~~f~~-F submit to the *accrediting organization* the report requirements information specified for the Food Protection Manager *Certification* Program, and
- ~~g~~-G be re-accredited by the *accrediting organization* at least every 5 years.

SECTION 9.0 – MANAGEMENT SYSTEMS

9.0 Each *certification organization* shall have a formal management system in place to facilitate continuous quality improvement and produce preventive and corrective actions.

9.1. The **management system** shall contain the following three components.

A. Document control to include:

- 1) lists of all documents pertaining to the certification organization;
- 2) dates for documents approved for implementation by the certification organization;
- 3) the person(s) within the certification organization responsible for the documents; and
- 4) listing of individuals who have access to the documents.

B. Internal audits to include:

- 1) identification of critical activities;
- 2) data collection process and evaluation schedule;
- 3) audit methodology and evaluation process;
- 4) the person(s) authorized to perform audits; and
- 5) report audit findings and identify corrective action required.

C. A Management Review that includes:

- 1) a documented annual review of internal audit results;
- 2) a management group that conducts the review;
- 3) a review of the audit results to determine corrective actions needed;
- 4) a review of the audit results to determine preventive actions needed; and
- 5) the effectiveness of corrective and preventive actions taken.

ANNEX A

Responsibilities of the Professionals Involved in the Credentialing Process for Certified Food Protection Managers

Accepted June 1997

Recognizing that the justification for regulating entrance to the occupation of *Certified Food Protection Manager* is to protect the safety and welfare of the public; and

recognizing that the responsibility and liability for overseeing the protection of safety and welfare of the public lies with those governmental jurisdictions at Federal, state and local levels having the power to set forth laws regulating entrance to and performance in occupations; and

recognizing that the rights of the public at large and of those members of that public who wish to enter an occupation ~~must~~ shall be balanced in terms of fairness and due process in the form of a credentialing process for admitting qualified persons to perform in that occupation; and

recognizing that the *validity* of any credentialing process for *Certified Food Protection Managers* is dependent on unbiased application of all aspects of that process, requiring careful determination of the competencies necessary to prevent foodborne illness, unbiased education and training for acquisition of those competencies, and fair assessment practices to ~~assure~~ ensure that individuals have achieved mastery of the competencies;

therefore, professionals involved in the credentialing process for *Certified Food Protection Managers* accept responsibilities based on those considerations.

Assessment tools will be developed to be free from bias due to characteristics that have no bearing on the competencies being measured. Such characteristics as gender, ethnicity, race, socioeconomic status, age, and any other concerns unrelated to ability to apply the required competencies will not be allowed to create differences in ~~candidate~~ examinee scores.

Actual or potential conflicts of interest that might influence judgment or performance of examination developers, *test administrators* ~~or~~ */proctors, instructors/trainers/educators, instructors/educators/trainers* or other participants in the credentialing process will be disclosed.

Items for *competency* assessments will be selected to be a representative sample of the full spectrum of the competencies determined by the CFP and by federal guidelines to be

necessary to protect the public from foodborne illness, regardless of the training/education program undertaken by the applicants being tested.

Training/education will be based upon the full spectrum of the competencies agreed upon as being necessary to protect the public from foodborne illness, unbiased by any knowledge of the contents of the *competency* assessment for the credential.

Administration of the assessment instrument will be done with professional attention to security of the *food safety certification examination* to ~~assure~~ ensure current and continued *validity* of the examination and of the credential that is earned through its use.

Professionals and organizations will develop and implement full quality assurance procedures to ensure the accuracy of assessment decisions and the integrity of the entire credentialing process.

The rights of those who are assessed will be recognized and protected.

ANNEX B

Guidelines for Regulatory Authorities Implementing Food Protection Manager Certification Programs

- B1.** Each permitted *food establishment* should have a minimum of one designated *Certified Food Protection Manager* who is accountable for food safety.

Documentation of *certification* of *Certified Food Protection Manager(s)* should be maintained at each *food establishment* and shall be made available for inspection by the *regulatory authority* at all times.

- B2.** A *Certified Food Protection Manager* is responsible for:
- a. identifying hazards in the day-to-day operation of a *food establishment*;
 - b. developing or implementing specific policies, procedures or standards aimed at preventing foodborne illness;
 - c. coordinating training, supervising or directing food preparation activities and taking corrective action as needed to protect the health of the consumer; and
 - d. conducting in-house self-inspection of daily operations on a periodic basis to see that policies and procedures concerning food safety are being followed.

- B3.** **Qualifications for *Certification*.** To become a *Certified Food Protection Manager*, an individual ~~must~~ shall pass a *food safety certification examination* from an accredited ~~certifying program~~ *certification organization* recognized by the CFP. The CFP recognizes the importance and need for the provision of food safety training for all food employees and managers. The CFP recommends the content of food protection manager training be consistent with paragraph 2-102.11 (C) of the most recent FDA Food Code. the CFP promotes the information contained in the FDA Food Code as well as content outlines based on job tasks analyses, provided on the CFP website, which may be of value in developing or evaluating training.

- B4.** Regulatory authorities should work with the *certification organization* on a mutually agreeable format, medium and time frame for the submission of score reports pertaining to the administration of *food safety certification examinations*.

Food Protection Manager Certification Committee Bylaws

Preamble

The Food Protection Manager Certification Committee, hereinafter referred to as the Committee, of the Conference for Food Protection, hereinafter referred to as the Conference, exists to carry out charges assigned via the Conference Issue process and from the Conference Executive Board, hereinafter referred to as the Board, relating to food protection manager training and certification ~~issues~~ and operates within the objectives stated in the Constitution and Bylaws of the Conference.

Article I. Name.

The Name of the Committee is Food Protection Manager Certification Committee.

Article II. Objectives.

- Section 1. Systematically identify and address issues concerning Food Protection Manager Certification Programs.
- Section 2. Adopt sound, uniform accreditation standards and procedures that are accepted by the Conference.
- Section 3. Promote uniformity among all jurisdictions that subscribe to the principles of the Conference by obtaining their recognition and adoption of the Conference Standards for Accreditation of Food Protection Manager Certification Programs.
- Section 4. Promote strategies to enhance equivalence among food protection manager certificates issued by certifying organizations.
- Section 5. Establish and refine policies and standards to which certifying organizations shall conform.

Article III. Organization and Operation.

- Section 1. The Committee is a standing committee within the Conference ~~and as such shall receive its charges from the Board.~~
- Section 2. The Committee shall consider all ~~issues~~ Issues charged to the Committee ~~by the Board. The committee and~~ shall work to develop consensus. The Board may submit charges to the Committee at any time. The Committee is to deliberate the charges expeditiously, or within the time frame determined by the Board or the Committee Chair.

- Section 3. The Committee shall use the protocol established in these Bylaws to address its charges ~~from the Board~~.
- Section 4. All Committee recommendations shall be submitted as Issues to the Conference for deliberation. The Committee shall follow the protocol for Issue submission as established ~~in the Conference Bylaws~~ by the Conference.
- Section 5. All ~~issues~~ Issues, intellectual properties, and/or inventions created by the Committee and approved by the ~~voting a~~ Assembly of the Conference ~~Delegates~~ become the property of the Conference.

Article TBD. Quorum

A quorum to conduct Committee meetings and conference calls shall be the presence or participation of one more than half of the filled Committee positions. A Committee quorum shall be considered a sufficient number for voting on issues under deliberation. The decisions resulting from a quorum vote shall be deemed representative of the Committee.

Article IV. Composition of Organizational Components and Eligibility Requirements for Serving in Official Capacities.

- Section 1. The Committee shall be chaired by a Chair and Vice-Chair. Prior to each biennial Conference meeting, the incoming Chair and Vice-Chair shall be selected by the outgoing committee. The Chair, Vice-Chair and committee members ~~appointed by the Chair of Council II and shall be approved by the Board.~~
- ~~Section 2. The Council II Chair shall select the Committee Chair and Vice-Chair. The Chair and Vice-Chair shall not be selected from the same group constituency affiliation.~~
- Section ~~2~~ 3. The Committee Chair and Vice-Chair shall serve until the conclusion of the next biennial Conference meeting. ~~At the conclusion of the conference meeting, the incoming Council II Chair will initiate the selection process for the Chair and Vice-Chair of the Committee.~~
- Section ~~3~~ 4. The Committee Chair and Vice-Chair may serve consecutive terms with approval of the Board at the discretion of the Council II Chair. The Council II Chair shall obtain recommendations from members of the Committee on qualified candidates.

Article V. Committee Structure and Representation.

- Section 1. To be eligible to serve on the Committee as a voting member or non-voting alternate, individuals must commit in writing to active participation and be approved by the Conference Chair and the Board.

Section 2. The Committee Chair and Vice-Chair, ~~and/or Council II Chair~~ will select committee members and alternates from the list of volunteers or recruit volunteers as appropriate to balance the committee as delineated ~~under Article IV. Committee Structure and Representation~~ in these Bylaws. In the event of a Committee vacancy with no designated alternate in that constituency, the Chair will first recruit from the remaining list of volunteers provided during the initial Committee selection process.

Section 3. The composition of the Committee is a balanced representation of industry, regulatory, academia, certification ~~providers~~ organizations, training providers, and consumers. The Committee membership representation shall consist of a maximum of twenty-eight (28) thirty (30) full members votes from the following constituencies in addition to the Chair and Vice-Chair:

Subsection 1. Nine (9) representatives from regulatory agencies with food safety responsibilities:

- a. Two (2) from State regulatory agencies;
- b. Two (2) from local regulatory agencies;
- c. Two (2) from federal government agencies; ~~with retail food program responsibilities.~~
- d. Three (3) “At Large” appointments; ~~(*At Large representation — agencies with primary regulatory food safety responsibilities.)~~

Subsection 2. Nine (9) industry representatives:

- a. Three (3) from the foodservice (restaurant) industry;
- b. Three (3) from the retail food store industry; and
- c. Three (3) “At Large” appointments. (*At large selections may include professional or trade organizations that directly represent the restaurant, retail food, institutional foodservice, and food vending segments of the industry, and whose mission incorporates a public health protection component.)

Subsection 3. ~~Three (3)~~ Five (5) total votes for certification providers organizations that are accredited by the Conference’s accreditation process. All accredited certification organizations who volunteer will be given a voting position on the Committee; if more than five (5) organizations participate on the Committee, fractional but equal voting rights will be calculated as established in these Bylaws;

Subsection 4. Three (3) Food Protection Manager training providers;

Subsection 5. Two (2) representatives from academia, and

Subsection 6. Two (2) consumer/independent representatives/public members.

Section 4. Committee members will serve a two (2) year term, concurrent with the cycle of the biennial Conference meeting. Committee members are eligible to serve for consecutive terms contingent upon _____.

~~Subsection 1. Indication of written interest to serve on the Committee.~~

~~Subsection 2. The availability of membership based on the representation requirements set forth in Article IV, Section 1.~~

~~Subsection 3. An assessment by the Committee Chair and Council II Chair, Vice-Chair, and the incoming Chair of the Committee to ensure a balance between members who have previously served on the Committee and new members.~~

Section 5. In the event of a surplus or insufficient number of volunteers in a category, the Council II Chair may consult with the outgoing Committee Chair to identify potential candidates for appointment to the Committee. Up to two (2) non-voting alternates will be included on the Committee roster each for industry, regulatory, academia, training providers, and consumers to best represent the category of each constituency. Each certification organization participating on the Committee may designate one (1) alternate from their own organization.

Section 6. The incoming Chair of the Committee shall make every effort to retain at least 50% of the Committee membership for a continuing term. This retention is recommended due to the complexity of issues, the need to retain continuity of Committee functions, and the short time frame between biennial Conference meetings.

Section 7. In the event a Committee member changes constituency during their term, the Chair may consider them for any open seat on the Committee which needs representation from their constituency or consider any open alternate position. If the Chair determines that there are no appropriate openings available, the Committee member will be asked to resign from the committee.

Article VI. Committee Organization, Operation, and Meetings

Section 1. The Committee shall receive its direction from the Board. The Board shall assign the Committee its charges as ~~ratified~~ approved during the biennial Conference meeting. The Board may assign additional charges to the Committee to ensure that the Conference Standards for Accreditation of Food Protection Manager Certification Programs and accreditation process are administered in a fair and responsible manner.

Section 2. The Committee shall meet at least annually and at the biennial Conference meeting. All Committee meetings are open to anyone to attend. In addition to

meetings, the Committee shall schedule conference calls, as deemed appropriate, for addressing issues under deliberation. In the event that sensitive, financial or proprietary information is under consideration by the Committee, the Chair shall have the option to conduct a closed an executive session until the confidential portion of the proceedings has been concluded.

~~Section 3. — Committee meetings shall be conducted under the direction of the Chair. The Committee Chair shall call and preside at all meetings of the Committee.~~

~~Section 4. — When the Committee Chair is absent, is unable to act, or refuses to act, the Vice-Chair shall perform the duties of the Committee Chair. When the Vice-Chair acts in place of the Chair, the Vice-Chair shall have all the powers and be subject to all restrictions upon the Committee Chair.~~

~~Section 5. — A modified Robert's Rules of Order shall provide the framework for conducting Committee meetings and deliberations. The modification will allow some discussion between Committee members without having Chair recognition before entering into the dialogue. The Chair may at any time, request that Committee members be recognized before speaking to maintain an orderly process~~

~~Section 6. — Guests and/or observers shall be recognized by a Committee member and/or the Chair before addressing the Committee.~~

Section 3 7. In addition to the charges and issues received from the Board, Committee members may submit issues Issues and alternative recommendations to the Committee for discussion. Issues and recommendations introduced by Committee members shall be submitted using the Conference format.

- ~~• State the problem or issue.~~
- ~~• Discuss the key impacts of the issue on the accreditation process or Food Protection Manager Certification Programs.~~
- ~~• Provide a recommended solution to the issue. All alternative positions to Committee issues must be presented with a clear recommended solution.~~

~~Section 8. — The Committee Chair may designate ad hoc workgroups to conduct research, study proposals, develop procedures or recommendations related to complex issues and/or charges. Workgroups shall provide written reports and recommendations to the Committee for deliberation. (note – moved to Article VII, section 8)~~

~~Section 9. — A quorum to conduct Committee meetings and conference calls shall be the presence of one more than half of the filled Committee positions. A Committee quorum shall be considered a sufficient number for voting on issues under deliberations. The decisions resulting from a quorum vote shall be deemed representative of the Committee. In the event of a lack of a quorum, the Chair may vote to make up the quorum. (note – moved to New Article)~~

~~Section 10. — When a quorum of the Committee participates in a meeting or a conference call the Chair may call for a vote by the Committee on the motions before it.~~

Section ~~4~~ 11. Voting.

Subsection 1. A consensus building decision process will be used. When Committee members are asked to vote, each member will be able to express one of three positions.

- A thumb up indicates agreement with the issue on the floor
- A thumb sideways means the position on the floor is not the member's optimal solution, but they can accept the position
- A thumb down indicates that a member does not agree with the issue on the floor and would like an alternative recommendation considered.

The Committee Chair shall provide an opportunity for the dissenting member(s) to express the alternative position(s). After discussion of these alternative positions, the Chair will call for a final vote from the Committee.

Subsection 2. Except for certification organizations, all voting Committee members and alternates designated for that meeting shall have one (1) vote.

Subsection 3. All certification organizations accredited by the Conference's accreditation process participating on the Committee shall not to exceed a total of five (5) votes.

- If more than five (5) certification organizations volunteer to participate on the Committee, the five (5) votes allocated to certification organizations shall be fractionalized (evenly divided).
- The voting fraction shall be determined when the final committee membership is approved by the Board and shall remain in effect until the next biennial Conference meeting.
- Each certification organization shall be allowed no more than one (1) vote or one (1) voting fraction at any meeting.

~~Section 12~~ Subsection 4. The Vice-Chair may voice positions on issues. ~~When the Committee Chair conducts a meeting, the Vice-Chair and~~ may vote on all matters before the Committee.

~~Section 13~~ Subsection 5. The Chair is a non-voting member of the Committee, ~~with the following exceptions. In the event of a tie when the Committee Vice-Chair is not present and the process must go forward, the Chair may cast the deciding vote. The Chair may vote in the event a quorum is needed. I;~~ however, in the event of a tie, the Chair may vote as the tie-breaker.

~~Section 14.~~ ~~The Chair may obtain affirmation from the Committee on some administrative items without proceeding through the formal motion, discussion and voting process defined in Robert's Rules of Order.~~

Section †5. Committee funding. The Board may allocate funds to the Committee for its charges. These funds may be used to contract the services of outside experts to assist the Committee, attend meetings with potential accreditation entities, and other miscellaneous expenses that the Committee must incur, e.g., use of meeting rooms. Funding shall not be allocated to cover an individual Committee member's travel or per diem expenses to attend meetings ~~unless such expenditures are deemed essential to the completion of the Committee's charge. Expenditures to fund a Committee member's travel expenses must receive the concurrence of two-thirds (2/3) of the voting members of the Committee.~~ Committee funding may be used only as directed by the Board.

Article VII. Duties of the Committee Chair

Section 1. The Chair and Vice Chair, with the approval of the Board ~~and the Council II Chair~~, shall select Committee members in accordance with ~~Article IV~~ these Bylaws.

Section 2. The Chair, with concurrence of two-thirds (2/3) of the voting members of the Committee may appoint non-voting Ex-Officio consultants and advisors to the Committee in accordance with ~~Article VIII~~ these Bylaws.

Section 3. The Chair shall preside at all meetings of the Committee, except as provided in ~~Article VII, Section †~~ these Bylaws.

Section 4. The Chair shall coordinate the arrangement of meetings and conference calls and ensure that meeting dates and locations are posted in advance on the Conference web site.

Section 5. The Chair shall be responsible for distributing to Committee members and other meeting participants an agenda for the meeting or conference call. This agenda may be distributed by email, fax, mail, or other suitable means.

Section 6. The Chair may assign a Committee member, using a rotation basis or other appropriate means among all Committee members, to take minutes during designated meetings and conference calls.

Section 7. The Chair shall be responsible for distributing minutes of all Committee meetings or conference calls in a timely manner, usually within three weeks of the event.

~~Section 8. The Chair shall be responsible for preparing written or oral reports to the Board detailing the activities and expenditures of the Committee. The Chair shall be called upon to report at the biennial Conference meeting on the activities of the Committee.~~

Section 8. The Chair may designate ad hoc workgroups to conduct research, study proposals, and develop procedures or recommendations related to complex issues and/or

charges. Workgroups shall provide written reports and recommendations to the Committee for deliberation. (note – moved from Article VI, section 8)

~~Section 9. The Chair shall provide an annual written Committee budget report to Committee members and the Board.~~

Article VIII. Duties of the Committee Vice-Chair

Section 1. In the event the Chair is unable to perform the duties of the Chair, the Vice-Chair shall act as Chair.

Section 2. When acting as Chair, the Vice-Chair shall perform all the necessary duties for the Committee as outlined in ~~Article VI~~ these Bylaws.

Section 3. The Vice-Chair shall perform all duties assigned by the Chair.

Article IX. Duties of Committee Members / Alternates

~~Section 1. A Committee member's tenure shall be carried out in accordance with Article IV, Section 2.~~

Section 1 ~~2~~. Committee members shall have the responsibility to notify the Committee Chair of their inability to attend a meeting or participate on a conference call at least fifteen (15) days prior to the scheduled meeting or conference call. For any committee member that is unable to attend a scheduled meeting or conference call, an alternate will be assigned. Selection of the designated alternate will be agreed upon by the Committee Chair and the absent member and chosen to best represent the constituency of the absent member. The member may submit in writing a designated representative in his/her place to the Chair. This designated alternate may vote on issues before the committee only during the specified meeting or conference call.

Section 2 ~~3~~. Committee members ~~or designated representative~~ and alternates shall have the responsibility to review for comment standards, reports, recommendations, issues or other Committee documents distributed within the time frames designated by the Committee.

Section 3 ~~4~~. Committee members ~~or designated representative~~ and alternates shall have the responsibility to complete work assignments within time frames designated by the Committee.

Section 4 ~~5~~. Committee members ~~or designated representative~~ and alternates shall have the responsibility to notify the Committee Chair or the Chair's designee of their inability to complete a work assignment.

Section ~~5~~ 6. Committee members that do not participate ~~or provide a designated representative~~ for three (3) consecutive meetings and/or conference calls shall have their continued participation as Committee member assessed by the Committee Chair and evaluated by the Committee. The Committee member may be subject to being removed from their membership position. Removal of a Committee member for failure to perform duties as specified in ~~Article VIII~~ these Bylaws, shall require the concurrence of two-thirds (2/3) of the voting members of the Committee.

Article X. Committee Consultants and Advisors

Section 1. The Committee may contract the services of a consultant for issues beyond the scope of the Committee's expertise, if deemed necessary or if charged by the Board. The Committee Chair may identify a consultant or assign a consultant to an ad hoc workgroup with the approval of the full Committee.

Section 2. Contractual obligations for consultant services shall have the concurrence of two-thirds (2/3) of the voting members of the Committee and be approved by the Board.

Section 3. Committee consultants and Conference appointments to the Accreditation Committee shall serve as non-voting Ex-Officio members of the Committee.

~~Section 4. Funds for outside consultants shall come from the Committee budget, as determined by the Board.~~

Section 4. The Chair and Vice-Chair may invite, with approval from the Committee, advisors or subject matter experts to participate in meetings and conference calls, if it is determined that such individuals would provide additional information, insight, clarification, guidance or other assistance to the Committee, for a specified purpose. These advisors or subject matter experts will be non-voting guests in meetings and conference calls.

Article XI. Workgroups

Section 1. The Committee Chair may designate ad hoc workgroups to address the charges of the Board and complete the duties of the Committee.

Section 2. Each workgroup shall select a group leader who is responsible to report group activities to the Committee Chair and Vice-Chair.

Section 3. Workgroups shall report to the Committee Chair and Vice-Chair as determined by the Committee Chair. These reports shall also be disseminated to the full Committee.

Article XII. Committee Reports

- Section 1. The Committee Chair shall be responsible for preparing written or oral reports to the Board detailing the activities and expenditures of the Committee. *(note – moved from Article VII, duties of the chair)* Written reports submit a status report of the Committee’s activities shall be submitted to the Council II Chair no later than thirty (30) days prior to the Board meetings as required by the Conference procedures.
- Section 2. The Committee Chair shall coordinate the development of a final report of the Committee activities to ~~the Council II~~ with recommended actions. The final report shall be done ~~in advance of the Conference meeting~~ as part of an Issue submission and ~~The submitted Issue containing the report shall comply with all the Conference procedures and time lines pertaining to the submission of Issues for deliberation.~~
- Section 3. The Committee Chair, Vice-Chair, or ~~the Committee Chair’s~~ designee as specified in writing to the ~~Chair of Council II~~ Chair, shall be in attendance when Council II meets during the Conference meeting to present and discuss the Committee’s report and any ~~issues~~ Issues submitted by the Committee.

Article XIII. Amendments

The Food Protection Manager Certification Committee Bylaws may be altered, amended, or repealed by two-thirds (2/3) vote of the Committee and final concurrence from the Board. An ad hoc ~~task workgroup~~ chaired by the Vice Chair may be appointed by the Chair of the Committee to make recommendations to the Bylaws for consideration by the Board.

CFP Food Protection Manager Certification Committee Bylaws
Revised Bylaws approved 2010 ~~Conference~~ Biennial Meeting

Committee Name:
Food Protection Manager Certification Committee

| First Name | Last Name | Company /Employer Name | City | State | Role |
|-------------------|------------------|---|--------------|--------------|---------------------|
| Julie | Albrecht | Univ of Nebraska/ Lincoln, Nutrition & Health Sciences Dept | Lincoln | NE | Member |
| Rose Mary | Ammons | Environmental Health Testing (National Registry) | Tampa | FL | Alternate |
| Anthony | Carotenuto | Navy and Marine Corps Public Health Center | Portsmouth | VA | Member |
| Lee | Comman | FL Dept of Agriculture & Consumer Services | Tallahassee | FL | ACAC Representative |
| Larry | Edwards | FDA/ORA/Retail Food Specialist | Falls Church | VA | Alternate |
| Vicki | Everly | (Retired) Santa Clara Co Environmental Health | | CA | Member |
| Ron | Grimes | NSF International | Ann Arbor | MI | Member |
| Patrick | Guzzle | Idaho Dept of Health and Welfare | Boise | ID | Member |
| Aggie | Hale | Fl. Dept. of Agriculture | Tallahassee | FL | Member |
| Jeffrey | Hawley | Harris Teeter, Inc. | Matthews | NC | Vice-Chair |
| Paul | Hineman | National Restaurant Association Solutions | Chicago | IL | Alternate |
| Lynn | Hodges | USDA-Office of Outreach, Education & Employee Training | Dallas | TX | Advisor |
| Christine | Hollenbeck | NEHA Entrepreneurial Zone | Denver | CO | Member |
| Keith | Jackson | Performance Food Group | Richmond | VA | Member |
| Joyce | Jensen | Lincoln-Lancaster Co. Health Dept | Lincoln | NE | Chair |
| Teresa | Lee | City of Rosenberg | Rosenburg | TX | Member |
| Geoff | Luebkemann | Florida Restaurant & Lodging Association | Tallahassee | FL | Member |
| Larry | Lynch | Environmental Health Testing (National Registry) | Orlando | FL | Member |
| Thomas | McMahan | Supervalu, Inc. | Boise | ID | Member |
| David | McSwane | Indiana University | Indianapolis | IN | Member |
| Cassandra | Mitchell | Fairfax County Health Department | Fairfax | VA | Member |
| Dianna | Pasley | Schnuck Markets, Inc. | St. Louis | MO | Member |
| Tara | Paster | Paster Training, Inc. | Pottstown | PA | Member |
| Kate | Piche' | National Restaurant Association Solutions | Chicago | IL | Member |
| Susan | Quam | Wisconsin Restaurant Association Education Foundation | Madison | WI | Member |
| Todd | Rossov | Publix Super Markets, Inc. | Lakeland | FL | Member |
| George | Roughan | TAP Series, LLC | Agoura Hills | CA | Member |
| Davene | Sarrocchio-Smith | Lake County General Health District | Painesville | OH | Member |
| Roy | Swift | American National Standards Institute | Washington | DC | ANSI Representative |
| Bill | Vear | MindLeaders, Inc. | Dublin | OH | Member |
| Kenneth | Walters | Prometric | St. Paul | MN | Member |
| Patricia | Welch | Illinois Department of Public Health | Springfield | IL | Member |
| Brian | Wickman | Compass Group | Clyde Twp | MI | Member |
| Lauire | Williams | FDA/CFSAN/Office of Food Safety | College Park | MD | Advisor |
| Sharon | Wood | H-E-B Grocery Company | San Antonio | TX | Member |

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 081
Issue: 2012 II-013**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Standards - Non-Substantive Revisions

Issue you would like the Conference to consider:

The FPMC Committee, in addition to making substantive revisions to address examination security (see *Issue titled: Standards - Strengthening Exam Security*), felt that the *Standards* needed additional revisions for consistency, clarity, and accuracy. In addition, a new numbering system is being proposed. These changes do not change any of the intent or current application of the *Standards* as they relate to the accreditation process. They do, however, make the *Standards* a better document.

Revisions include:

- Correctly referencing the Biennial meeting of the Conference for Food Protection
- Consistently referencing "certification organizations" which were sometimes referred to as "certifying organizations" or "certifying programs."
- Consistently referencing "test administrator/proctor" which was sometimes referred to as "test administrator and proctor" or "test administrator or proctor."
- Consistently referencing "examinee" which was sometimes referred to as "candidate."
- Consistently referencing "examination" which was sometimes referred to as "test" or "exam."
- Replacing the word "must" with "shall."
- Replacing the word "assure" with "ensure."
- Correcting typos and text errors.
- Correcting the section numbers of the FDA Food Code referenced in the preamble.
- Removing references to other sections of the *Standards* within the *Standards*.
- Revising the numbering scheme within the *Standards'* Sections.

In addition, the *Standards* Table of Contents and page numbers will be revised as needed based on the revisions approved in April 2012.

As these are non-substantive revisions to the *Standards*, exact language changes can be found in the FPMCC Final Report attachment, *Standards for Accreditation of Food Protection Manager Certification Programs* with Committee proposed revisions.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference (dated April 5, 2006, and referenced on the Conference Website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*. http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

approval of the non-substantive revisions to the *Standards for Accreditation of Food Protection Manger Certification* for improving consistency, clarity, and accuracy within the *Standards* and establishing a new numbering system.

Exact language changes are found in the FPMCC Final Report attachment, *Standards for Accreditation of Food Protection Manager Certification Programs* with Committee proposed revisions (January 5, 2012 draft).

Submitter Information:

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It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 079
Issue: 2012 II-014**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Standards - Strengthening Exam Security

Issue you would like the Conference to consider:

The Food Protection Manager Certification Committee (FPMCC) proposes revisions to the *Standards for Accreditation of Food Protection Manager Certification Programs* to significantly strengthen the examination security by modifying or creating standards to address the following recommendations from the FPMCC Workgroup.

- Exam Development - Increase the exam form item bank from 600 to 1000.
- Test Administrator/Proctor's Roles and Responsibilities - Clearly delineate all Test Administrator/Proctor roles and responsibilities.
- Training of Test Administrators/Proctors - Require the certification organizations to provide a training program for Test Administrators/Proctors based on learning objectives that reflect their roles/responsibilities.
- Verification of Test Administrators - Require certification organizations to notify ANSI when Test Administrator/Proctor has been removed.
- Exam Item Exposure - Require certification organizations to have a system to track all examinations (exam books and/or answer sheets).
- Exam Shipping and Handling - Restructure Standards to include provisions that ensure security for all shipping and handling of exams by certification organizations and Test Administrators/Proctors.
- Test Sites - Require a private room accessible only to Test Administrator/Proctor/Examinees during test administration.
- Certificates - Require certification organizations to have a system to provide verification to the current validation of individual certificates.
- Advertising Standards - Test Administrator/Proctor cannot make statements or claims, nor have affiliation with any organization making statements or claims such as guarantees of passing the exam.
- Management Systems - Include a new section to the Standards that contains requirements for the implementation of management systems that include document control, internal audits, and management review.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference for Food Protection (dated April 5, 2006, and referenced on the Conference website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*.

http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

approval of revisions to the *Standards for Accreditation of Food Protection Manager Certification Programs* to address examination security and increase the credibility of the Food Protection Manager Certification.

All language and modifications are contained within attached document titled:

"Recommended Solutions - Strengthening Exam Security" extracted from the document titled "*Standards for Accreditation of Food Protection Manager Certification Programs with Committee Proposed Revisions*" which is attached to the Issue titled "Report - FPMCC."

A summary of the changes include:

- A. In the Preamble, revise the "Modifications and Improvements" section.
- B. In "Section 1.0 - Definitions" - add specified definitions.
- C. In "Section 4.0 - Food Safety Certification Examination Development" - revise Subsections 4.1 and 4.17 and move the components of 4.18 to Section 5.
- D. In "Section 5.0 - Food Safety Certification Examination Administration" - reorganize, revise, replace, and add subsections as noted.
- E. In "Section 7.0 - Certification Organization Responsibilities to Candidates and to the Public" - replace sections 7.3 and 7.4 with a new section.
- F. Add a new "section 9.0 - Management Systems."

The Conference also recommends that the revised *Standards for Accreditation of Food Protection Manager Certification Programs* be posted to the CFP web site.

Submitter Information:

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Attachments:

- "Recommended Solutions - Strengthening Exam Security"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

Recommended Solution for 2012 Issue titled: **Standards - Strengthening Exam Security**

The Conference recommends approval of the following revisions to the *Standards for Accreditation of Food Protection Manager Certification Programs* to address examination security and increase the credibility of the Food Protection Manager Certification (using underline format for new language and strikethrough for deleted language).

All language has been extracted from the document titled: "Draft of Revised Standards 12 9 2011" attached to the Issue titled: "Report - FPMCC."

A. In the *Standards* Preamble, revise the "Modifications and Improvements" section as follows:

The FPMC Committee followed the Conference directive to use the 1996 conference working document, Standards for Training, Testing and *Certification* of Food Protection Managers, in the development of accreditation standards. Extensive revision of this document was presented to CFP's ~~2000, and 2002~~ 2012 Biennial Meeting of the Conferences for Food Protection under the title, Standards for *Accreditation* of Food Protection Manager *Certification* Programs.

The charge to the FPMC Committee from the 2010 Biennial Meeting of the Conference for Food Protection resulted in revisions to the *Standards* to enhance the integrity of the entire testing process, which includes identification and analysis of root causes of security violations and implement solutions.

The revision and reformatting of the document were made after a comprehensive FPMC Committee review of each section. ~~The~~ This revision of the *Standards for Accreditation* of Food Protection Manager *Certification* Programs:

- ~~1. adds and improves definitions that are more precise and more consistent with terminology and definitions used in the *psychometric* community and by accreditation organizations;~~
- ~~2. italicizes defined terms throughout the document;~~
- ~~3. eliminates ambiguities in the 1996 conference working document pertaining to test development and administration;~~
- ~~4. identifies *certification organization* responsibilities to candidates, the public and the *accrediting organization*;~~
- ~~5. adds computer based test standards; and~~
- ~~6. clarifies demonstration of *continued proficiency*;~~
2. modifies or creates *Standards* to better address professional credibility and training of test administrators/proctors; handling of examination packages; shipping irregularities; location (site) irregularities; and breach of the certification organization's test administrators/proctors protocols and requirements;
3. uses "*test administrator/proctor*" in the *Standards* to indicate duties for both "*test administrator*" and "*proctor*;" and

4. adds a standard for management systems.

B. In the *Standards* “Section 1.0 – Definitions” – add the following definitions:

1.18 Examination Booklet means the paper version of the *food safety certification examination*.

1.22 Exposure Plan means the policies and procedures in place to ensure that examination items are not exposed to examinees or other people that may result in an examination item being memorized and/or shared.-

1.26 Item means an examination question.

C. In the *Standards* “Section 4.0 – Food Safety Certification Examination Development” – revise Subsections 4.1 and 4.17 and move the components of 4.18 to Section 5.

4.1 ~~Food safety certification examinations administered by accredited certifying programs must~~ certification organizations shall comply fully with all criteria set by the CFP and ~~must shall~~ meet explicit and implicit standards to protect the public from foodborne illness. The accredited certification organization shall provide a food safety certification examination that:

- A. conforms to all CFP Standards for Accreditation of Food Protection Manager Certification Programs;
- B. has been developed from an item bank of at least 1000 questions; and
- C. on a quarterly basis, is provided in at least two new examination forms in the English language.

4.17 Specific Procedures Requirements for Examination Standardization.

Administration. ~~Certification organizations must~~ shall specify conditions and procedures for administering all *food safety certification examinations* in a standard manner ~~in order to assure~~ ensure that all ~~candidates~~ examinees are provided with the opportunity to perform according to their level of ~~competency~~ ability and to ~~assure~~ ensure comparability of scores. Examination Booklets shall be of high quality printing to ensure ease of reading. ~~Procedures must include, but not be limited to:~~

- a. ~~requirements for qualifications of test administrators and proctors and a suitable training program for each;~~
- b. ~~a complete administration manual describing each step of the test administration process and the rationale for each;~~
- c. ~~clear instructions for candidates both printed for distribution to candidates and read by the test administrator;~~
- d. ~~high quality printing of examination booklets to assure ease of reading;~~
- e. ~~specification of security procedures to assure lack of exposure of test items to unauthorized persons during testing and to prevent theft of examination items or booklets;~~
- f. ~~clear criteria (with rationale) for physical facilities for examination administration;~~
- g. ~~clear criteria (with rationale) and procedures for adaptations necessary to accommodate qualified candidates with disabilities, and~~

- h. clear criteria (with rationale) and procedures for adaptations necessary to accommodate qualified candidates with literacy limitations that may require a reader.

~~4.18~~ A *certification organization* must have a published, written policy regarding test-site interpretation of *food safety certification exams*. If a *certification organization* chooses to allow test-site interpretation of food safety exams when an exam is not available in the candidates' native language, the *certification organization* must have a published, formal application process available to all candidates. Procedures must include but not be limited to:

- a. an application process for candidates that includes an evaluation and documentation component to determine the eligibility of the candidate for test-site interpretation;
- a. an application process for interpreters that includes clear and precise qualifications that must include but not be limited to the following:
 - i. fluent in both languages;
 - ii. have a recognized skill in interpretation;
 - iii. trained in the principles of objective test administration;
 - iv. have no personal relationship with the candidate (may not be another candidate, may not be a relative or friend of the candidate and may not be a co-worker, employer, or an employee of the candidate);
 - v. may not be a *Certified Food Protection Manager* nor have any vested interest in Food Protection Manager certification or conflict of interest;
 - vi. provide references or other proof attesting to the interpreter's competencies and professional acumen; and
 - vii. agree in writing to maintain the security of the examination.
- b. must be in a proctored environment where the interpreter and candidate are not a distraction to other candidates; and
- c. must be in a proctored environment where the interpreter is not active as the *test administrator* or *proctor*.

D. In the *Standards* "Section 5.0 – Food Safety Certification Examination Administration" – reorganize, revise, replace, and add subsections as follows:

5.0 *Food Safety Certification Examination Administration.* All sections of this Standard apply to Computer Based Technology (CBT) Administration except Section 5.1.

~~5.12~~ 5.1 Security for Examination Booklets. Packing, Shipping, and Storage of Examination Materials.

Security of the *food safety certification examination* materials must be maintained in shipments to and from the examination administration site, and must include but not necessarily be limited, and are subject to the following requirements:

- a. secure, tamper-resistant packing is required for all materials in all phases of shipment; packing system must be designed to reveal any tampering or violation of the package's security;

A. Securing examination booklets

1) Each individual *examination booklet* shall be secured in by using one of the following methods both prior to and after administration:

- a. enclosing in a sealed tamper-resistant package;
- b. shrink-wrapping;

- c. sealing on all three open sides with each seal of sufficient size to cover at least one square inch of the front side and to overlap and cover the same amount of space on the back side of the *examination booklet*; or
- d. using any other technology that ensures that only the examinee can view the contents of the *examination booklet*.

2) Only the examinee is allowed to break open the *examination booklet* the packaging or seals.

B. Packaging by *certification organization*

- 1) Each individual *examination booklet* shall be securely sealed before packing.
- 2) Secure tamper-resistant shipping material, such as Tyvek envelopes or similar materials that are designed to reveal any tampering or violation of the package's security, is required for all shipment of materials in all phases.
- 3) Packaging must include a packing list that contains:
 - a. *examination form* language(s) or version(s) enclosed; and
 - b. quantity of examinations enclosed.

~~b. shipping must be done by certifiable, traceable means so that its location can be determined at any given time; and~~

C. Shipping to the *test administrator/proctor* from the *certification organization*

- 1) Shipping shall be done by certifiable, traceable means, with tracking numbers so that the location can be determined at any given time.
- 2) A signature is required upon delivery.
- 3) Only an individual authorized by the *test administrator/proctor* may sign for the package.

~~c. the packing list must show the number of packages in the shipment and the exact contents of each.~~

D. Storage by *test administrator/proctor*

~~The package(s) of examination booklets must shall be placed in secure storage secured at all times immediately upon delivery. They must be kept in secure storage both before and after they are used. Under no circumstances may *examination booklets*, examinee used answer sheets, or other examination materials be kept where other employees or the public has access.~~

E. Shipping back to the *certification organization* from the *test administrator/proctor*

- 1) After examination administration, *examination booklets* and answer sheets shall remain in secure storage until returned to *certification organization*.
- 2) The following shall be in tamper-resistant shipping material:
 - a. all used and unused *examination booklets* for each examination administration;
 - b. examinees' used answer sheets; and
 - c. all required *certification organization* forms.
- 3) Shipping shall be done within two business days following the examination date by certifiable, traceable means, with tracking numbers so that the location can be determined at any given time.

F. Handling unused *examination booklets* that have been held for up to ninety days. The *test administrator/proctor* will:

- 1) assure ensure that all *examination booklets* are accounted for;
- 2) package *examination booklets* securely as described above; and

- 3) ship to the certification organization securely packaged and according to these Standards and the Certification Organization's instructions.

5.16 5.2 Test Site Requirements.

Sites chosen for administering *food safety certification examinations* ~~must~~ shall conform to all legal requirements for safety, health, and accessibility for all qualified candidates ~~examinees~~.

A. Additionally, the accommodations, lighting, space, comfort, and work space for taking the examination ~~must~~ shall reasonably allow all candidates-examinees to perform at their highest level of ~~competency of ability~~.

5.17 B. Requirements at each test site include, but are not limited to:

- 1) a. accessibility in accordance with the requirements of the Americans with Disabilities Act, ~~must~~ shall be reasonably available for all qualified examinees, whether the exam ~~examination~~ administration occurs at the main examination location site, or at an alternative examination location site that meets the same location requirements as the main examination location site;
- 2) ~~b. all sites must conform~~ conformity to all fire safety and occupancy requirements of the jurisdiction in which they are located;
- 3) ~~c. there must be sufficient spacing between each examinee in the area in which the actual testing examination~~ is conducted, or other appropriate and effective methods, to preclude any examinee from viewing another examinee's ~~test examination~~;
- 4) ~~d. acoustics must allow~~ allowing each examinee to hear instructions clearly, using an electronic audio system if necessary;
- 5) ~~e. lighting at each examinee's work space be adequate for reading fine print; and~~
- 6) ~~f. ventilation and temperature must be appropriate for generally recognized health and comfort of examinees;~~
- 7) use of private room(s) where only examination personnel and examinees are allowed access during the examination administration; and
- 8) no further admittance into the test site once examination administration has begun.

4.18 5.3A *certification organization* ~~must~~ shall have a published, written policy regarding test-site interpretation language translation of food safety certification exams-examinations. If a *certification organization* ~~chooses to allow~~ allows test-site interpretation language translation of a *food safety certification exams-examination* when an exam ~~examination~~ version is not available in the candidates' ~~native~~ examinees' requested language, the *certification organization* ~~must~~ shall have a published, formal application process available to all candidates ~~potential examinees~~. Procedures ~~must~~ shall include but not be limited to:

- a. A. An application process for candidates potential examinees that includes an evaluation and documentation component to determine the eligibility of the candidate potential examinee for test-site interpretation language translation,
- b. B. An application process for interpreters that includes clear and precise qualifications that ~~must~~ shall include but not be limited to the following:
 - i. 1) being fluent in both languages;

- ii- 2) have a recognized skill in interpretation language translation;
 - iii- 3) trained in the principles of objective test examination administration;
 - iv- 4) have no personal relationship with the candidate examinee (may not be another candidate examinee, may not be a relative or friend of the candidate examinee and may not be a co-worker, employer, or an employee of the candidate examinee);
 - v- 5) may not be being a *Certified Food Protection Manager* nor have having any vested interest in Food Protection Manager certification or conflict of interest;
 - vi- 6) provide references or other proof attesting to the interpreter's- translator's competencies and professional acumen; and
 - vii- 7) agree in writing to maintain the security of the examination.
- e. C. ~~must be in a~~ A proctored environment where the interpreter translator and candidate examinee are not a distraction to other candidates examinees, and
- d. D. ~~must be in a~~ A proctored environment where the interpreter translator is not active as the *test administrator* or proctor.

5.19 5.4 Scoring and Reporting Requirements. ~~Completed answer sheets and test booklets (used and unused) must be shipped by the *test administrator* according to the *certification organization's* written security procedures.~~

5.20 ~~Scoring will be done only by means authorized by the certification organization and approved by the accrediting organization.~~

A. Only the *certification organization* may score the examination by methods approved by the accrediting organization. No official scoring is to be done at the test site.

5.24 B. *Food safety certification examination* scores will not be released and as being official until verified and approved by the *certification organization*.

5.22 C. Examinee scores will be confidential, available only to the examinee and to persons or organizations approved in writing by the examinee.

5.23 D. Score reports will be available to examinees in a time frame specified in the application, which will not be later than exceed fifteen business days following the administration of the *food safety certification examination*. If there is a delay due to problems in verification or authentication of scores, examinees will be informed and an approximate date for release of the scores will be announced. The *certification organization* will have ongoing communication with examinees and with the *test administrator/proctor* until the scores are verified and released.

5.5 **Test Administrator/Proctor(s) Role.** Test administrators/proctors shall have successfully completed the *certification organization's* specific training in examination administration and security procedures. They shall provide written assurance of maintaining confidentiality of examination contents, of adhering to the *certification organization's* standards and ethics of secure examination administration, and of agreeing to abide by the *certification organization's* policies, procedures, and rules.

~~5.6~~ The *certification organization* shall ensure that all *test administrators* and *proctors* meet the competency requirements established by the *certification organization*, and comply with all requirements of the *certification organization*.

5.6 ***Test Administrator/Proctor Requirements.*** To serve as a *test administrator/proctor* for an accredited *certification organization* the qualified individual shall complete the *certification organization's*:

A. signed Application;

B. non-Disclosure Agreement (NDA);

C. training program for *test administrators/proctors*; and

D. conflict of Interest Disclosure Agreement (can be a part of the NDA).

5.7 ***Test Administrator/Proctor Renewal.*** *Test administrators/proctors* shall renew the training program for *test administrators/proctors* and Non-Disclosure Agreement with the *certification organization* every three (3) years.

5.3 5.8 Instructor/Educator/Trainer as Test Administrator/Proctor. When an instructor/educator /trainer of food safety training administers, proctors or monitors a food safety certification examination from an accredited certification program, the *accredited certification organization* shall provide a food safety certification examination that:

_____ a. _____ conforms to all CFP standards,

_____ b. _____ has been developed from an item bank of at least 600 questions, and

_____ c. _____ minimally on a quarterly basis, is based on a new *examination form*.

The certifying organization must have a plan that demonstrates it has controlled for item and examination exposure. The exposure plan must take into account the number of times a test item and form/version is administered.

When a person acts as a *trainer* and a *test administrator/proctor*, that person relinquishes the role of *trainer* when acting in the role of *test administrator/proctor* and acts solely as a representative agent of the *certification organization*.

5.9 ***Test Administrator/Proctor Responsibilities.***

A. ***5.18 Examination Scheduling.*** Schedule examinations. *Food safety certification examinations* must shall be scheduled far enough in advance to allow for timely shipment of supplies or pre-registration for computer-based examinations.

B. Ensure no destruction of *examination booklet* materials or computer equipment; _____

~~C. Comply with the *certification organization's* procedures for handling any breaches of exam security that may occur according to the *certification organization's* policies and rules.~~

C. At all times:

1) handle examination materials securely;

2) ensure test site conformity;

3) space examinees per protocol;

4) ensure examinees' rights;

5) ensure confidentiality of examinees' personal information;

- 6) ensure standardized procedures are followed:
- D. Before the examination:
 - 1) check examinees' identification;
 - 2) check for and exclude unauthorized objects;
 - 3) distribute examination materials;
 - 4) read instructions to examinees verbatim;
 - 5) ensure examinees complete information section of answer sheet or online registration form.
- E. During the examination:
 - 1) supervise proctors;
 - 2) monitor examinees during examination;
 - 3) identify and document cheating incidents;
 - 4) check for and exclude unauthorized objects;
 - 6) identify and document environmental distractions.
- F. After the examination
 - 1) collect and return examination booklets and answer sheets to *certification organization* or close computer based testing session;
 - 2) report possible security breaches and examination administration irregularities in compliance with the *certification organization's* policies.

~~5.13~~—~~Test administrators~~ are responsible for the organization and administration of all examination site activities and procedures, and for the accurate identification of each examinee. They are also responsible for supervision of the activities of ~~proctors~~. When the ~~instructor/educator/trainer~~ also serves in the role of ~~test administrator~~, it is important that the individual clearly recognizes the difference in those two roles.

~~5.14~~ ~~Proctors~~ shall work under the direction of the ~~test administrator~~. They have the responsibility and must have the ability to observe examinee behaviors, accurately distribute and collect test materials, and assist the ~~test administrator~~ as assigned.

~~5.15~~ ~~5.10~~ The number of approved ~~proctors~~ assigned to a ~~test administrator~~ must ~~shall~~ be sufficient to allow each examinee to be observed and supervised to ~~ensure~~ ensure conformance to security requirements. There shall be no less than one ~~test administrator/proctor~~ for the first thirty-five examinees, plus one additional ~~test administrator~~ or ~~proctor~~ for each additional 35 examinees or fraction thereof.

5.11 Examination Security

~~5.1~~ **A.** All aspects of ~~food safety certification examination~~ administration are to be conducted in a manner that maximizes the security of the examinations, in keeping with the public protection mandate of the CFP. This ~~must~~ ~~shall~~ be accomplished in a manner that ensures fairness to all ~~candidates~~ examinees.

~~5.2~~ **B.** All examinees shall begin taking the examination at the same time. No examinee shall be admitted into the test site once examination administration has begun.

~~**Security of Food Safety Certification Examination Contents.**~~ ~~Food safety certification examinations~~ must ~~shall~~ be presented in a manner that allows absolutely no one other than the examinees to see the contents of the booklet or alternative medium, both before, ~~during~~, and after the examination is administered. ~~Only the examinee is allowed to break open the examination package or seals.~~

5.9 ~~C.~~ Where special legitimate accommodations must shall be made for otherwise qualified candidates examinees under provisions of the Americans with Disabilities Act, arrangements must care shall be taken to ensure that security of the examination is maintained. Arrangements shall be such that the *food safety certification examination* contents are not revealed to any test administration personnel with any conflict of interest. A written affirmation to that effect and a written nondisclosure statement from the individual who was chosen to assist the otherwise qualified candidate must examinee shall be provided to the *certification organization*.

~~5.10~~ **5.12** The *certification organization* must shall provide procedures to be followed in any instance where the security of a *food safety certification examination* is, or is suspected to be, breached.

A. Included must shall be specific procedures for handling and for reporting to the *accrediting certification organization*, any suspected or alleged:

- 1) cheating incidents;
- 2) lost or stolen booklets examination materials;
- 3) intentional or unintentional divulging of test examination items by examinees or test examination administration personnel; or
- 4) any other incidents perceived to have damaged the security of the examination or any of its individual items.

B. Corrective actions to guard against future security breaches must shall be established and implemented.

C. Documentation of corrective actions and their effectiveness must shall be made available to the accreditation body *accrediting organization*.

5.8 **5.13 Item & Examination Exposure.** ~~The certification organization must demonstrate it has controlled for item and examination exposure. An exposure plan must take into account the number of times a test item and examination form/version is administered, that no examination form is retained for any test administration or by any test administrator/proctor for more than 90 days; and that at all times it can account for all copies of all used and unused examination forms before being returned to the certification organization.~~
The certification organization shall have an exposure plan that:

- A. controls for item and examination exposure;
- B. accounts for the number of times an examination item, examination form, and examination version is administered;
- C. ensures that no examination form is retained by any examination administration personnel for more than 90 days;
- D. at all times accounts for all copies of all used and unused examination booklets; and
- E. systematically and actively demonstrates that every used answer sheet, examination booklet, and any other examination materials and answer keys are accounted for to prevent, reduce, or eliminate examination exposure.

5.4 ~~**Test Administrator/Proctor Qualifications, Training and Duties.**~~
5.14 ~~**Certification Organization's Responsibility to Test Administrators/Proctors.**~~
A. The *certification organizations* must shall specify the responsibilities of test administrators and of proctors *test administrator/proctor*, set minimum criteria for approval of *test administrators* and for *proctors*, and provide suitable programs of a training program to enable persons applicants to meet these the approval criteria. Responsibilities, duties, qualifications and training of *test administrators* and *proctors* must shall be directed toward assuring standardized, secure

examination administration and fair and equitable treatment of examinees. Policies and procedures for taking corrective action(s) when any *test administrator* or *proctor* fails to meet job responsibilities must be implemented and documented.

5.5 B. The *certification organization* shall define and provide descriptions for the roles of *test administrators*, */proctors*, and *certification organization* personnel that will clearly delineate clearly indicating the responsibilities of each for these roles. The *certification organization* shall demonstrate how it ensures that all certification personnel, including as well as test administrators and /proctors, understand and practice the procedures identified for their roles.

C. Test administrator/proctor training programs shall include:

- 1) specific learning objectives for all of the activities of test administrator/proctor, and
- 2) an assessment component that shall be passed before an examinee for test administrator/proctor will be approved.

5.7 5.15 Test Administrator/Proctor Agreements. The *certification organization* shall enter into a formal agreement with the *test administrator/proctor* and shall assess and monitor the performance of *test administrators* and *proctors* in accordance with all documented procedures and agreements. The formal agreement shall at a minimum include, address:

- A. provisions that relate to code of conduct;
- B. conflicts of interest; and
- C. a statement of consequences for breach of the agreement.

5.16 The *certification organization* shall assess and monitor the performance of test administrators/proctors in accordance with all documented procedures and agreements.

5.17 The *certification organizations* is not permitted to hire, contract with, or use the services of any person or organization that claims directly or indirectly to guarantee passing any certification examination. Trainers making such a claim, whether as an independent or as an employee of another organization making the claim, are not eligible to serve as test administrators/proctors for any certification organization.

5.18 Policies and procedures for taking corrective action(s) when any test administrator or proctor fails to meet job responsibilities shall be implemented and documented. Test administrators/proctors that have been dismissed by the certification organization for infraction of policies or rules, incompetence, ethical breaches, or compromise of examination security will be reported to the accrediting organization.

5.19 The *certification organization* shall provide documentation that verifies compliance with the 1:35 ratio (test administrator/proctor: examinees).

5.14 5.20 Examination Administration Manual.

The *certification organization* must shall provide each test administrator/proctor with a manual detailing the requirements for all aspects of the food safety certification examination administration process. The Examination Administration Manual shall include a standardized script for the paper examination test

administrator/proctor to read to examinees before the examination commences. For computer based tests (CBT), standardized instructions shall be available for examinees to read.

5.21 Examination Scripts. Separate scripts/instructions may be created for different delivery channels or certification organizations. Certification organizations may customize elements of the scripts to fit their particular processes, but each script shall contain the following:

A. Introduction to the Examination Process

- 1) composition of the examination (number of questions, multiple choice, etc.);
- 2) time available to complete the examination;
- 3) role of the test administrator/proctor;
- 4) process for restroom breaks; and
- 5) process for responding to examinee comments and questions.

B. Copyright and Legal Responsibilities

- 1) description of what constitutes cheating on the examination;
- 2) penalties for cheating; and
- 3) penalties for copyright violations.

C. Examination Process

- 1) maintaining test site security;
- 2) description of examination components unique to the certification organization (examination booklet, answer sheet completion, computer process in testing centers, etc.);
- 3) instructions for proper completion of personal information on answer sheets/online registration and examination booklets;
- 4) instructions on properly recording answers on answer sheets or online; and
- 5) instructions on post-examination administration process.

E. In the *Standards* “Section 7.0 - Certification Organization Responsibilities to Candidates and to the Public” – replace sections 7.3 and 7.4 with one new section as follows:

~~**7.3 — Effective Date of Certificate** Certificates issued and electronic listing of certificate holders maintained by accredited certification programs shall identify the food safety certification examination form recognized by the accrediting organization and specify the date the examination was taken.~~

7.3 Individual Certification Certificates:

A. Each certification organization will maintain a secure system with appropriate backup or redundancy to provide verification of current validity of individual certification certificates.

B. Certificates shall include, at a minimum:

- 1) issue date/date examination was taken;
- 2) length of time of certification validity;
- 3) name and certification mark of certification organization;
- 4) ANSI accreditation mark;
- 5) name of certified individual;
- 6) unique certificate number;
- 7) name of certification;
- 8) contact information for the certification organization; and

9) examination form identifier

C. Replacement or duplicate *certificates* issued through an *accredited certification organization* shall carry the same issue date, or date of examination, as the original *certificate*, and will be documented by the *certification organization*.

~~7.4 — **Replacement or Duplicate Certificate.** Replacement or duplicate *certificates* issued through an *accredited certification program* shall carry the same effective date as the original, with an expiration worded in such a manner that indicates the *certification* will be valid for no more than five years.~~

F. And add a new “section 9.0 – Management Systems” as follows:

9.0 Each certification organization shall have a formal management system in place to facilitate continuous quality improvement and produce preventive and corrective actions.

9.1. The management system shall contain the following three components.

A. Document control to include:

- 1) lists of all documents pertaining to the certification organization;
- 2) dates for documents approved for implementation by the certification organization;
- 3) the person(s) within the certification organization responsible for the documents; and
- 4) listing of individuals who have access to the documents.

B. Internal audits to include:

- 1) identification of critical activities;
- 2) data collection process and evaluation schedule;
- 3) audit methodology and evaluation process;
- 4) the person(s) authorized to perform audits; and
- 5) report audit findings and identify corrective action required.

C. A Management Review that includes:

- 1) a documented annual review of internal audit results;
- 2) a management group that conducts the review;
- 3) a review of the audit results to determine corrective actions needed;
- 4) a review of the audit results to determine preventive actions needed; and
- 5) the effectiveness of corrective and preventive actions taken.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 084
Issue: 2012 II-015**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

FPMCC Non-Substantive Bylaw Revisions

Issue you would like the Conference to consider:

The proposed non-substantive revisions to *the Food Protection Manager Certification Committee Bylaws* includes: clarification of terms and references for consistency and accuracy, and to eliminate duplication of Robert's Rules of Order which are adopted within the Bylaws.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference (dated April 5, 2006, and referenced on the Conference Website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*. http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

approval of the non-substantive revisions to the *Food Protection Manager Certification Committee Bylaws*.

A summary of the proposed non-substantive revisions include:

- clarification of terms and references for consistency and accuracy, and
- elimination of language duplication with Robert's Rules of Order already adopted within the Bylaws.

Exact language changes are found in the FPMCC Final Report attachment, *Food Protection Manager Certification Committee Bylaws* with Committee proposed revisions (final draft revision Jan 2012).

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 082
Issue: 2012 II-016**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

FPMCC Substantive Bylaw Revisions

Issue you would like the Conference to consider:

The proposed revision to *the Food Protection Manager Certification Committee Bylaws* includes:

- Membership and voting for all certification organizations.
- Addressing "alternate" and "advisor" membership.
- Addressing changes in constituency while serving on the committee as a representative of the constituency.

In anticipation of more than three certification organizations, it is important to revise the voting so that it is fair and consistent. The proposed wording, while limiting the number of votes, allows for every certification organization to be represented on the committee, regardless of how many certification organizations there are.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference (dated April 5, 2006, and referenced on the Conference Website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*. http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

adopting the following Food Protection Manager Certification Committee (FPMCC) substantive Bylaw revisions to ensure a fair and consistent representation for all certification organizations. All new language is indicated in underline format; language to be deleted is in strike through.

Article V. Committee Structure and Representation.

Section 1. To be eligible to serve on the Committee as a voting member or non-voting alternate, individuals must commit in writing to active participation and be approved by the Conference Chair and the Board.

Section 2. The Committee Chair and Vice-Chair, ~~and/or Council II Chair~~ will select committee members and alternates from the list of volunteers or recruit volunteers as appropriate to balance the committee as delineated ~~under Article IV. Committee Structure-~~

and Representation in these Bylaws. In the event of a Committee vacancy with no designated alternate in that constituency, the Chair will first recruit from the remaining list of volunteers provided during the initial Committee selection process.

Section 3. The composition of the Committee is a balanced representation of industry, regulatory, academia, certification providers organizations, training providers, and consumers. The Committee membership representation shall consist of a maximum of twenty-eight (28) thirty (30) full members votes from the following constituencies in addition to the Chair and Vice-Chair:

Subsection 1. Nine (9) representatives from regulatory agencies with food safety responsibilities:

c. Two (2) from federal government agencies; ~~with retail food program responsibilities.~~

d. Three (3) "At Large" appointments; ~~(*At Large representation – agencies with primary regulatory food safety responsibilities.)~~

Subsection 3. ~~Three (3) Five (5) total votes for certification providers organizations that are accredited by the Conference's accreditation process. All accredited certification organizations who volunteer will be given a voting position on the Committee; if more than five (5) organizations participate on the Committee, fractional but equal voting rights will be calculated as established in these Bylaws;~~

Section 4. Committee members will serve a two (2) year term, concurrent with the cycle of the biennial Conference meeting. Committee members are eligible to serve for consecutive terms contingent upon

~~Subsection 1. Indication of written interest to serve on the Committee.~~

~~Subsection 2. The availability of membership based on the representation requirements set forth in Article IV, Section 1.~~

~~Subsection 3. An assessment by the Committee Chair and Council II Chair, Vice-Chair, and the incoming Chair of the Committee to ensure a balance between members who have previously served on the Committee and new members.~~

Section 5. ~~In the event of a surplus or insufficient number of volunteers in a category, the Council II Chair may consult with the outgoing Committee Chair to identify potential candidates for appointment to the Committee. Up to two (2) non-voting alternates will be included on the Committee roster each for industry, regulatory, academia, training providers, and consumers to best represent the category of each constituency. Each certification organization participating on the Committee may designate one (1) alternate from their own organization.~~

Section 7. In the event a Committee member changes constituency during their term, the Chair may consider them for any open seat on the Committee which needs representation from their constituency or consider any open alternate position. If the Chair determines that there are no appropriate openings available, the Committee member will be asked to resign from the committee.

Article VI. Committee Organization, Operation, and Meetings

Section 4 ~~4~~ Voting

Subsection 2. Except for certification organizations, all voting Committee members and alternates designated for that meeting shall have one (1) vote.

Subsection 3. All certification organizations accredited by the Conference's accreditation process participating on the Committee shall not exceed a total of five (5) votes.

- If more than five (5) certification organizations volunteer to participate on the Committee, the five (5) votes allocated to certification organizations shall be fractionalized (evenly divided).
- The voting fraction shall be determined when the final committee membership is approved by the Board and shall remain in effect until the next biennial Conference meeting.
- Each certification organization shall be allowed no more than one (1) vote or one (1) voting fraction at any meeting.

Article IX. Duties of Committee Members / Alternates

Section 1 2. Committee members shall have the responsibility to notify the Committee Chair of their inability to attend a meeting or participate on a conference call at least fifteen (15) days prior to the scheduled meeting or conference call. For any committee member that is unable to attend a scheduled meeting or conference call, an alternate will be assigned. Selection of the designated alternate will be agreed upon by the Committee Chair and the absent member and chosen to best represent the constituency of the absent member. The member may submit in writing a designated representative in his/her place to the Chair. This designated alternate may vote on issues before the committee only during the specified meeting or conference call.

Section 2 3. Committee members and alternates shall have the responsibility to review for comment standards, reports, recommendations, issues or other Committee documents distributed within the time frames designated by the Committee.

Section 3 4. Committee members and alternates shall have the responsibility to complete work assignments within time frames designated by the Committee.

Section 4 5. Committee members and alternates shall have the responsibility to notify the Committee Chair or the Chair's designee of their inability to complete a work assignment.

Article X. Committee Consultants and Advisors

Section 4. The Chair and Vice-Chair may invite, with approval from the Committee, advisors or subject matter experts to participate in meetings and conference calls, if it is determined that such individuals would provide additional information, insight, clarification, guidance or other assistance to the Committee, for a specified purpose. These advisors or subject matter experts will be non-voting guests in meetings and conference calls.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 085
Issue: 2012 II-017**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

FPMCC - New and Continuation Charges

Issue you would like the Conference to consider:

The Food Protection Manager Certification Committee (FPMCC), a standing committee of the Conference, shall be charged to continue its work and has identified the following specific charges:

- Continue working with the CFP Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the *Standards for Accreditation of Food Protection Manager Certification Programs* in an up-to-date format.
- Revise/Update the *Standards for Accreditation of Food Protection Manager Certification Programs* Preamble and Annexes.
- Complete the pilot evaluation process, based on the initial impact of the revised *Standards*, to ensure that the evaluation tool will examine the components and outcomes of the additional examination security *Standards* as needed. The evaluation tool will then be used by the FPMCC in the 2014-2016 Biennium to determine if additional examination security requirements are needed to further insure credibility of the Food Protection Manager Certification Accreditation.

Public Health Significance:

Food establishments have fewer critical risk factors according to the CDC as stated in the endorsement letter to the Conference (dated April 5, 2006, and referenced on the Conference Website) when food establishments employ managers who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's *Standards*. http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf

Recommended Solution: The Conference recommends...:

the following charges be assigned to the Food Protection Manager Certification Committee (FPMCC) for the 2012-2014 biennium:

- 1) Continue working with the CFP Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the *Standards for Accreditation of Food Protection Manager Certification Programs* in an up-to-date format.

2) Revise/Update as needed the *Standards for Accreditation of Food Protection Manager Certification Programs* Preamble and Annexes.

3) By July 1, 2012, the FPMCC Chair will request approval of the formation of a Security Evaluation Workgroup for the purpose of initiating the exam security evaluation process; workgroup representation will include:

- ANSI representative,
- ANSI field research design (data) subject matter expert,
- CFP ACAC representative,
- One representative from each Certification Organization,
- FPMCC Chair and Vice Chair,
- One food industry representative, and
- One food regulatory representative.

4) Evaluate the results of the exam security evaluation process and Standards revisions approved by the 2012 CFP Biennial Meeting to ensure that they are resulting in substantial improvement of exam security. The FPMCC is proposing a plan to:

- work with ANSI to update the ANSI accreditation application to incorporate the final Standards changes as approved at the 2012 Biennial Meeting,
- develop surveillance documents,
- establish an analysis framework and research plan for data collection and evaluation of improvement in exam security,
- complete a preliminary study to ensure that the evaluation tool works, and
- develop a timeline for continued improvement.

5) Report back to the Executive Board and the 2014 Biennial Meeting of the Conference for Food Protection.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 038
Issue: 2012 II-018**

Council Recommendation: Accepted as Submitted _____ Accepted as Amended _____ No Action _____

Delegate Action: Accepted _____ Rejected _____

All information above the line is for conference use only.

Title:

Report - Program Standards Committee

Issue you would like the Conference to consider:

The Conference of Food Protection (CFP) Program Standards Committee (PSC) seeks Council II's acknowledgement of its committee report.

Public Health Significance:

The Voluntary National Retail Food Regulatory Program Standards were developed to serve as a guide for regulatory retail food program managers in the design, management, and execution of a retail food program in our continued goal of reducing foodborne illness risk factors and promoting active managerial control practices sustaining long term compliance. The PSC continues to work with the FDA internal working group and the FDA Clearinghouse Committee to clarify and address issues that arise with the Standards. Over the past two years, the PSC has worked with these FDA entities and the attached report outlines the progress and summary of their work.

Recommended Solution: The Conference recommends...:

Acknowledgement of the 2010-2012 Program Standards Committee Final Report and thanking the members for completed work.

Submitter Information:

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Attachments:

- "2010-2012 Program Standards Committee Final Report"
- "2010-2012 Program Standards Committee Roster"
- "Proposed Amendments to Standard No. 9 Program Assessment"
- "Standard No. 8 Assessment Workbook"

- "Standard No. 8 Assessment Workbook Instruction Guide"

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Conference for Food Protection Committee FINAL Report

COMMITTEE NAME: Program Standards Committee

COUNCIL (I, II, or III): II

DATE OF REPORT: 11/15/11

SUBMITTED BY: Nicole Grisham

COMMITTEE CHARGE(s):

Issue #: 2010 II-026

Charge: The Conference recommends re-creating the Program Standards Committee to work on the following charges:

1. Serve as a stakeholder group to provide input to an FDA internal working group which will be considering administrative functions such as:
 - Criteria for verification auditors
 - Recommending additional changes or improvements to the Program Standards
2. Formulate resolutions to issues brought before the committee.
3. Report back to Conference at the 2012 CFP Biennial Meeting.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

The 2010-2012 Program Standards Committee (PSC) has met on a monthly basis by conference call to provide feedback to the FDA internal working group and to discuss additional changes and improvements to the Program Standards as identified in the committee charge.

Charge 1A – Criteria for verification auditors

Background:

FDA would like feedback on suggested criteria for verification auditors. Currently in Standard No. 9 it states that “an AUDITOR, as defined in the National Standards, shall complete the VERIFICATION AUDIT.” An auditor is defined as “any authorized city, county, district, state, federal, tribal, or other third party person who has no responsibilities for the day-to-day operations of that jurisdiction and is charged with conducting a verification audit, which confirms the accuracy of the self-assessment.” Additionally, a verification audit is defined as “a systematic, independent examination by an external party to confirm the accuracy of the self-assessment.”

Committee work and discussion:

At the time the PSC commenced, a review of Standard No. 9 by the FDA internal working group and steering committee was underway. After discussing the scope of the work that the working group was focused on related to Standard No. 9, the PSC placed evaluating criteria for verification auditors and additional work on hold to avoid duplicating any efforts. The working group identified the need to separate the administrative sections of the Standard from the requirements of the Standard and desired the input of the PSC on these final documents as our direction. This separation was addressed partly to follow the format and logic of the other Standards and to provide better guidance to jurisdictions and auditors. Additionally, the separation allowed for a reevaluation of the components of Standard 9 which identified the possibility that a jurisdiction could conduct repeated Risk Factor Studies without ever implementing any activities designed to reduce the occurrence of foodborne illness risk factors and still meet Standard No. 9 by simply collecting the data. Thus, proposed language was added to the Standard to provide needed grammatical corrections, but more importantly, to ensure that enrolled jurisdictions develop a targeted intervention strategy or strategies designed to address the occurrence of the risk factors identified in their Risk Factor Study; identify procedures to ensure that these strategies are implemented; and evaluate the effectiveness of such strategies by subsequent Risk Factor Studies or other similar tools. The PSC received the draft of the proposed Standard No. 9 language with the administrative sections removed in October 2011 and provided feedback. This feedback was shared with the FDA internal working group in November 2011.

Currently, Standard No. 9 requires jurisdictions to conduct a Risk Factor Study and analysis of the resulting data to track trends over time related to the occurrence of risk factors. What is currently lacking is a requirement for jurisdictions to attempt to improve the compliance rates for the risk factors identified as having a high out of compliance rate in their Risk Factor Study. Although one of the objectives of the Program Standards is to track the results of regulatory efforts over time, as currently written, it is possible that a jurisdiction could conduct repeated Risk Factor Studies without ever implementing any activities designed to reduce the occurrence of foodborne illness risk factors and still meet Standard No. 9 by simply collecting the data.

The proposed additional language as submitted by the Program Standards Committee provides needed grammatical corrections, but more importantly, would ensure that enrolled jurisdictions develop a targeted intervention strategy or strategies designed to address the occurrence of the risk factors identified in their Risk Factor Study, that these strategies are implemented, and the effectiveness of each strategy is evaluated by subsequent Risk Factor Studies or other similar tools.

The proposed language does not require that interventions result in a reduction in the occurrence of the risk factors, simply that it is attempted and measured. It encourages innovative approaches by suggesting jurisdictions consider various types of interventions such as code changes, educational and training activities, enforcement and compliance strategies, etc. The purpose of the proposed intervention strategy is to attempt to effect improvement in reducing priority risk factor occurrences, between measurement intervals and to assess the strategy's effectiveness.

These proposed changes have been included as part of the amendments to Standard 9 as attached (submitted as Issue titled: Amendments to Program Standard No. 9 – Program Assessment).

The FDA internal working group and the PSC have discussed issues and the future work needed on the separation of the administrative pieces from Standard No. 9. Through these discussions, it was determined

that the FDA Center for Food Science and Applied Nutrition will consider submitting an issue to the CFP on the development of an administrative procedures document for the Standards. The PSC supports this concept and proposes the re-created PSC serves as a stakeholder group on the development of this administrative procedures document as part of the PSC charges listed under the submitted issue titled: Re-create Program Standards Committee. The following components of the potential issue from the FDA internal working group are acknowledged and supported by the PSC:

1. The CFP Program Standards Committee recommends that the Food and Drug Administration develop a document that describes the administrative processes it uses to:
 - enroll jurisdictions in the program standards;
 - measure the success of the jurisdictions in meeting the Voluntary Retail Food Regulatory Program Standards 1 through 9;
 - recognize jurisdictions that meet the Standards including how these jurisdictions are listed on the FDA website; and
 - address issues and resolve disputes concerning the results of non-conforming audits.
2. The CFP Program Standards Committee recommends the “active participant” portions of the current Standard 9 in the National Standards be moved to this administrative procedure document. This includes:
 - Self-Assessment
 - Verification Audit
 - Reporting Requirements for Self-Assessment and Verification Audit
3. The CFP Program Standards Committee recommends that the FDA internal working group utilizes this committee as a stakeholder group in the development of the recommended administrative procedures document.

Charge 1B - Recommending additional changes or improvements to the Program Standards

Background:

FDA requested general feedback on the use and implementation of the individual Standards and whether changes are needed to the requirements of one or more of the Standards. If the PSC believes that changes or improvements can be made to one or more of the Standards, please give a brief summary of the changes needed and the reason why.

Committee work and discussion:

The PSC reviewed the Standards and focused efforts on improving applications related to Standard No. 8. The current language of the Standard is felt to be unachievable for many jurisdictions. The PSC reviewed and discussed feedback and concerns expressed by the Standard No. 8 pilot audit conducted at Santa Clara County Department of Environmental Health as a primary baseline for a discussion starting point. The PSC members shared their respective agency's approach to assessing the inspection frequency of retail food establishments, program logistics, and method of determining the number of staff required to execute the program. Additionally, the PSC reviewed data and information from the *2009 FDA Report on the Occurrence of Foodborne Illness Risk Factors in Selected Institutional Foodservice, Restaurant, and Retail Food Store Facility Types* since it was a validated study containing information related to our discussions. From these discussions, it was determined that the PSC would reevaluate the section of Standard No. 8 pertaining to Staffing Levels and the method for determining the number of full-time equivalent staff needed to properly execute a program.

The true intent of Standard No. 8 was discussed and the PSC focused on the section pertaining to Staffing Levels. This part of the Standard recommends "a staffing level of one full-time equivalent (FTE) devoted to food for every 280 – 320 inspections performed". While the PSC believes that this Standard as it applies to staffing level is unachievable for most jurisdictions and does not provide a realistic measurement that can be applied across various retail food regulatory programs across the nation, the majority agreed that if the PSC focused on a resource to assist in assessing the staffing level that valuable information pertaining to the challenges in meeting this Standard could be identified, which in the future could lead to a more attainable staffing level load. This would take additional research and quantitative validations which the PSC, due to limited time and resources, would not be able to adequately achieve. Thus the PSC agreed to focus on the development of a new resource to assist jurisdictions in assessing their staffing levels rather than addressing the current language in Standard No. 8 pertaining to staffing levels at this time. The developed tools are the most logical initial task, and language for staffing levels would be revisited and addressed as part of the PSC charges listed under the submitted issue titled: Re-create Program Standards Committee. The PSC chose to develop a new staffing level assessment resource in an Excel format through discussions and research on how our respective jurisdictions currently attempt to assess this part of the Standard, and revisiting the current guidance provided through the *2011 Self Assess and Audit Disk* for the Standards. The PSC developed the Excel resource to compliment the *Guide to Self Assess* for Standard No. 8.

Additionally, the PSC members utilized the draft Standard No. 8 Assessment Workbook to assess their staffing levels within their respective inspection programs and test the applicability of the new Excel resource. The PSC unanimously agreed that the new Excel resource greatly assisted in interpreting and applying the concepts in this section of the Standard. Through this testing application within the PSC, it was identified that an instruction guide would be a useful element to accompany the new Excel resource. The PSC developed the instruction guide for the new Excel resource to compliment the *Guide to Self Assess* for Standard No. 8 and recommends that both resource documents are made available to enrolled jurisdictions on the FDA web site and on upcoming versions of the *Self Assess and Audit Disk*.

Through the PSC's work, the PSC is recommending the addition of a new resource, Standard No. 8 Assessment Workbook and Instruction Guide (submitted as Issue titled: Standard No. 8 - Assessment Workbook and Instruction Guide).

Recommendation(s) for future charge:

The Program Standards Committee be re-created following the 2012 CFP Biennial Meeting with the following charges:

1. Serve as a stakeholder group to provide input to an FDA internal working group to:
 - a. Collaborate on the development of an Administrative Procedures Document to support the Voluntary National Retail Food Regulatory Program Standards; and
 - b. Recommend additional changes or improvements to the Program Standards.
2. Explore, assess, and reevaluate Staffing Levels language within Standard No. 8 and recommended any changes.
3. Formulate resolutions to issues brought before the committee and report back at the 2014 CFP Biennial Meeting.

REQUESTED ACTION:

The Program Standards Committee will submit four issues at the 2012 CFP Biennial Meeting based on the recommendation of the committee. These issues are titled:

1. Report - Program Standards Committee
2. Amendments to Standard No. 9 - Program Assessment
3. Standard No. 8 - Assessment Workbook and Instruction Guide
4. Re-Create - Program Standards Committee

Attachments:

- 2010-2012 Program Standards Committee Final Report
- 2010-2012 Program Standards Committee Roster
- Proposed Amendments to Standard No. 9
- Standard No. 8 - Assessment Workbook
- Standard No. 8 - Assessment Workbook Instruction Guide

COMMITTEE MEMBER ROSTER:

- *See attachment titled "2010-2012 Program Standards Committee Roster."*

Committee: Program Standards

| Last Name | First Name | Position (Chair/Member) | Constituency | Employer | City | State | Telephone | Email |
|--------------|---------------|----------------------------|-------------------------------|---|--------------|-------|--------------------|----------------------------------|
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| Collins | Linda | Consultant Alternate | Regulatory - Federal | FDA | Dallas | TX | (214) 253-4945 | linda.collins@fda.hhs.gov |
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| Lawrence | Michael David | Member | Regulatory - Local | Fairfax County Health Department | Fairfax | VA | (703) 246-8435 | david.lawrence@fairfaxcounty.gov |
| Hargrave | Cheryn | Member | Industry - Retail Food Stores | United Supermarkets | Lubbock | TX | (806) 928-0459 | chargrave@unitedtexas.com |
| Eisenberg | Miriam | Member | Other - Sanitation Services | Ecolab | Lincolnshire | IL | (847) 597-9848 | miriam.eisenberg@ecolab.com |

Voluntary National Retail Food Regulatory Program Standards – January 2011

Proposed Amendments to Standard No. 9 Program
Assessment
STANDARD 9
PROGRAM ASSESSMENT

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STANDARD 9 PROGRAM ASSESSMENT

This Standard applies to the process used to measure the success of jurisdictions in meeting the *Voluntary National Retail Food Regulatory Program Standards 1 through 9* (hereafter referred to as the National Standards) and their progress in reducing the occurrence of foodborne illness risk factors. Additionally, it applies to the requirements for recognition by the Food and Drug Administration of those jurisdictions meeting the National Standards.

Requirement Summary

To be an active participant in the *Voluntary National Retail Food Regulatory Program Standards* and to be listed on the FDA Roll of Participating Jurisdictions, a jurisdiction must ~~assure~~ensure that:

1. The program manager, or a designated representative, conducts an initial SELF-ASSESSMENT against the criteria in each of the nine (9) National Standards within 12 months following the date of enrollment and every 60 months thereafter; and,
2. The program manager, or a designated representative, requests a VERIFICATION AUDIT within 3 months following any SELF-ASSESSMENT in which one or more Standards is claimed as met. The VERIFICATION AUDIT is to be completed within 6 months of that SELF-ASSESSMENT; and,
3. Reporting, using the *FDA National Registry Report and Release Record and Agreement -Permission to Publish in National Registry* (FDA Forms 3519 and 3520), will be completed and submitted to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT or a SELF-ASSESSMENT UPDATE and following any VERIFICATION AUDIT.

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must ~~assure~~ensure that:

1. RISK FACTOR STUDY on the occurrence of the five foodborne illness risk factors is conducted and repeated at least once every 60 months to measure trends in the occurrence of the risk factors; and,

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2. An analysis is made of the data collected and a report on the outcomes and conclusions of the RISK FACTOR STUDY is written-
3. A targeted intervention strategy(s) designed to address the occurrence of the risk factors(s) identified in their RISK FACTOR STUDY is implemented and the effectiveness of such strategy(s) is evaluated by subsequent RISK FACTOR STUDIES or other similar tools.

Description of Requirement

To be an active participant in the National Standards and to be listed on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure that the following procedures for SELF-ASSESSMENTS, VERIFICATION AUDITS, and reporting are completed:

A. Self-Assessment

1. The program manager, or a designated representative, conducts an initial SELF-ASSESSMENT against the criteria in each of the nine (9) National Standards within 12 months of the date of enrollment and every 60 months thereafter.

If it is determined that a Standard has been met, at that point the Appendix documents (hereinafter referred to as the worksheets) for that Standard(s) are to be completed in preparation of the VERIFICATION AUDIT.

For any Standard(s) which are not met, it is recommended that any deficiencies in meeting the Standards criteria be identified in order to meet that Standard in the future. It is further recommended that priorities, action plans, and target dates be established to facilitate continuous improvement in the jurisdiction's program.

The National Standards Edition to be used when completing the required 60-month SELF-ASSESSMENT is the most recent version of the *Voluntary National Retail Food Regulatory Program Standards* published on the FDA web site at <http://www.fda.gov>. Once at the FDA main web page, click on "Food," then "Food Safety," then "Retail Food Protection" and click on "Program Standards."

2. For any Standard a jurisdiction claims as met:
 - a) The compliance status of the jurisdiction's program as measured against that Standard(s) is documented by completing the Appendix documents (worksheets) or documents containing equivalent summary information for that Standard; and,
 - b). QUALITY RECORDS specified as requirements in each of the National Standards are established, identified, and maintained. The QUALITY RECORDS must be maintained in such a manner that an AUDITOR can be provided information necessary to verify that a

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Standard's criteria have been met.

3. This complete SELF-ASSESSMENT cycle must be repeated at a minimum every 60 months. However, a jurisdiction may, and is encouraged to complete a SELF-ASSESSMENT UPDATE at any time during the 60-month interval to reflect the most current information on its program accomplishments as reflected by comparison against one or more of the individual Standards. A SELF-ASSESSMENT UPDATE can be made using the edition of the National Standards effective at its last required SELF-ASSESSMENT or a more recent edition of the National Standards, at the jurisdiction's discretion.
4. Following a SELF-ASSESSMENT UPDATE, a jurisdiction completes the worksheets or equivalent forms to document compliance with any additional National Standard(s) met since the last required SELF-ASSESSMENT, establishes the QUALITY RECORDS, and forwards the *FDA National Registry Report and Release Record and Agreement -Permission to Publish in National Registry* (FDA Forms 3519 and 3520) to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT UPDATE.

B. Verification Audit

1. The program manager, or a designated representative, shall request a VERIFICATION AUDIT within three (3) months following any SELF-ASSESSMENT OR SELF-ASSESSMENT UPDATE in which one or more Standard(s) is claimed as met. The VERIFICATION AUDIT is to be completed within six (6) months of that SELF-ASSESSMENT OR SELF-ASSESSMENT UPDATE.
2. A complete SELF-ASSESSMENT of all Standards will be completed every 60 months after the initial SELF-ASSESSMENT. At each complete SELF-ASSESSMENT, a VERIFICATION AUDIT is to be conducted for any standard that is being claimed as met only if the Standard has been revised since the last VERIFICATION AUDIT.
3. An AUDITOR, as defined in the National Standards, shall complete the VERIFICATION AUDIT. VERIFICATION AUDITS confirm and report on the accuracy of a SELF-ASSESSMENT that claims one or more Standard(s) as met. During the VERIFICATION AUDIT, the auditor will:
 - a) Review the QUALITY RECORDS and confirm that the SELF-ASSESSMENT accurately reflects the program's compliance status with each criterion for the version of the National Standards that was used when completing the SELF-ASSESSMENT OR a SELF-ASSESSMENT UPDATE; and,
 - b) Determine whether the QUALITY RECORDS specified as requirements in each of the National Standards have been established, identified, and maintained. If the quality records for a specific program element provide inadequate information upon which to make a determination of conformance with the Standard or to enable a VERIFICATION AUDIT, that Standard is not met.

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C. Reporting Requirements for Self-Assessments and Verification Audits

1. Reporting, using the *FDA National Registry Report and Release Record and Agreement -Permission to Publish in National Registry* (FDA Forms 3519 and 3520), shall be completed and submitted to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT or a SELF-ASSESSMENT UPDATE and following any VERIFICATION AUDIT.
2. Submission of the *FDA National Registry Report and Release Record and Agreement -Permission to Publish in National Registry* is required following each 60-month SELF-ASSESSMENT regardless of whether any Standard(s) are claimed as met.
3. If a jurisdiction wishes to complete a SELF-ASSESSMENT UPDATE with its most current program information, a new *FDA National Registry Report* (FDA Form 3519) and *Release Record and Agreement -Permission to Publish in National Registry* (FDA Form 3520) must be submitted. Any report form submitted is marked to show attainment of all applicable Standards achieved at the time of submission. Dates showing current attainment for each Standard should be recorded on each submission in order to accurately reflect the program's history. Marking all applicable Standards with their most recent attainment dates ensures that accurate information is posted on the FDA List of Enrolled Jurisdictions.
4. The *FDA National Registry Report* (FDA Form 3519) and *Release Record and Agreement -Permission to Publish in National Registry* (FDA Form 3520) is submitted following a VERIFICATION AUDIT. The date of the audit and the date of the version for the Standard that is being audited should be included on the report forms so that information may be added to the FDA List of Enrolled Jurisdictions.

ACHIEVING STANDARD 9

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must ensure that:

- A. A RISK FACTOR STUDY and report on the occurrence of foodborne illness risk factors is completed. A RISK FACTOR STUDY serves two purposes:
 1. To identify risk factors most in need of priority attention in order to develop strategies to reduce their occurrence.
 2. [To evaluate trends over time to determine whether progress is being made toward reducing the occurrence of foodborne illness risk factors. Studies designed to measure trends require analysis of data over a period of time, and no single point in time can be used to derive trend conclusions.](#)
- B. A RISK FACTOR STUDY includes all facility types under regulation by the jurisdiction.

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It is recommended that a jurisdiction's first RISK FACTOR STUDY be conducted as soon as possible following its first SELF-ASSESSMENT, before programmatic changes are made. There is value in using the first study to establish a "baseline" against which future performance can be measured. Program improvements and changes may then be reflected in subsequent studies.

- C. The RISK FACTOR STUDY information is to be updated at least once every five (5) years to measure trends specific to the occurrence of the five (5) foodborne illness risk factors.

The data collection and analysis for the various facility types under regulation by the jurisdiction may occur at various times over the 60 month period, as long as all facility types are included in the 60 month cycle. The 60 month study update is required to maintain achievement of Standard 9. The subsequent studies and reports will determine whether or not there has been a net change in the occurrence of the risk factors.

The nine (9) facility types are:

- Institutions – 1) Hospitals; 2) Nursing Homes; 3) Elementary Schools (K-5)
- Restaurants – 4) Full Service; 5) Fast Food
- Retail Food Stores – 6) Delis; 7) Meat Departments; 8) Seafood Departments; 9) Produce Departments

(See the FDA's Data Collection Manual for additional information regarding facility types and help with Risk Factor Studies.)[LINK]

- D. A jurisdiction may use routine inspection data or may conduct a separate data collection in completing a Risk Factor Study. A data collection instrument similar to the FDA Model Data Collection Form in Appendix J, using the IN, OUT, NA, and NO convention, is required.

Failure to use this convention skews the data toward either IN compliance or OUT of compliance. The FDA data collection instrument is not intended as an inspection form. However, jurisdictions that have developed an inspection form using the IN, OUT, NA and NO convention may use that inspection form as a survey instrument. Refer to the Data Collection Manual to understand the statistical limitations and restrictions if using an inspection form or a data collection form different from the FDA data collection instrument. If the jurisdiction uses a different form, the data may be difficult to compare with the data from the *FDA National Foodborne Illness Risk Factor Studies* or with data from other jurisdictions.

- E. [A jurisdiction must ensure that a targeted intervention strategy designed to address the occurrence of the risk factor\(s\) identified in their Risk Factor Study \(Survey\) is implemented and the effectiveness is evaluated by subsequent Risk Factor Studies \(Surveys\) or other similar tools.](#)

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Jurisdictions are encouraged to incorporate various types of interventions such as code changes, educational and training activities, enforcement and compliance strategies, etc. The purpose of the intervention strategy is to attempt to affect improvement in reducing priority risk factor(s) occurrence rates between measurement intervals and assess their effectiveness.

- F. Achievement of Standard 9 is audited using the same procedures and reported using the *FDA National Registry Report* (FDA Form 3519) and *Release Record and Agreement -Permission to Publish in National Registry* (FDA Form 3520) in the same manner as achievement of the other eight National Standards as detailed under **DESCRIPTION OF REQUIREMENTS** in this document for Self-Assessment, Verification Audit, and Reporting.

Outcome

The desired outcome of this Standard is to enable managers to measure their program against national criteria. The process identifies program elements that may require improvement or be deserving of recognition.

Documentation

The quality records required for this standard include:

1. The completed Appendices (worksheets) for each Standard and supporting records,
2. Survey reports on the occurrence of risk factors and *Food Code* interventions,
3. Documentation of performed interventions, actions or activities designed to improve the control of risk factors.
4. Verification audit reports,
5. FDA National Registry Report, FDA Form 3519, and
6. Affidavit of Permission to Publish, FDA Form 3520.

The Standard 9: Program Self-Assessment and Verification Audit Form, included as a file on this disk is designed to document the findings from the self-assessment and the verification audit process this Standard [\[LINK to print\]](#).

| FTE CONVERSION FACTOR CALCULATIONS | |
|---|-------------|
| Program Description and Supporting Information: | |
| PRODUCTIVE ANNUAL FTE HOURS PER YEAR | |
| Annual FTE Hours Per Year: Industry Standard | 2080 |
| Agency Holiday Hours Per Year | |
| Agency Vacation Leave Hours Per Year | |
| Agency Sick Leave Hours Per Year | |
| Agency Family-Personal Leave Hours Per Year | |
| Annual FTE Hours Per Year: Agency Staff | 2080 |
| Productivity Adjustment | |
| Personal Development Time | |
| Productive Annual FTE Hours Per Year (FTE Conversion Factor): Agency Staff | 2080 |

**Standard 8: Staffing Levels
FTE Data Supplement**

| | | | |
|---|-------------------------------------|--------------------------------|--|
| Productive Annual FTE Hours Per Year (FTE Conversion Factor): Local Inspector | | 2080 | Position Description and Supporting Information: |
| (POSITION CATEGORY) FOOD SAFETY INSPECTION HOURS | | | |
| Assignment/Activity | % of Productive Annual Hours | Productive Annual Hours | |
| | | 0 | |
| | | 0 | |
| | | 0 | |
| | | 0 | |
| | | 0 | |
| | | 0 | |
| | | 0 | |
| FOOD SAFETY INSPECTION HOUR TOTAL | | 0 | |
| (POSITION CATEGORY) FOOD SAFETY INSPECTION HOURS | | | Position Description and Supporting Information: |
| Assignment/Activity | Productive Annual Hours | | |
| | | | |
| | | | |
| | | | |
| FOOD SAFETY INSPECTION HOUR TOTAL | 0 | | |
| (POSITION CATEGORY) FOOD SAFETY INSPECTION HOURS | | | Position Description and Supporting Information: |
| Assignment/Activity | Productive Annual Hours | | |
| | | | |
| | | | |
| | | | |
| FOOD SAFETY INSPECTION HOUR TOTAL | 0 | | |

Standard 8: Staffing Levels
FTE Data Supplement

Standard 8: Staffing Levels
FTE Data Supplement

Assignment/Activity

Routine Inspections

Re-inspections

Complaint Investigations

Outbreak Investigations

Compliance Follow-up Inspections

Risk assessment Reviews

Process Reviews

Variance Process Reviews

Foodborne Illness Complaint Response

Final Construction Inspections

Onsite Training

Temporary Event Inspections

Mobile Unit Inspections

Formal/Informal Hearings

Standardization Inspections

Position Category

FSIO

Trainer

Supervisor

Manager

Standard 8: Staffing Levels
FTE Data Supplement

| |
|--|
| |
|--|

**Standard 8: Staffing Levels
FTE Data Supplement (Non-FS)**

| NON-FOOD SAFETY INSPECTION HOURS | | | |
|---|----------------------------|---------------------------|-----------------------------|
| (POSITION CATEGORY) NON-FOOD SAFETY INSPECTION HOURS | | | |
| <p>As previously noted, the primary responsibility of the (POSITION CATEGORY) is to conduct food safety regulatory inspections in retail food establishments; however, (POSITION CATEGORY) are responsible for regulating other (non-food safety) areas of Environmental Health throughout the year. Position Description and Supporting Information:</p> | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Non-Food Safety Assignment/Activity | Activities Per Year | Hours Per Activity | Total Activity Hours |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| Non-Food Safety Assignment/Activity Hour Total | | | 0 |

**Standard 8: Staffing Levels
FTE Data Supplement (Non-FS)**

Type of Environmental Health Inspection

Administrative Conferences & Hearings (all)
Pool & Spa Inspections

Geothermal Well Inspections
Hotel Inspections
Marina Inspections
Personal Grooming Establishment Inspections

Wholesale food inspections
Dairy farm inspections
Milk plant inspections
Department of Corrections inspections
Tanning inspections
Body Art inspections
Hazardous waste inspections
Air quality inspections
Solid waste inspections
Land planning
Health fraud inspection
Consumer product safety inspection

Position Category

FSIO
Trainer
Supervisor
Manager

**Standard 8: Staffing Levels
FTE Data Supplement Summary**

| FOOD SAFETY INSPECTION HOURS PER YEAR | | | |
|---|-------------------------------------|----------------------------|--|
| Position Category | Food Safety Inspection Hours | Number of Employees | Position Category Food Safety Inspection Hour Total |
| | 0 | | 0 |
| | 0 | | 0 |
| | 0 | | 0 |
| Food Safety Inspection Hour Total | | | 0 |
| Non-Food Safety Inspection Hour Total | | | 0 |
| Annual Food Safety Inspection Hour Total | | | 0 |
| Total FTE Provided | | | 0.0 |

Standard 8: Staffing Levels
FTE Data Supplement Summary

Position Category

FSIO

Trainer

Supervisor

Manager

Type of Food Safety Inspection

- Routine Inspections
- Re-inspections
- Complaint Investigations
- Outbreak Investigations
- Compliance Follow-up Inspections
- Risk assessment Reviews
- Process Reviews
- Variance Process Reviews
- Foodborne Illness Complaint Response
- Final Construction Inspections
- Onsite Training
- Temporary Event Inspections
- Mobile Unit Inspections

| INSPECTION TO FTE RATIO | |
|---|----------------|
| Table Notes: In accordance with Standard 8 Self-Assessment Guidance provided in the January 2011 version of the Program Standards, the Inspection-to-FTE Ratio must fall between 280 and 320. | |
| Total Annual Number of Food Safety Inspections | 0 |
| Total FTE Provided | 0.0 |
| Inspection to FTE Ratio | #DIV/0! |

| DEFINITIONS | |
|--|---|
| Food Safety Inspection Officer (FSIO) | This term describes the position category for the inspection staff in a food safety inspection program. In this workbook application, FSIO does not include trainers, supervisors, or managers. However, the agency is able to customize all position category titles to match their agency's terminology. |
| Productivity Adjustment | (x) hours per year per EHS as established by the (AGENCY). The Productivity Adjustment includes items listed in the Guide to Self Assess for Standard 8. These items include, but are not limited to administrative tasks (in-office paperwork and reports, phone calls, emails, Outlook calendar updates), inspection travel time, training time for the inspector, and required meetings. These factors may be defined by the AGENCY. Some jurisdictions may also exclude the time allotted for lunch and work breaks. Most jurisdictions of moderate size will have a personnel department, a human resource department, or a budgeting department that has calculated the average administrative overhead time for each position category or perhaps has established an FTE conversion factor. This may be some of the documentation that the jurisdiction supplies as source documentation. |
| Personal Development Time | (x) hours per year per EHS as established by the (AGENCY). The personal development time includes, but is not limited to continuing education, maintaining professional credentials, and required agency trainings and orientations. |
| Productive Annual FTE Hours Per Year (FTE Conversion Factor): Agency Staff | The Annual FTE Hours Per Year for Local Inspector less the productivity rate hours and personal development time hours. |
| Agency Holiday Hours Per Year | (x) hours per year per EHS as established by the (AGENCY). |
| Agency Vacation Leave Hours Per Year | (X) hours used in the FTE Data calculation represents an average of the hours of vacation leave earned among all EHS at (AGENCY). (Vacation leave hours earned amongst inspection staff may vary depending on years of service) |
| Agency Sick Leave Hours Per Year | (X) hours per year (use or lose) as established by (AGENCY) |
| Agency Family-Personal Leave Hours Per Year | (X) hours per year (use or lose) as established by (AGENCY) |
| Position Category | Only the personnel who have direct time for conducting inspections should be included in the position categories. Time for support and administrative personnel may not be included. Clerical support persons and administrators generally do not perform field work, and it is not appropriate to include portions of their time here. While they contribute to and are very important to the effective functioning of the "program," they do not add to the inspection capacity. As an example, however, if a supervisor functions as a working supervisor, i.e., he/she performs some amount of inspectional work or conducts compliance follow-up inspections, conducts formal or informal hearings, etc., then that portion of time spent on field work should be counted as inspectional personnel time. The portion of their time spent preparing or reviewing reports and performing administrative tasks, however, should not be counted. The Standard requirement is intended to establish a workload ratio for personnel conducting field work directly related to the inspectional tasks. |

2012

**STANDARD 8 STAFFING LEVEL
ASSESSMENT WORKBOOK;
INSTRUCTION GUIDE**

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Purpose: This information is being provided to assist with the application and use of the Standard 8 Staffing Level Assessment Workbook.

Overview: The *Standard 8 Staffing Level Assessment Workbook* was created with the intent of assisting enrolled jurisdictions in calculating their agency's Inspection to Full Time Equivalent (FTE) ratio. An agency enrolled in the *Voluntary National Retail Food Regulatory Program Standards*, will assess their program's staffing levels as part of *Standard 8, Program Support and Resources*. In addition to the contents of Standard 8, a *Self Assessment and Audit Disk* is provided to jurisdictions which contain a *Guide to Audit, Guide to Self Assess, and Self Assess and Audit Form*. While the *Guide to Self Assess* for Standard 8 provides additional direction and examples on assessing staffing levels, the *Standard 8 Staffing Level Assessment Workbook* provides the ability to enter information into an Excel format. The workbook allows a jurisdiction to customize the workbook to their needs while providing a structured framework for assessing staffing levels. Once staffing levels are assessed using the workbook, the data are easily accessible for analysis, maintenance, and revision. Each of these resources for Standard 8 supports each other and should be utilized as a combined resource rather than a stand alone application.

The format of the workbook was designed to maintain the staffing level information in a manner that could be easily edited and printed without inadvertently affecting formulas and calculations. Each worksheet within the workbook has the view set to *Page Layout* to maintain the visual aspect of how the information will print. When viewing a worksheet, the primary print sheet displays while the secondary print sheet is located to the right, the tertiary print sheet is below the primary print sheet, and the final print sheet is below the secondary print sheet. The information provided in the worksheets is limited to the primary and secondary print sheet; however, agencies may utilize the other print sheet areas for customized application information. As for references to the information in a worksheet throughout this instruction guide, the terms primary print sheet and secondary print sheet are used.

Several worksheets have drop selections for several cells on the primary print sheet which are populated from customized lists on the secondary print sheets. To maintain the functionality of this aspect on each worksheet, the location of the customized lists should not be altered. An agency may customize the references in the prepopulated lists by editing the information in each cell of the list directly. To view the drop selections for a particular cell on the primary print sheet simply select that cell by clicking in the cell and a down arrow appears to the right of the cell. Click on the down arrow to view the selections.

Additionally, several worksheets have tables for calculating activity time for Food Safety Inspection Officers (FSIOs). The workbook was designed for an agency to enter the information once for FSIOs versus entering information for each individual. Thus the approach to utilizing these tables is to enter values that are the best estimate or average for all FSIOs. The same would apply for the additional tables for trainers, supervisors, and managers if an agency has multiple positions in these categories. Given the nature of the calculations, utilizing the best estimate or average approach will give agencies a valuable measure. However, if an agency has a large number of staff, staff who is diversified in their program assignments, or other confounding factors, they have the ability to modify the worksheets or tables within the worksheet to fit their needs by copying and utilizing multiple worksheets, tables, or other applications provided. Since each worksheet applies a different logic and compensates for different elements, it is recommended an agency apply information to all of the worksheets before making any modifications to the workbook. It is possible that what is identified as a needed modification in one worksheet may be addressed in an application in another worksheet.

Finally, it is important to note that any modifications to the worksheets should occur on the primary print sheet and not the secondary print sheet to protect populated selections. Also important to note is that any modifications of tables may affect the populated calculations or selections. It is recommended that modifications to the workbook be evaluated and applied by the agency's personnel who are trained and have a high level of expertise in Excel applications. Having a master copy of the workbook to refer back to prior to making modifications is highly recommended. The intent of this workbook was to give a framework for staffing level assessment utilizing an Excel workbook and be able to be customized to fit any agency's needs.

Assessment Workbook Components and Guidance:

STEP 1: FTE Conversion Factor Worksheet:

Purpose: Determine Full-Time Equivalents (FTE): the number of productive hours contributed by one person working full-time for one year.

The *Guide to Self Assess* for Standard 8 gives us the following guidance pertaining to this worksheet:

Factors to Consider:

- If three people devote 1/3 of their productive time to food inspections for one year, that is one full-time equivalent devoted to food inspections. Organizations use a variety of formulas to arrive at the productive hours of one full-time employee. The number of productive hours that represent an FTE can range from 1100 to 1500 hours depending upon the average number of hours allotted for leave, training, and administrative time. For convenience sake, let us call the number of productive work hours the FTE conversion factor.

Note: The FTE Conversion Factor is cell E13 on this worksheet. This FTE Conversion Factor is automatically applied on the FTE Data Supplement Sheet (cell C1).

- Let us look at what should and should not be included in the calculation to determine the total productive work hours for one individual or the FTE conversion factor. Assuming a forty-hour work week and fifty-two weeks in a year, there are 2080 total work hours available to a person in a year. However, not all of those hours will be spent in producing a work product. The following activities should not be included as part of the conversion factor:

1. Holiday time,
2. Vacation time,
3. Sick leave time,
4. Travel time to establishments,
5. Training time for the inspector, or
6. Time spent in the office completing paperwork or returning phone calls.

Data Entry: Examples 1-3 above are represented by cells E6-E9 on this worksheet. If any of these options do not apply then a '0' should be entered into the cell. Cell E11, Productivity Adjustment, may be used to factor in travel time and office time. Additionally cell E12, Personal Development Time, may be used to factor in training time for the FSIO (See definition worksheet for explanations of Productivity Adjustment and Personal Development Time).

- Some jurisdictions may also exclude the time allotted for lunch and work breaks. Most jurisdictions of moderate size will have a personnel department, a human resource department, or a budgeting department that has calculated the average administrative overhead time for each position category or perhaps has established an FTE conversion factor. This may be some of the documentation that the jurisdiction supplies as source documentation.

Note: If a jurisdiction wishes to factor in these elements, they may do so as part of the Productivity Adjustment, cell E11.

STEP 2: FTE Data Supplement Worksheet:

Purpose: Determine Food Safety Inspection Hours for each program position: the number of annual productive food safety inspection hours contributed by each position category working in the inspection program.

The *Guide to Self Assess* for Standard 8 gives us the following guidance pertaining to this worksheet:

- Only the time for personnel conducting inspections should be included in the ratio figure. Time for support and administrative personnel may not be included. Clerical support persons and administrators generally do not perform field work, and it is not appropriate to include portions of their time here. While they contribute to and are very important to the effective functioning of the “program,” they do not add to the inspection capacity. As an example, however, if a supervisor functions as a working supervisor, i.e., he/she performs some amount of inspectional work or conducts compliance follow-up inspections, conducts formal or informal hearings, etc., then that portion of time spent on field work should be counted as inspectional personnel time. The portion of their time spent preparing or reviewing reports and performing administrative tasks, however, should not be counted. The Standard requirement is intended to establish a workload ratio for personnel conducting field work directly related to the inspectional tasks.

Note: The FTE Conversion Factor is automatically populated from the previous sheet and is cell C1 on this worksheet.

Data Entry:

1. *First an agency defines the various positions that contribute to the activities included in the staffing level assessment. An example of positions is provided on the secondary print sheet in cells I20-23. Each agency may customize these examples to reflect the position terminology within their agency. These cells populate selection items in cells A2, A14, and A22 on the primary print sheet.*

- 2. Second an agency defines the various assignments/activities each position executes which would be included in the staffing level assessment. An example of assignments/activities is provided on the secondary print sheet in cells I2-16. These examples mirror those that are provided in the Standard 8 language. Each agency may customize these examples to reflect the position terminology within their agency. These cells populate selection items in cells A4-11, A16-19, and A24-26 in the primary print sheet.**
- 3. Third the agency would select the positions and assignments utilizing the drop selections for the referenced cells above on the primary print sheet. The worksheet is formatted to select and enter activities for your primary inspection staff in the first table (i.e. inspectors) and various supporting staff in the tables below (i.e. trainers, supervisors, managers).**

 - a. Since FSIOs typically execute more activities and productive annual hours contributable to the staffing level assessment than other positions, the first table is reserved for this position category and allows for a variable calculation based on percent of work time contributable to an activity or productive annual hours.**
 - b. Since other food inspection program staff such as trainers, supervisors, and managers may also perform activities contributable to the staffing level assessment, additional tables are provided to allow for inclusion of productive annual hours for each activity.**
- 4. Fourth the agency would enter the appropriate values for the first table (inspector position) in cells B4-B11 or C4-C11 based on the following:**

 - a. An agency may have FSIOs contribute a percentage of their time in the various activities in a program. For this application, an agency can enter the percentage contributable for each activity in cells B4-B11 in the primary print sheet. Once information for each cell is entered, the Productive Annual Hours for each activity will automatically be populated in the subsequent cell to the right. This is populated from that cell's established formula using the information from the percentage cell and the FTE Conversion Factor.**
 - b. An agency may not apply percentages for each activity and apply set hours for each activity. For this application, delete the formulas from cells C4-C11 and enter the total Productive Annual Hours for each activity. Please note that the formula for cell C12, Food Safety Inspection Hour Total, should not be deleted as this cell populates information in cell B3 on the FTE Data Supplement Summary worksheet.**
- 5. Fifth the agency would enter the Productive Annual Hours for each activity in cells B/C16-B/C19 and B/C24-B/C26 in the subsequent tables. Cells B/C20 and B/C27 populate information in cells B4 and B5 on the FTE Data Supplement Summary worksheet.**
- 6. This worksheet also allows for an agency to provide the position description and supporting information to the right of each table. This is useful for explaining agency specific terminology, activity specifics, position specifics, etc.**

STEP 3: FTE Data Supplement (Non-FS) Worksheet:

Purpose: Determine Non-Food Safety Inspection Hours for each program position: the number of annual non-food safety inspection hours contributed by each position category which should not be included in the staffing level assessment.

Note: The previous FTE Data Supplement worksheet utilizes the FTE Conversion Factor in the calculations for productive annual hours in the first table (FSIO category position). Since agencies may not have FSIOs who are 100% dedicated to the food inspection program, the percentage total in cells B4-B11 may not add up to 100% as a percentage of that position's time may apply to other programs. Thus the FTE Data Supplement (Non-FS) worksheet is provided to factor these non-food safety inspection hours out of the food safety inspection hours total, cell C12, calculated on the FTE Data Supplement worksheet.

Note: If FSIOs in a food inspection program have 100% of their FTE dedicated to activities contributable to the staffing level assessment, the FTE Data Supplement (Non-FS) worksheet does not have to be addressed or applied. This is also true for any trainer, supervisor, or manager positions factored in the spreadsheet as their activities were applied as hours not percentages in the FTE Data Supplement worksheet.

Note: If an agency finds that the applications in the FTE Data Supplement (Non-FS) worksheet are need for multiple positions, the table can be copied and modified to accommodate needs and multiple positions. The data validation logic which populates the Position Category, cell A/B/C2, and the Non-Food Safety Assignment/Activity, cells A9-A14, should carry through their logic as long as the tables are copied onto the same worksheet. However, the if multiple copies of this worksheet are applied, the calculation reference on the FTE Data Supplement Summary worksheet in cell D7 would have to be modified to include all additional copies of the FTE Data Supplement (Non-FS) worksheet.

Data Entry:

- 1. First an agency defines the various positions that contribute to the activities included in the staffing level assessment. An example of positions is provided on the secondary print sheet in cells H24-27. These should match the position descriptions utilized on previous worksheets. These cells populate selection items in cell A/B/C2 on the primary print sheet.*
- 2. Second an agency defines the various assignments/activities each position executes which would be included in the staffing level assessment. An example of assignments/activities is provided on the secondary print sheet in cells H2-19. Each agency may customize these examples to reflect the position terminology within their agency. These cells populate selection items in cells A9-14 in the primary print sheet.*
- 3. Third the agency would select the positions and assignments utilizing the drop selections for the referenced cells above on the primary print sheet.*

4. *Fourth the agency would enter the appropriate values for Activities Per Year, cells B9-B14, and Hours Per Year, cells C9-C14 for each assignment/activity. An agency may not have the need to enter the activities per year but rather apply a total hours per activity which represents hours spent on that activity over a year. For this application, an agency will enter a "1" for number of Activities Per Year and enter their hours per activity. Once all values are entered, the Total Activity Hours will be populated in cells D9-D14. These Total Activity Hours will populate the Non-Food Safety Assignment/Activity Hour Total in cell D15. Cell D15 populates information in cell D7 of the FTE Data Supplement Summary worksheet.*
5. *This worksheet also allows for an agency to provide supporting information and explanation in the cell under the position category in the table. This is useful for explaining agency specific terminology, activity specifics, position specifics, etc.*

STEP 4: FTE Data Supplement Summary Worksheet:

Purpose: Determine Food Safety Inspection Hours for all program positions: the number of annual food safety inspection hours contributed by all position categories which should not be included in the staffing level assessment.

Note: The previous FTE Data Supplement and FTE Data Supplement (Non-FS) worksheets populate cells B3-B5 and D7 in the FTE Data Supplement worksheet.

Data Entry:

1. *First an agency defines the various positions that contribute to the activities included in the staffing level assessment. An example of positions is provided on the secondary print sheet in cells H2-H5. These should match the position descriptions utilized on previous worksheets. These cells populate selection items in cell A3-A5 on the primary print sheet.*
2. *Second an agency enters the number of staff for each position category in cells C3-C5. Once all values are entered, the Position Category Food Safety Inspection Hour Total will populate in cells D3-D5. These will populate the Food Safety Inspection Hour Total in cell D6. Cell D8, Annual Food Safety Inspection Hour Total, populates utilizing the information from cells D6 and D7. Cell D9, Total FTE Provided populates utilizing the information from cell D8 and the FTE Conversion Factor, cell E13, of the FTE Conversion Factor worksheet. Cell D9, Total FTE Provided populates information in cell B4 of the Inspection to FTE Ratio worksheet.*

STEP 5: Inspection Data Worksheet:

Purpose: Determine the type and number of food safety inspection activities for the program: the type and number of annual food safety inspection activities contributing to the staffing level assessment as defined in Standard 8.

The *Guide to Self Assess* for Standard 8 gives us the following guidance pertaining to this worksheet:

Determine Number of Inspections:

- For the purposes of this standard, “inspections” are defined as routine inspections, re-inspections, complaint investigations, outbreak investigations, compliance follow-up inspections, risk assessment reviews, process reviews, variance process reviews, foodborne illness complaint response, final construction inspections and other direct establishment contact time such as on-site training that is performed by the field inspection staff. If the same personnel who conduct inspections of the fixed-site establishments also conduct the inspections of temporary events and mobile units, then these inspection events should also be counted as “inspections” for purposes of calculating the workload ratio.
- Any calculation that uses only routine inspection counts would be suspect unless unusual circumstances exist or unusual justifications that can be provided. Special justifications or unusual circumstances must be evaluated on a case-by-case basis.
- Jurisdictions may have an automated or manual tracking system for counting the number of inspections/contacts or the number of hours spent on inspectional activities. If the system measures total hours only, then there would need to be estimates or formulas for the average inspection time in order to arrive at a number of inspections. A jurisdiction might also arrive at the number of inspections by calculating the number of permits in various categories and multiplying the number of permits by the number of required or average visits to each of those facilities categories.
- Whatever the form or format of the data collected, the jurisdiction must eventually arrive at an estimate of the number of on-site contacts made in a year.

Note: This worksheet is listed here in the steps of the process to keep with the flow of the worksheets and information which feeds into each other, however, this worksheet could be completed at any point in the process. An agency may find that completing this worksheet first helps to understand the data that should be included in previous worksheets.

Data Entry:

1. *First an agency defines the various types of food safety inspections that contribute to the staffing level assessment as defined in Standard 8. An example of positions is provided on the secondary print sheet in cells D2-D14. These examples mirror those that are provided in the Standard 8 language and the Guide to Self Assess. These cells populate selection items in cell A4-A16 on the primary print sheet.*
2. *Second an agency enters the number of food safety inspections in cells B4-B16. Once all values are entered, the Total Annual Number of Food Safety Inspections will populate in cell B17. This cell will populate the Total Annual Number of Food Safety Inspections in cell B3 on the Inspection to FTE Ratio worksheet.*

STEP 6: Inspection-FTE Ratio Worksheet:**Purpose: Determine the annual number of food safety inspection activities per FTE in the program:**

the number of annual food safety inspection activities per FTE dedicated to the program as defined in Standard 8.

Note: The tab for this worksheet is highlighted to indicate that the information needed to assess if an agency meets the staffing level requirement of Standard 8 is found on this worksheet. Information for this worksheet is populated from previous worksheets and provides the Inspection to FTE Ratio in cell B5. As noted in the Table Notes field on this worksheet, the Inspection to FTE Ratio should fall between 280 and 320 to meet the staffing level section of Standard 8. Values above 320 would indicate that the program is lacking adequate FTE to meet this part of the Standard.

ADDITIONAL INFORMATION: Definitions Worksheet:

Purpose: Provide definitions behind references and titles in the various worksheets: While this instruction guide provides detailed information on the steps and elements of the workbook applications, the definitions worksheet provides some common references for quick reference and to assist in accessible clarification when working with the workbook.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 039
Issue: 2012 II-019**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Amendment to Standard 9 Program Assessment

Issue you would like the Conference to consider:

Amend Voluntary National Retail Food Regulatory Program Standards, Program Standard No. 9 to add an additional requirement to develop targeted intervention strategy(s) designed to address the occurrence of the risk factors identified in the jurisdiction's Risk Factor Study. And, those intervention strategies are implemented and the effectiveness of each strategy is evaluated by subsequent Risk Factor Studies or other similar tool. Additional grammatical corrections are also recommended.

Public Health Significance:

Currently, Standard No. 9 requires jurisdictions to conduct a Risk Factor Study and analysis of the resulting data to track trends over time related to the occurrence of risk factors. What is currently lacking is a requirement for jurisdictions to attempt to improve the compliance rates for the risk factors identified as having a high out of compliance rate in their Risk Factor Study. Although one of the objectives of the Program Standards is to track the results of regulatory efforts over time, as currently written, it is possible that a jurisdiction could conduct repeated Risk Factor Studies without ever implementing any activities designed to reduce the occurrence of foodborne illness risk factors and still meet Standard No. 9 by simply collecting the data.

The proposed additional language as submitted by the Program Standards Committee provides needed grammatical corrections, but more importantly, would ensure that enrolled jurisdictions develop a targeted intervention strategy or strategies designed to address the occurrence of the risk factors identified in their Risk Factor Study, that these strategies are implemented, and the effectiveness of each strategy is evaluated by subsequent Risk Factor Studies or other similar tools.

The proposed language does not require that interventions result in a reduction in the occurrence of the risk factors, simply that it is attempted and measured. It encourages innovative approaches by suggesting jurisdictions consider various types of interventions such as code changes, educational and training activities, enforcement and compliance strategies, etc. The purpose of the proposed intervention strategy is to attempt to effect improvement in reducing priority risk factor occurrences, between measurement intervals and to assess the strategy's effectiveness.

Recommended Solution: The Conference recommends...:

a letter be sent to the FDA requesting an amendment to the Voluntary National Retail Food Regulatory Program Standards, Standard 9 Program Assessment, to add requirements to ensure that enrolled jurisdictions develop a targeted intervention strategy or strategies designed to address the occurrence of the risk factors identified in their Risk Factor Study, that these strategies are implemented, and the effectiveness of each strategy is evaluated by subsequent Risk Factor Studies or other similar tools.

- The specific revisions to Standard 9 are amended to read as follows:

(NOTE: complete Standard 9 document with tracked changes is attached to Issue titled: Report - Program Standards Committee)

Requirement Summary, (pages 9-2 and 9-3):

To be an active participant in the *Voluntary National Retail Food Regulatory Program Standards* and to be listed on the FDA Roll of Participating Jurisdictions, a jurisdiction must ~~assure~~ensure that:

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must ~~assure~~ensure that:

3. A targeted intervention strategy(s) designed to address the occurrence of the risk factors(s) identified in their Risk Factor Study is implemented and the effectiveness of such strategy(s) is evaluated by subsequent Risk Factor Studies or other similar tools.

Achieving Standard 9, (page 9-5 thru 9-7):

A. 2. To evaluate trends over time to determine whether progress is being made toward reducing the occurrence of foodborne illness risk factors. Studies designed to measure trends require analysis of data over a period of time, and no single point in time can be used to derive trend conclusions.

E. A jurisdiction must ensure that a targeted intervention strategy designed to address the occurrence of the risk factor(s) identified in their Risk Factor Study (Survey) is implemented and the effectiveness is evaluated by subsequent Risk Factor Studies (Surveys) or other similar tools.

Jurisdictions are encouraged to incorporate various types of interventions such as code changes, educational and training activities, enforcement and compliance strategies, etc. The purpose of the intervention strategy is to attempt to affect improvement in reducing priority risk factor(s) occurrence rates between measurement intervals and assess their effectiveness.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 040
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| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Standard No. 8 Assessment Workbook and Instruction Guide

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Program Standards Committee (PSC) is recommending that new resources developed by the PSC be approved and included on the *2011 Self Assess and Audit Disk* to compliment the *Guide to Self Assess* as a resource for assessing staffing levels as defined in Standard No. 8.

Public Health Significance:

The Voluntary National Retail Food Regulatory Program Standards were developed to serve as a guide for regulatory retail food program managers in the design, management, and execution of a retail food program in our continued goal of reducing foodborne illness risk factors and promoting active managerial control practices sustaining long term compliance. Standard No. 8 applies to Program Support and Resources which includes a section on assessing adequate staffing levels.

Standard No. 8 recommends "a staffing level of one full-time equivalent (FTE) devoted to food for every 280 - 320 inspections performed". While the committee believes that this Standard as it applies to staffing level is unachievable for most jurisdictions and does not provide a realistic measurement that can be applied across various retail food regulatory programs across the nation, the majority agreed that if the PSC focused on a resource to assist in assessing the staffing level that valuable information pertaining to the challenges in meeting this Standard could be identified, which in the future could lead to a more attainable staffing level load.

Over the past two years, the PSC developed a new staffing level assessment resource through discussions and research to compliment the *Guide to Self Assess* for Standard No. 8. The PSC also developed a supporting instruction guide and recommends it also be made available to enrolled jurisdictions.

Recommended Solution: The Conference recommends...:

- 1) Approval of the following documents (*included as attachments to the Issue titled: Report - Program Standards Committee*):
 - Standard No. 8 - Assessment Workbook
 - Standard No. 8 - Assessment Workbook Instruction Guide

2) That a letter be sent to the FDA requesting that both resource documents be made available to enrolled jurisdictions on the FDA web site and on upcoming versions of the *Self Assess and Audit Disk*.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 041
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| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Re-create Program Standards Committee

Issue you would like the Conference to consider:

The Conference of Food Protection (CFP) Program Standards Committee (PSC) requests that the PSC be re-created to serve as a stakeholder group to provide input to the FDA internal working group and continued assessment of the Standards for recommending changes and improvements.

Public Health Significance:

The Voluntary National Retail Food Regulatory Program Standards were developed to serve as a guide for regulatory retail food program managers in the design, management, and execution of a retail food program in our continued goal of reducing foodborne illness risk factors and promoting active managerial control practices sustaining long term compliance.

Recommended Solution: The Conference recommends...:

The Program Standards Committee be re-created following the 2012 CFP Biennial Meeting with the following charges:

1. Serve as a stakeholder group to provide input to an FDA internal working group to:
 - a. Collaborate on the development of an Administrative Procedures Document to support the Voluntary National Retail Food Regulatory Program Standards; and
 - b. Recommend additional changes or improvements to the Program Standards.
2. Explore, assess, and reevaluate Staffing Levels language within Standard No. 8 and recommended any changes.
3. Formulate resolutions to issues brought before the committee and report back at the 2014 CFP Biennial Meeting.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 071
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| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Administrative Procedures for Retail Food Program Standards

Issue you would like the Conference to consider:

Jurisdictions that use the Voluntary National Retail Food Regulatory Program Standards would benefit from the availability of a document that describes the processes used by FDA to administer the Program Standards and the processes that FDA expects jurisdictions to follow to "enroll in" and "remain" an active participant. As an addendum to the Program Standards that is maintained by FDA, such a document would serve to consolidate items currently described in Program Standard No. 9 and elsewhere in supporting materials and on websites maintained by FDA.

Currently Standard No. 9 of the Voluntary National Retail Food Regulatory Program Standards contains many of the procedures that jurisdictions are expected to follow if they are to be considered "an active participant" in the Program Standards. Among other things, these procedures address the required frequency for completion of self-assessments and verification audits and how jurisdictions are expected to report progress to FDA for inclusion on FDA Listing of Enrolled Jurisdictions. FDA believes these broad "standards implementation" requirements should be moved from Standard No. 9 to the new addendum, so that Standard No. 9 requirements contain only requirements directly related to a jurisdiction's assessment of their own program.

Public Health Significance:

Currently Standard No. 9 requires jurisdictions to assess their programs by conducting a Risk Factor Study and analysis of the resulting data to track trends over time related to the occurrence of risk factors. The intent of this Standard is for enrolled jurisdictions to track and assess their program outcomes as demonstrated by the occurrence of foodborne illness risk factors over time and to develop and implement strategies to improve food safety in their jurisdiction.

In addition, Standard No. 9 includes administrative requirements related to the self-assessment and auditing of a program against the full set of Program Standards and establishes what must be reported to FDA in order for an agency to be recognized as an "active participant" in the Program Standards.

FDA believes such administrative requirements do not belong in a specific Program Standard and instead belong in an administrative procedures document that more fully

describes the roles and expectations of jurisdictions formally participating in the Program Standards and of FDA in administering the Program Standards. Having a separate procedures document that describes all that is required for active participation and recognition by FDA should make it easier for stakeholders to locate and understand all the procedures related to Program Standards participation. Further, having a separate administrative procedures document should provide FDA more flexibility to improve the ways it implements the Program Standards without changing a recognized Program Standard itself.

Among the items that FDA believes would be best moved to a separate administrative document are those currently in Program Standard No 9, related to:

- the frequency of self-assessments and audits;
- procedures for conducting self-assessments and audits;
- the qualifications of auditors; and
- the submission of forms to FDA for inclusion on the Listing of Enrolled Jurisdictions.

Also appropriate for inclusion in such a document are administrative procedures that are not contained in Standard No. 9 but that would address:

- Program Standards enrollment eligibility;
- Procedures for maintaining FDA's Listing of Enrolled Jurisdictions and other means of recognizing participating jurisdictions;
- Procedures for obtaining interpretations of Program Standards through FDA Program Standards Clearinghouse;
- Procedures for resolving disputes concerning the results of non-conforming verification audits.

Recommended Solution: The Conference recommends...:

that a letter be sent to FDA requesting that:

1. FDA develop and maintain an addendum to the Voluntary National Retail Food Regulatory Program Standards that describes the administrative processes used by FDA to implement the Program Standards and by jurisdictions that choose to be active participants in the Program Standards, and that the addendum address how, and with what frequency, to:

- Enroll jurisdictions in the Program Standards;
- Measure and report progress made by jurisdictions in assessing and auditing their programs for conformance with the Voluntary Retail Food Regulatory Program Standards 1 through 9 (including submission of specific forms);
- Recognize those jurisdictions meeting the Standards, including how jurisdictions are listed on the FDA website;
- Interpret the Standards and resolve disputes concerning the results of non-conforming audits; and
- Otherwise successfully implement the Program Standards.

2. Upon availability of an administrative procedures document, FDA will amend Program Standard 9, as shown in Attachments A and B, to remove language that describes the administrative processes used by jurisdictions to demonstrate implementation of the Program Standards but that are not requirements for conformance with Program Standard 9-Program Assessment and to make necessary editorial changes, as needed;

3. During development of the administrative procedures document, FDA consult the CFP Program Standards Committee for input on its content and format and on the placement of such a document as an addendum to the Standards.

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Attachments:

- "Attachment A-EXAMPLE Proposed amendments to Standard 9 for Admin Procedures"
- "Attachment B-CLEAN COPY EXAMPLE Proposed amendments to Standard 9 - Admin"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

Attachment A – EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

EXAMPLE of proposed text changes recommended for removal upon inclusion in Administrative Procedures Addendum.

STANDARD 9
PROGRAM ASSESSMENT

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Attachment A – EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

Standard 9

Program Assessment

This Standard applies to the process used to measure the success of the enrolled jurisdiction's program in reducing the occurrence of foodborne illness risk factors to enhance food safety and public health in the community. ~~jurisdictions in meeting the *Voluntary National Retail Food Regulatory Program Standards 1 through 9* (hereafter referred to as the National Standards) and their progress in reducing the occurrence of foodborne illness risk factors. Additionally, it applies to the requirements for recognition by the Food and Drug Administration of those jurisdictions meeting the National Standards.~~

Requirement Summary

To be an active participant in the ~~*Voluntary National Retail Food Regulatory Program Standards*~~ and to be listed on the FDA Roll of Participating Jurisdictions, a jurisdiction Program management must ensure assure that:

- ~~1. The program manager, or a designated representative, conducts an initial SELF-ASSESSMENT against the criteria in each of the nine (9) National Standards within 12 months following the date of enrollment and every 60 months thereafter; and,~~
- ~~2. The program manager, or a designated representative, requests a VERIFICATION AUDIT within 3 months following any SELF-ASSESSMENT in which one or more Standards is claimed as met. The VERIFICATION AUDIT is to be completed within 6 months of that SELF-ASSESSMENT; and,~~
- ~~3. Reporting, using the *FDA National Registry Report and Release Record and Agreement-Permission to Publish in National Registry* (FDA Forms 3519 and 3520), will be completed and submitted to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT OF a SELF-ASSESSMENT update and following any VERIFICATION AUDIT.~~

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must assure that:

- ~~1.~~ 1. RISK FACTOR STUDY on the occurrence of the five foodborne illness risk factors is conducted and repeated at least once every 60 months to measure trends in the occurrence of the RISK FACTORS risk factors; and,
- ~~2.~~ 2. An analysis is made of the data collected and a report on the outcomes and conclusions of the RISK FACTOR STUDY is written.

Description of Requirement

To be an active participant in the National Standards and to be listed on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure that the following procedures for SELF-ASSESSMENTS, VERIFICATION AUDITS, and reporting are completed:

Self-Assessment:

1. The program manager, or a designated representative, conducts an initial SELF-ASSESSMENT against the criteria in each of the nine (9) National Standards within 12 months of the date of enrollment and every 60 months thereafter:

If it is determined that a Standard has been met, at that point the Appendix documents (hereinafter referred to as the worksheets) for that Standard(s) are to be completed in preparation of the VERIFICATION AUDIT.

For any Standard(s) which are not met, it is recommended that any deficiencies in meeting the Standards criteria be identified in order to meet that Standard in the future. It is further recommended that priorities, action plans, and target dates be established to facilitate continuous improvement in the jurisdiction's program.

The National Standards Edition to be used when completing the required 60-month SELF-ASSESSMENT is the most recent version of the *Voluntary National Retail Food Regulatory Program Standards* published on the FDA web site at <http://www.fda.gov>¹. Once at the FDA main web page, click on "Food," then "Food Safety," then "Retail Food Protection" and click on "Program Standards."

2. For any Standard a jurisdiction claims as met:
 - a. The compliance status of the jurisdiction's program as measured against that Standard(s) is documented by completing the Appendix documents (worksheets) or documents containing equivalent summary information for that Standard; and,
 - b. QUALITY RECORDS specified as requirements in each of the National Standards are established, identified, and maintained. The QUALITY RECORDS must be maintained in such a manner that an AUDITOR can be provided information necessary to verify that a Standard's criteria have been met.
3. This complete SELF-ASSESSMENT cycle must be repeated at a minimum every 60 months. However, a jurisdiction may, and is encouraged to complete a SELF-ASSESSMENT at any time during the 60-month interval to reflect the most current information on its program accomplishments as reflected by comparison against one or more of the individual Standards. A SELF-ASSESSMENT can be made using the edition of the National Standards effective at its last required SELF-ASSESSMENT or a more recent edition of the National Standards, at the jurisdiction's discretion.
4. Following a SELF-ASSESSMENT UPDATE, a jurisdiction completes the worksheets or equivalent forms to document compliance with any additional National Standard(s) met since the last required SELF-ASSESSMENT, establishes the QUALITY RECORDS, and forwards the *FDA National Registry Report and Release Record*

Attachment A – EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

~~and Agreement-Permission to Publish in National Registry (FDA Forms 3519 and 3520) to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT update.~~

B. Verification Audit

1. ~~The program manager, or a designated representative, shall request a VERIFICATION AUDIT within three (3) months following any SELF-ASSESSMENT OF SELF-ASSESSMENT in which one or more Standard(s) is claimed as met. The VERIFICATION AUDIT is to be completed within six (6) months of that SELF-ASSESSMENT OF SELF-ASSESSMENT UPDATE.~~
2. ~~A complete SELF-ASSESSMENT of all Standards will be completed every 60 months after the initial SELF-ASSESSMENT. At each complete SELF-ASSESSMENT, a VERIFICATION AUDIT is to be conducted for any standard that is being claimed as met only if the Standard has been revised since the last VERIFICATION AUDIT.~~
3. ~~An AUDITOR, as defined in the National Standards, shall complete the VERIFICATION AUDIT. VERIFICATION AUDITS confirm and report on the accuracy of a SELF-ASSESSMENT that claims one or more Standard(s) as met. During the VERIFICATION AUDIT, the auditor will:~~
 - a. ~~Review the QUALITY RECORDS and confirm that the SELF-ASSESSMENT ASSESSMENT accurately reflects the program's compliance status with each criterion for the version of the National Standards that was used when completing the SELF-ASSESSMENT OF a SELF-ASSESSMENT UPDATE; and,~~
 - b. ~~Determine whether the QUALITY RECORDS specified as requirements in each of the National Standards have been established, identified, and maintained. If the quality records for a specific program element provide inadequate information upon which to make a determination of conformance with the Standard or to enable a VERIFICATION AUDIT, that Standard is not met.~~

C. Reporting Requirements for SELF-ASSESSMENTS and VERIFICATION AUDITS

1. ~~Reporting, using the *FDA National Registry Report and Release Record and Agreement-Permission to Publish in National Registry* (FDA Forms 3519 and 3520), shall be completed and submitted to the appropriate FDA Regional Office within 30 days following a SELF-ASSESSMENT OF a SELF-ASSESSMENT update and following any VERIFICATION AUDIT.~~
2. ~~Submission of the *FDA National Registry Report and Release Record and Agreement-Permission to Publish in National Registry* is required following each 60-month SELF-ASSESSMENT regardless of whether any Standard(s) are claimed as met.~~
3. ~~If a jurisdiction wishes to complete a SELF-ASSESSMENT UPDATE with its most current program information, a new *FDA National Registry Report* (FDA Form 3519) and *Release Record and Agreement-Permission to Publish in National Registry* (FDA Form 3520) must be submitted. Any report form submitted is marked to show attainment of all applicable Standards achieved at the time of submission. Dates showing current attainment for each Standard should be recorded on each submission in order to accurately reflect the program's history. Marking all~~

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~~applicable Standards with their most recent attainment dates ensures that accurate information is posted on the FDA List of Enrolled Jurisdictions.~~

- ~~4. The *FDA National Registry Report* (FDA Form 3519) and *Release Record and Agreement - Permission to Publish in National Registry* (FDA Form 3520) is submitted following a VERIFICATION AUDIT. The date of the audit and the date of the version for the Standard that is being audited should be included on the report forms so that information may be added to the FDA List of Enrolled Jurisdictions.~~

Description of Requirement

Achieving Standard 9

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must ensure assure that:

- A. A RISK FACTOR STUDY and report on the occurrence of the five (5) foodborne illness risk factors is completed. A RISK FACTOR STUDY serves two purposes:
 1. To identify risk factors most in need of priority attention in order to develop strategies to reduce their occurrence.
 2. To evaluate trends over time to determine whether progress is being made toward reducing the occurrence of foodborne illness risk factors. Studies designed to measure trends require analysis of data over a period of time, and no single point in time can be used to derive trend conclusions.

- B. A The RISK FACTOR STUDY includes all facility types under regulation by the jurisdiction.

It is recommended that a jurisdiction's first RISK FACTOR STUDY be conducted as soon as possible following its first SELF-ASSESSMENT, before programmatic changes are made. There is value in using the first study to establish a "baseline" against which future performance can be measured. Program improvements and changes may then be reflected in subsequent studies.

- C. The RISK FACTOR STUDY information is to be updated at least once every 60 months ~~five (5) years~~ to measure trends specific to the occurrence of the five (5) foodborne illness risk factors.

The data collection and analysis for the various facility types under regulation by the jurisdiction may occur at various times over the 60 month period, as long as all facility types are included in the 60 month cycle. The 60 month study update is required to maintain achievement of Standard 9. The subsequent studies and reports will determine whether or not there has been a net change in the occurrence of the risk factors.

The nine (9) facility types are:

- Institutions – 1) Hospitals; 2) Nursing Homes; 3) Elementary Schools (K-5)

Attachment A – EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

- Restaurants – 4) Full Service; 5) Fast Food
- Retail Food Stores – 6) Delis; 7) Meat Departments; 8) Seafood Departments; 9) Produce Departments

(See the FDA’s Data Collection Manual for additional information regarding facility types and help with Risk Factor Studies.)

- B. A jurisdiction may use routine inspection data or may ~~conduct~~ use a separate data methodology collection in completing a RISK FACTOR STUDY. A data collection instrument similar to the FDA Model Data Collection Form in the FDA Data Collection Manual ~~in Appendix J~~, using the IN, OUT, NA, and NO convention, is required.

Failure to use this convention skews the data toward either IN compliance or OUT of compliance. The FDA data collection instrument is not intended as an inspection form. However, jurisdictions that have developed an inspection form using the IN, OUT, NA and NO convention may use that inspection form as a survey instrument. ~~Refer to the Data Collection Manual to understand the statistical limitations and restrictions if using an inspection form or a data collection form different from the FDA data collection instrument.~~ If the jurisdiction uses a different form, the data may be difficult to compare with the data from the *FDA National Foodborne Illness Risk Factor Studies* or with data from other jurisdictions. Refer to the Data Collection manual to understand the statistical limitations and restrictions if using an inspection form or a data collection form different from the FDA data collection instrument.

- C. ~~Achievement of Standard 9 is audited using the same procedures and reported using the FDA National Registry Report (FDA Form 3519) and Release Record and Agreement-Permission to Publish in National Registry (FDA Form 3520) in the same manner as achievement of the other eight National Standards as detailed under DESCRIPTION OF REQUIREMENTS in this document for Self-Assessment, Verification Audit, and Reporting.~~

Outcome

The desired outcome of this Standard is to enable managers to measure their program against national criteria and to demonstrate improvement in food safety. The process identifies program elements that may require improvement or be deserving of recognition.

Documentation

The quality records required for this standard include:

- ~~1. The completed Appendices (worksheets) for each Standard and supporting records,~~
2. Survey reports on the occurrence of risk factors and *Food Code* interventions;
3. Survey collection tools or inspection sheets used for data collection; and
4. Documentation that each facility type regulated is surveyed during the 60-month survey cycle.
- ~~5. Verification audit reports,~~
- ~~6. FDA National Registry Report, FDA Form 3519, and~~
- ~~7. Affidavit of Permission to Publish, FDA Form 3520.~~

~~The Standard 9: Program Self-Assessment and Verification Audit Form, included as a file on this disk is designed to document the findings from the self-assessment and the verification audit process this Standard.~~

CLEAN COPY EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

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CLEAN COPY EXAMPLE Proposed amendments to Program Standard 9 recommended for removal upon inclusion in an Administrative Procedures Addendum.

Standard 9

Program Assessment

This Standard applies to the process used to measure the success of the enrolled jurisdiction's program in reducing the occurrence of foodborne illness risk factors to enhance food safety and public health in the community.

Requirement Summary

Program management must ensure that:

1. RISK FACTOR STUDY on the occurrence of the five foodborne illness risk factors is conducted and repeated at least once every 60 months to measure trends in the occurrence of the RISK FACTORS; and,
2. An analysis is made of the data collected and a report on the outcomes and conclusions of the RISK FACTOR STUDY IS WRITTEN.

Description of Requirement

Achieving Standard 9

To achieve the criteria of Standard 9 and claim Standard 9 as met, a jurisdiction must ensure that:

- A. A RISK FACTOR STUDY and report on the occurrence of the five (5) foodborne illness risk factors is completed. A RISK FACTOR STUDY serves two purposes:
 1. To identify risk factors most in need of priority attention in order to develop strategies to reduce their occurrence.
 2. To evaluate trends over time to determine whether progress is being made toward reducing the occurrence of foodborne illness risk factors. Studies designed to measure trends require analysis of data over a period of time, and no single point in time can be used to derive trend conclusions.
- B. The RISK FACTOR STUDY includes all facility types under regulation by the jurisdiction.

It is recommended that a jurisdiction's first RISK FACTOR STUDY be conducted as soon as possible following its first SELF-ASSESSMENT, before programmatic changes are made. There is value in using the first study to establish a "baseline" against which future performance can be measured. Program improvements and changes may then be reflected in subsequent studies.

- C. The RISK FACTOR STUDY information is to be updated at least once every 60 months to measure trends specific to the occurrence of the five (5) foodborne illness risk factors.

The data collection and analysis for the various facility types under regulation by the jurisdiction may occur at various times over the 60 month period, as long as all facility types are included in the 60 month cycle. The 60 month study update is required to maintain achievement of Standard 9. The subsequent studies and reports will determine whether or not there has been a net change in the occurrence of the risk factors.

The nine (9) facility types are:

- Institutions – 1) Hospitals; 2) Nursing Homes; 3) Elementary Schools (K-5)
- Restaurants – 4) Full Service; 5) Fast Food
- Retail Food Stores – 6) Delis; 7) Meat Departments; 8) Seafood Departments; 9) Produce Departments

(See the FDA's Data Collection Manual for additional information regarding facility types and help with Risk Factor Studies.)

- B. A jurisdiction may use routine inspection data or may use a separate data methodology in completing a RISK FACTOR STUDY. A data collection instrument similar to the FDA Model Data Collection Form in the FDA Data Collection Manual, using the IN, OUT, NA, and NO convention, is required.

Failure to use this convention skews the data toward either IN compliance or OUT of compliance. The FDA data collection instrument is not intended as an inspection form. However, jurisdictions that have developed an inspection form using the IN, OUT, NA and NO convention may use that inspection form as a survey instrument. If the jurisdiction uses a different form, the data may be difficult to compare with the data from the *FDA National Foodborne Illness Risk Factor Studies* or with data from other jurisdictions. Refer to the Data Collection manual to understand the statistical limitations and restrictions if using an inspection form or a data collection form different from the FDA data collection instrument.

Outcome

The desired outcome of this Standard is to enable managers to measure their program against national criteria and to demonstrate improvement in food safety. The process identifies program elements that may require improvement or be deserving of recognition.

Documentation

The quality records required for this standard include:

1. Survey reports on the occurrence of risk factors and *Food Code* interventions;
2. Survey collection tools or inspection sheets used for data collection; and
3. Documentation that each facility type regulated is surveyed during the 60-month survey cycle.

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 046
Issue: 2012 II-023**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report - CFSRP Part A - Certification of Food Safety Regulation Prof.

Issue you would like the Conference to consider:

The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group seeks the Conference's acknowledgement of its Work Group Report Part A.

(NOTE: CFSRP Part B of the Work Group report is submitted in a separate Issue titled: Report - CFSRP Part B - Uniform Inspection Program Audit Pilot Project).

Public Health Significance:

A national model that addresses training and the professional development of regulatory retail food safety professionals is essential to enhancing the effectiveness of the nation's retail food protection system.

The Standard 2 training and standardization model should be viewed as a working document that will need to be updated and revised to meet the ever-changing retail food safety environment. The Conference for Food Protection provides the mechanism to:

- Maintain and update this national training model;
- Explore additional training and/or assessment needs for regulatory retail food programs; and
- Build consensus among all retail food safety stakeholders.

Recommended Solution: The Conference recommends...:

acknowledgement of the Conference for Food Protection, Certification of Food Safety Regulation Professionals - Work Group Report Part A and the following attachments.

- 2012 CFP CFSRP Committee Final Report
- CFP CFSRP Committee Roster
- Assessment of Training Needs Survey Summary
- Third Party Auditor Survey Results
- IFPTI Curriculum Framework

The Conference also recommends thanking all the 2010-2012 CFSRP members, and the organizations/agencies they represent, which allowed them to actively participate on the Work Group.

Submitter Information:

Name: Susan Kendrick, Co-Chair
Organization: Certification of Food Safety Regulation Professionals Work Group
Address: Oregon Department of Agriculture 635 Capitol Street NE
City/State/Zip: Salem, OR 97301
Telephone: 503-533-0835 Fax: 503-986-4729
E-mail: skendrick@oda.state.or.us

Attachments:

- "CFP CFSRP Committee Roster"
- "Assessment of Training Needs Survey Summary"
- "Third Party Auditor Survey Results"
- "IFPTI Curriculum Framework"
- "CFSRP Final Report 2012"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

2012 Committee Lists for Program Booklet

| First Name | Last Name | Company /Employer Name | City | State | Role (Chair, Co-Chair, Vice Chair) |
|--------------|-----------------|--|------------------|-----------|------------------------------------|
| Rance | Baker | National Environmental Health Association | Denver | CO | Member |
| Angela | Benton | Jetro/Restaurant Depot | College Point | NY | Member |
| Martin | Bucknavage | Penn State University | State College | PA | Member |
| Lee M. | Cornman | Florida Dept of Agriculture and Consumer Services/Food Safety Division | Tallahassee | FL | Member |
| Catherine | Cummins | Virginia Department of Health | Radford | VA | Member |
| Vicki | Everly | Retired - Local Regulatory | San Jose | CA | Member |
| Michael | Gentry | Alaska Dept of Environmental Conservation | Anchorage | AK | Member |
| Christopher | Gordon | Virginia Department of Health | Richmond | VA | Alt Member |
| Ron | Grimes | NSF International | Ann Arbor | MI | Vice-Chair |
| Joe | Hainline | Jefferson County Health Department | Hillsboro | MO | Member |
| Cheryn | Hargrave | United Supermarkets | Lubbock | TX | Member |
| Ruth N. | Hendy | Texas Department of State Health Services | Austin | TX | Member |
| DeBrena | Hilton | Tulsa Health Department | Tulsa | OK | Member |
| Christina N. | Johnson | Publix Super Markets, Inc. | Boynton Beach | FL | Member |
| Susan | Kendrick | Oregon Department of Agriculture | Salem | OR | Chair |
| Dr. David | McSwane | Indiana University | Indianapolis | IN | Member |
| Stephanie | Mohn | Marsh Supermarkets | Indianapolis | IN | Member |
| Michelle | Motsinger | Colorado Department of Public Health & Environment | Denver | CO | Member |
| Angela | Nardone | N2N Global | Longwood | FL | Member |
| Duane | O'Donnell | Business Environmental Resource Center | McClellan | CA | Member |
| Melvin | Pascall | Ohio State University | Columbus | OH | Member |
| David J. | Read | Minnesota Department of Agriculture | St. Paul | MN | Member |
| Michael | Roberson | Publix Super Markets, Inc. | Lakeland | FL | Alt Member |
| Amy | Roedl | National Restaurant Association Solutions | Chicago | IL | Member |
| Michele | Samarya-Timm | Somerset County Department of Health | Franklin Park | NJ | Member |
| Zia | Siddiqi | Orkin Commercial Services | Atlanta | GA | Member |
| Joyce | Theard | Saint Louis County Department of Health | Clayton | MO | Member |
| Debbie | Watts | Tulsa Health Department | Tulsa | OK | Alt Member |
| John | Marcello | FDA | Tempe | AZ | Advisor |
| Jim | Fear | FDA | Rockville | MD | Advisor |

Alternates - each of these members has another representative from their company, jurisdiction or association and agreed to act as an alternate.

1. What is the NAME of your agency?

| | Response Count |
|--------------------------|----------------|
| | 16 |
| answered question | 16 |
| skipped question | 1 |

2. Do you represent:

| | Response Percent | Response Count |
|--------------------------|------------------|----------------|
| Federal | 0.0% | 0 |
| State | 52.9% | 9 |
| Local County | 35.3% | 6 |
| Local City | 11.8% | 2 |
| Tribal | 0.0% | 0 |
| answered question | | 17 |
| skipped question | | 0 |

3. What is the population living within your Jurisdiction?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| less than 25,000 | | 0.0% | 0 |
| 25,000 to 49,9999 |  | 5.9% | 1 |
| 50,000 to 99,9999 | | 0.0% | 0 |
| 100,000 to 249,999 |  | 17.6% | 3 |
| 250,000 to 499,999 |  | 5.9% | 1 |
| 500,000 or above |  | 70.6% | 12 |
| answered question | | | 17 |
| skipped question | | | 0 |

4. What is your Jurisdiction's total number of retail food and food service establishments under permit?

| | | Response Percent | Response Count |
|--------------------------|---|------------------|----------------|
| less than 100 | | 0.0% | 0 |
| 101 to 500 |  | 11.8% | 2 |
| 501 to 1,000 | | 0.0% | 0 |
| 1,001 to 3,000 |  | 17.6% | 3 |
| 3,001 to 6,000 |  | 23.5% | 4 |
| 6,001 or above |  | 47.1% | 8 |
| answered question | | | 17 |
| skipped question | | | 0 |

5. How many Food Safety Inspection Officers (FSIO's) are employed by your Jurisdiction FULL TIME (i.e., 100%) in the retail food and food service programs?

| | | Response Percent | Response Count |
|--------------------------|---|------------------|----------------|
| less than 4 |  | 29.4% | 5 |
| 4 to 8 |  | 23.5% | 4 |
| 9 to 12 |  | 5.9% | 1 |
| 13 to 20 |  | 11.8% | 2 |
| 21 to 30 |  | 5.9% | 1 |
| 31 or more |  | 23.5% | 4 |
| answered question | | | 17 |
| skipped question | | | 0 |

6. How many Food Safety Inspection Officers (FSIO's) are employed by your Jurisdiction with responsibilities in other food protection or environmental health program areas in addition to their retail food and food service protection duties?

| | | Response Percent | Response Count |
|--------------------------|---|------------------|----------------|
| less than 4 |  | 23.5% | 4 |
| 4 to 8 |  | 23.5% | 4 |
| 9 to 12 | | 0.0% | 0 |
| 13 to 20 |  | 5.9% | 1 |
| 21 to 30 |  | 17.6% | 3 |
| 31 or more |  | 29.4% | 5 |
| answered question | | | 17 |
| skipped question | | | 0 |

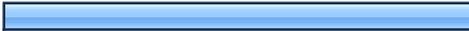
7. If your Food Safety Inspection Officers (FSIO's) have responsibilities in other food protection or environmental health program areas, on average, how much of their annual work plan is dedicated to the retail food and food service protection programs?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| less than 10% | | 5.9% | 1 |
| 10% to 29% | | 5.9% | 1 |
| 30% to 49% | | 23.5% | 4 |
| 50% to 69% | | 23.5% | 4 |
| 70% to 89% | | 35.3% | 6 |
| 90% or more | | 5.9% | 1 |
| answered question | | | 17 |
| skipped question | | | 0 |

8. Is your jurisdiction still ENROLLED in the FDA Voluntary National Retail Food Regulatory Program Standards?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| Yes | | 100.0% | 17 |
| No | | 0.0% | 0 |
| answered question | | | 17 |
| skipped question | | | 0 |

9. If enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards, has your Jurisdiction MET all the Standard 2-Trained Regulatory Staff criteria?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| Yes |  | 23.5% | 4 |
| No |  | 70.6% | 12 |
| Not applicable |  | 5.9% | 1 |
| answered question | | | 17 |
| skipped question | | | 0 |

10. What is the minimum level of education a FSIO MUST have to be considered for employment by your Jurisdiction in the retail food protection program?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| High School Graduate | | 0.0% | 0 |
| Associate's degree |  | 5.9% | 1 |
| Bachelor's degree |  | 94.1% | 16 |
| Other (please specify) | | | 3 |
| answered question | | | 17 |
| skipped question | | | 0 |

11. Are FSIO's in your Jurisdiction REQUIRED to complete at least 30 semester hours of science as part of their academic degree PRIOR TO employment or assignment to the retail food protection program?

| | | Response Percent | Response Count |
|--------------------------|--|------------------|----------------|
| Yes |  | 70.6% | 12 |
| No |  | 29.4% | 5 |
| answered question | | | 17 |
| skipped question | | | 0 |

12. Identify which Credential(s) the FSIOs in your Jurisdiction are REQUIRED to hold? (Check all that apply)

| | | Response Percent | Response Count |
|---|---|------------------|----------------|
| REHS/RS issued by NEHA |  | 11.8% | 2 |
| REHS/RS issued by State Registration Board |  | 47.1% | 8 |
| CFSP issued by NEHA |  | 17.6% | 3 |
| Not applicable |  | 41.2% | 7 |
| Other (please specify) | | | 5 |
| answered question | | | 17 |
| skipped question | | | 0 |

13. As a part of your agency's training program, have your FSIO's utilized any of the following types of education or trainings (check all that apply):

| | | Response Percent | Response Count |
|---|---|------------------|----------------|
| FDA sponsored food safety CLASSROOM courses |  | 82.4% | 14 |
| WEB-BASED (distant learning courses) such as those offered through FDA ORA U |  | 100.0% | 17 |
| In-house (provided by your jurisdiction) CLASSROOM courses |  | 70.6% | 12 |
| Food safety courses provided by trade or professional organizations such as IFPTI |  | 58.8% | 10 |
| An ANSI-CFP accredited Food Protection Manager Certification Course |  | 41.2% | 7 |
| Other – Please describe in box provided below. |  | 11.8% | 2 |
| | | Other | 4 |
| answered question | | | 17 |
| skipped question | | | 0 |

14. For each educational or training opportunity listed below, rate their effectiveness in preparing your FSIO's for their current job responsibilities.

| | Highly Effective | Effective | Not Effective | Response Count |
|---|------------------|------------------|--------------------------|----------------|
| FDA sponsored food safety CLASSROOM courses | 66.7% (8) | 33.3% (4) | 0.0% (0) | 12 |
| WEB-BASED (distant learning courses) such as those offered through FDA ORA U | 23.1% (3) | 69.2% (9) | 7.7% (1) | 13 |
| In-house (provided by your jurisdiction) CLASSROOM courses | 50.0% (5) | 50.0% (5) | 0.0% (0) | 10 |
| Food safety courses provided by trade or professional organizations such as IFPTI | 54.5% (6) | 45.5% (5) | 0.0% (0) | 11 |
| An ANSI-CFP accredited Food Protection Manager Certification Course | 11.1% (1) | 77.8% (7) | 11.1% (1) | 9 |
| Other | 50.0% (2) | 25.0% (1) | 25.0% (1) | 4 |
| | | | Other (please specify) | 4 |
| | | | answered question | 17 |
| | | | skipped question | 0 |

15. If your FSIO's have taken an FDA sponsored food safety CLASSROOM course(s), please provide a rating for each of the following statements:

| | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | N/A | Rating Average | Response Count |
|--|----------------------------|-----------------------------|-----------------------------------|-----------------|--------------------------|-------------|-----------------------|-----------------------|
| The objectives of the training course(s) were provided and understood prior to training | 35.3% (6) | 58.8% (10) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.63 | 17 |
| The training course(s) encouraged exchange of information and expression of ideas successfully | 47.1% (8) | 41.2% (7) | 5.9% (1) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.56 | 17 |
| The training course(s) covered the topics FSIO's needed to learn about | 41.2% (7) | 52.9% (9) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.56 | 17 |
| The content of the training course (s) was relevant to FSIO's assigned job duties | 41.2% (7) | 47.1% (8) | 5.9% (1) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.63 | 17 |
| The objectives of the training course(s) were achieved | 35.3% (6) | 58.8% (10) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.63 | 17 |
| The language used in the training course(s) was easy to understand | 41.2% (7) | 52.9% (9) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.56 | 17 |
| Enough time was devoted to each training session | 41.2% (7) | 47.1% (8) | 5.9% (1) | 0.0% (0) | 0.0% (0) | 5.9% (1) | 1.63 | 17 |
| answered question | | | | | | | | 17 |
| skipped question | | | | | | | | 0 |

16. If your FSIO's have taken a WEB-BASED (distant learning courses) such as those offered through FDA ORA U, please provide a rating for each of the following statements:

| | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | N/A | Rating Average | Response Count |
|--|----------------|-------------------|----------------------------|-----------|-------------------|-----------|----------------|----------------|
| The objectives of the training course(s) were provided and understood prior to training | 35.3% (6) | 58.8% (10) | 5.9% (1) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.71 | 1 |
| The training course(s) encouraged exchange of information and expression of ideas successfully | 12.5% (2) | 12.5% (2) | 31.3% (5) | 18.8% (3) | 18.8% (3) | 6.3% (1) | 3.20 | 1 |
| The training course(s) covered the topics FSIO's needed to learn about | 29.4% (5) | 58.8% (10) | 11.8% (2) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.82 | 1 |
| The content of the training course (s) was relevant to job duties assigned to FSIO's | 31.3% (5) | 50.0% (8) | 18.8% (3) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.88 | 1 |
| The objectives of the training course(s) were achieved | 23.5% (4) | 58.8% (10) | 17.6% (3) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.94 | 1 |
| The language used in the training course(s) was easy to understand | 29.4% (5) | 52.9% (9) | 17.6% (3) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.88 | 1 |
| Enough time was devoted to each training session | 35.3% (6) | 41.2% (7) | 11.8% (2) | 0.0% (0) | 0.0% (0) | 11.8% (2) | 1.73 | 1 |
| answered question | | | | | | | | 1 |
| skipped question | | | | | | | | |

17. If your FSIO's have taken in-house (provided by your jurisdiction) CLASSROOM courses, please provide a rating for each of the following statements:

| | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | N/A | Rating Average | Response Count |
|--|-----------------------|-------------------|-----------------------------------|-----------------|--------------------------|------------|-----------------------|-----------------------|
| The objectives of the training course(s) were provided and understood prior to training | 23.1% (3) | 69.2% (9) | 0.0% (0) | 7.7% (1) | 0.0% (0) | 0.0% (0) | 1.92 | 13 |
| The training course(s) encouraged exchange of information and expression of ideas successfully | 53.8% (7) | 46.2% (6) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.46 | 13 |
| The training course(s) covered the topics FSIO's needed to learn about | 53.8% (7) | 46.2% (6) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.46 | 13 |
| The content of the training course (s) was relevant to FSIO's assigned job duties | 69.2% (9) | 30.8% (4) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.31 | 13 |
| The objectives of the training course(s) were achieved | 7.7% (1) | 84.6% (11) | 7.7% (1) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 2.00 | 13 |
| The language used in the training course(s) was easy to understand | 23.1% (3) | 76.9% (10) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 1.77 | 13 |
| Enough time was devoted to each training session | 7.7% (1) | 53.8% (7) | 38.5% (5) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 2.31 | 13 |
| answered question | | | | | | | | 13 |
| skipped question | | | | | | | | 4 |

18. If your FSIO's have taken food safety courses provided by trade or professional organizations such as IFPTI, please provide a rating for each of the following statements:

| | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | N/A | Rating Average | Response Count |
|--|----------------------------|----------------------------|-----------------------------------|-----------------|--------------------------|----------------------------|-----------------------|-----------------------|
| The objectives of the training course(s) were provided and understood prior to training | 20.0% (3) | 46.7% (7) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.70 | 1 |
| The training course(s) encouraged exchange of information and expression of ideas successfully | 40.0% (6) | 26.7% (4) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.40 | 1 |
| The training course(s) covered the topics FSIO's needed to learn about | 20.0% (3) | 46.7% (7) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.70 | 1 |
| The content of the training course (s) was relevant to FSIO's assigned job duties | 33.3% (5) | 26.7% (4) | 6.7% (1) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.60 | 1 |
| The objectives of the training course(s) were achieved | 26.7% (4) | 40.0% (6) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.60 | 1 |
| The language used in the training course(s) was easy to understand | 26.7% (4) | 40.0% (6) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.60 | 1 |
| Enough time was devoted to each training session | 26.7% (4) | 40.0% (6) | 0.0% (0) | 0.0% (0) | 0.0% (0) | 33.3% (5) | 1.60 | 1 |
| answered question | | | | | | | | 1 |
| skipped question | | | | | | | | |

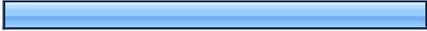
19. If your FSIO's have taken an ANSI-CFP accredited Food Protection Manager Certification Course, please provide a rating for each of the following statements:

| | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | N/A | Rating Average | Response Count |
|--|-----------------------|------------------|-----------------------------------|-----------------|--------------------------|------------------|-----------------------|-----------------------|
| The objectives of the training course(s) were provided and understood prior to training | 0.0% (0) | 50.0% (6) | 0.0% (0) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.29 | 1 |
| The training course(s) encouraged exchange of information and expression of ideas successfully | 8.3% (1) | 41.7% (5) | 0.0% (0) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.14 | 1 |
| The training course(s) covered the topics FSIO's needed to learn about | 0.0% (0) | 33.3% (4) | 8.3% (1) | 16.7% (2) | 0.0% (0) | 41.7% (5) | 2.71 | 1 |
| The content of the training course(s) was relevant to FSIO's assigned job duties | 0.0% (0) | 41.7% (5) | 8.3% (1) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.43 | 1 |
| The objectives of the training course(s) were achieved | 8.3% (1) | 41.7% (5) | 0.0% (0) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.14 | 1 |
| The language used in the training course(s) was easy to understand | 8.3% (1) | 41.7% (5) | 0.0% (0) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.14 | 1 |
| Enough time was devoted to each training session | 0.0% (0) | 33.3% (4) | 16.7% (2) | 8.3% (1) | 0.0% (0) | 41.7% (5) | 2.57 | 1 |
| answered question | | | | | | | | 1 |
| skipped question | | | | | | | | |

20. If your FSIO's have taken FDA sponsored food safety CLASSROOM course(s), how can improvements be made?

| | | Response Percent | Response Count |
|---|---|------------------|----------------|
| Clarify objectives |  | 18.2% | 2 |
| Provide better information before the course |  | 36.4% | 4 |
| Update content |  | 27.3% | 3 |
| Make more interactive |  | 18.2% | 2 |
| Reduce content |  | 9.1% | 1 |
| Increase content |  | 9.1% | 1 |
| Make more difficult |  | 18.2% | 2 |
| Make less difficult | | 0.0% | 0 |
| Improve assessment at end of training |  | 9.1% | 1 |
| Add video |  | 27.3% | 3 |
| | Other (please specify) | | 3 |
| answered question | | | 11 |
| skipped question | | | 6 |

21. If your FSIO's have taken WEB-BASED (distant learning courses) such as those offered through FDA ORA U, how can improvements be made?

| | | Response Percent | Response Count |
|--|---|------------------|----------------|
| Clarify objectives |  | 9.1% | 1 |
| Provide better information before the course | | 0.0% | 0 |
| Update content |  | 45.5% | 5 |
| Make more interactive |  | 63.6% | 7 |
| Reduce content | | 0.0% | 0 |
| Increase content |  | 9.1% | 1 |
| Make more difficult |  | 27.3% | 3 |
| Make less difficult | | 0.0% | 0 |
| Improve assessment at end of training | | 0.0% | 0 |
| Add video |  | 9.1% | 1 |
| | Other (please specify) | | 3 |
| answered question | | | 11 |
| skipped question | | | 6 |

22. If your FSIO's have taken, in-house (provided by your jurisdiction) CLASSROOM courses, how can improvements be made?

| | | Response Percent | Response Count |
|--|------------------------|--------------------------|----------------|
| Clarify objectives | | 36.4% | 4 |
| Provide better information before the course | | 27.3% | 3 |
| Update content | | 54.5% | 6 |
| Make more interactive | | 27.3% | 3 |
| Reduce content | | 0.0% | 0 |
| Increase content | | 9.1% | 1 |
| Make more difficult | | 0.0% | 0 |
| Make less difficult | | 0.0% | 0 |
| Improve assessment at end of training | | 36.4% | 4 |
| Add video | | 0.0% | 0 |
| | Other (please specify) | | 2 |
| | | answered question | 11 |
| | | skipped question | 6 |

23. If your FSIO's have taken an ANSI-CFP accredited Food Protection Manager Certification Course, how can improvements be made?

| | | Response Percent | Response Count |
|--|---|--------------------------|----------------|
| Clarify objectives | | 0.0% | 0 |
| Provide better information before the course |  | 25.0% | 1 |
| Update content | | 0.0% | 0 |
| Make more interactive | | 0.0% | 0 |
| Reduce content | | 0.0% | 0 |
| Increase content |  | 25.0% | 1 |
| Make more difficult |  | 50.0% | 2 |
| Make less difficult | | 0.0% | 0 |
| Improve assessment at end of training | | 0.0% | 0 |
| Add video | | 0.0% | 0 |
| | Other (please specify) | | 2 |
| | | answered question | 4 |
| | | skipped question | 13 |

24. If your FSIO's have taken food safety courses provided by trade or professional organizations such as IFPTI, how can improvements be made?

| | | Response Percent | Response Count |
|--|---|------------------|----------------|
| Clarify objectives | | 0.0% | 0 |
| Provide better information before the course | | 0.0% | 0 |
| Update content |  | 80.0% | 4 |
| Make more interactive |  | 20.0% | 1 |
| Reduce content | | 0.0% | 0 |
| Increase content | | 0.0% | 0 |
| Make more difficult |  | 60.0% | 3 |
| Make less difficult | | 0.0% | 0 |
| Improve assessment at end of training |  | 40.0% | 2 |
| Add video | | 0.0% | 0 |
| | Other (please specify) | | 0 |
| answered question | | | 5 |
| skipped question | | | 12 |

25. Of the available education and training courses that are currently available, what are some of the gaps you have identified?

| | Response Count |
|--------------------------|----------------|
| | 14 |
| answered question | 14 |
| skipped question | 3 |

26. Are there any additional training needs you have identified?

| | Response Count |
|--------------------------|---------------------------|
| | 9 |
| answered question | 9 |
| skipped question | 8 |

Page 2, Q1. What is the NAME of your agency?

| | | |
|----|---|-----------------------|
| 1 | Public Health - Seattle & King County | Nov 1, 2011 3:08 PM |
| 2 | Consumer Health Services Wyoming Dept. of Agriculture | Oct 31, 2011 4:50 PM |
| 3 | Olmsted County Public Health Services | Oct 28, 2011 5:26 AM |
| 4 | Kansas Department of Agriculture | Oct 26, 2011 6:27 AM |
| 5 | City of Lubbock | Oct 25, 2011 10:55 AM |
| 6 | Florida Department of Agriculture and Consumer Services | Sep 19, 2011 1:00 PM |
| 7 | Fairfax County Health Department | Sep 19, 2011 12:21 PM |
| 8 | MN Dept of Ag | Sep 15, 2011 1:48 PM |
| 9 | Oregon Department of Agriculture | Sep 13, 2011 11:39 AM |
| 10 | Tacoma Pierce County Health Department | Sep 12, 2011 4:52 PM |
| 11 | Indiana State Dept. of Health | Sep 12, 2011 11:50 AM |
| 12 | Whatcom County Health Department | Sep 9, 2011 5:35 PM |
| 13 | Maricopa County Environmental Services | Sep 6, 2011 10:28 AM |
| 14 | Town of Danvers, MA; Board of Health | Sep 6, 2011 5:30 AM |
| 15 | Texas Department State Health Services | Sep 2, 2011 12:56 PM |
| 16 | MA Department of Public Health, Bureau of Environmental Health, Food Protection Program | Sep 2, 2011 12:35 PM |

Page 4, Q10. What is the minimum level of education a FSIO MUST have to be considered for employment by your Jurisdiction in the retail food protection program?

| | | |
|---|--|----------------------|
| 1 | Bachelor's or relevent experience | Oct 26, 2011 6:29 AM |
| 2 | high school if experience can count per yr of degree requirement | Sep 19, 2011 1:04 PM |
| 3 | Additional college level science is required: 30 Semester hours or 45 quarter hours. | Sep 9, 2011 5:39 PM |

Page 4, Q12. Identify which Credential(s) the FSIOs in your Jurisdiction are REQUIRED to hold? (Check all that apply)

| | | |
|---|---|-----------------------|
| 1 | cfpm | Sep 19, 2011 1:04 PM |
| 2 | Food Protection Manager Certification | Sep 19, 2011 12:22 PM |
| 3 | No-entry level, Yes-Technical Leads | Sep 12, 2011 5:00 PM |
| 4 | RS/REHS is preferred and FSIOs receive premium pay to compensate for RS/REHS. | Sep 9, 2011 5:39 PM |
| 5 | Certified Food Protection Manager | Sep 2, 2011 12:39 PM |

Page 5, Q13. As a part of your agency's training program, have your FSIO's utilized any of the following types of education or trainings (check all that apply):

| | | |
|---|---|----------------------|
| 1 | Washington State Dept of Health sponsored food safety courses | Nov 1, 2011 3:14 PM |
| 2 | State Sponsored New Inspector Training | Sep 12, 2011 5:05 PM |
| 3 | Washington State Department of Health and the Washington State Environmental Health Association have provided face to face training for FSIOs. Our FDA retail specialists have provided assistance with field training and standardization. Some staff have taken on-line courses through NEHA. | Sep 9, 2011 5:48 PM |
| 4 | MHOA and MEHA sponsored conferences | Sep 2, 2011 12:51 PM |

Page 5, Q14. For each educational or training opportunity listed below, rate their effectiveness in preparing your FSIO's for their current job responsibilities.

| | | |
|---|--|----------------------|
| 1 | WSDOH courses | Nov 1, 2011 3:14 PM |
| 2 | State Sponsored New Inspector Training | Sep 12, 2011 5:05 PM |
| 3 | The survey tool appears to malfunction here. It will not allow me to check more than one item as highly effective. In additiona to the answers above, I have found our in-house training (with the help of our retail specialists) highly effective. | Sep 9, 2011 5:48 PM |
| 4 | MHOA and MEHA sponsored conferences | Sep 2, 2011 12:51 PM |

Page 6, Q20. If your FSIO's have taken FDA sponsored food safety CLASSROOM course(s), how can improvements be made?

| | | |
|---|--|-----------------------|
| 1 | provide more content about risk-based assessments and how to assess Active Managerial Control with a focus on how to communicate with operators to foster long-term effective management of FMI risk factors | Oct 28, 2011 5:53 AM |
| 2 | Offer more training locations | Oct 25, 2011 10:59 AM |
| 3 | sometimes time is spent on info not relevant to course | Sep 19, 2011 1:30 PM |

Page 6, Q21. If your FSIO's have taken WEB-BASED (distant learning courses) such as those offered through FDA ORA U, how can improvements be made?

| | | |
|---|--|----------------------|
| 1 | technical difficulties with the web-site have created challenges on a regular basis. It would also be helpful to have assessment results (test scores) and progress/status reports e-mailed to the FSIO's supervisor or trainer to provide an opportunity to review and discuss with FSIO periodically. | Oct 28, 2011 5:53 AM |
| 2 | Separate courses to focus on different roles. Some course content is not relevant to job duties. Example-pasteurization is important for individuals with role in processing, but is not seen at retail level. Interesting but not relevant. With limited time courses more focused for various professional roles/duties at federal, state, and local, processing, retail, etc. would make some of the courses more relevant. | Sep 12, 2011 5:13 PM |
| 3 | Still waiting for some courses to be developed! | Sep 9, 2011 5:51 PM |

Page 6, Q22. If your FSIO's have taken, in-house (provided by your jurisdiction) CLASSROOM courses, how can improvements be made?

| | | |
|---|---|----------------------|
| 1 | I create the training and get lots of advise on how to make it better - most of which is beyond the scope of my skills! | Nov 1, 2011 3:18 PM |
| 2 | working on that now | Sep 19, 2011 1:30 PM |

Page 6, Q23. If your FSIO's have taken an ANSI-CFP accredited Food Protection Manager Certification Course, how can improvements be made?

| | | |
|---|---|----------------------|
| 1 | there may be value in development of a course/cirriculum aimed solely at inspectors so that the class can be more focused on the role of the FSIO versus the role of the certified food manager | Oct 28, 2011 5:53 AM |
| 2 | only take exam and not a course | Sep 19, 2011 1:30 PM |

Page 6, Q25. Of the available education and training courses that are currently available, what are some of the gaps you have identified?

| | | |
|----|--|-----------------------|
| 1 | Budget and time constraints to get more staff to classes. We need to have a more formal way to share information from courses The more practical and take away ready the information is the better. | Nov 1, 2011 3:18 PM |
| 2 | There is a disconnect from what is taught in the classroom versus what happens during actual food preparation. Videos should be from the inspector's point of view | Oct 31, 2011 5:00 PM |
| 3 | FDA training is very good, but not offered often, so it is a waiting game for new staff. We have to send them when it's offered versus when it is best to send them. We also have to travel and make lodging accomodations to attend FDA training. The Food Manager Certification courses are good but are primarily aimed at food managers. There is no solid source of training regarding how to conduct risk-based assessments and assessing Active Managerial Control except from learning from experienced staff....classroom or other support for this would be helpful. | Oct 28, 2011 5:53 AM |
| 4 | Practicing communication skills and conflict management. Practicing testimony. | Oct 26, 2011 6:33 AM |
| 5 | We need training that is closer to our city. | Oct 25, 2011 10:59 AM |
| 6 | more communication training especially with oral cultures | Sep 19, 2011 1:30 PM |
| 7 | 1) Maintaining the risk-based focus of training 2) Food industry perspective 3) Ability to apply new information/procedures to "real-time" regulatory activities | Sep 19, 2011 12:36 PM |
| 8 | It is difficult to get all staff to classroom trainings due to limited space and availability. | Sep 13, 2011 12:02 PM |
| 9 | Availability of live in-person training. | Sep 12, 2011 11:57 AM |
| 10 | problem solving in stressful situations. Tools to de-escalate angry operators. Recall response. | Sep 9, 2011 5:51 PM |
| 11 | More information on the background of the code, a class on how to read and use the code | Sep 6, 2011 10:33 AM |
| 12 | Its voluntary - no standardized inspections in MA due to the varying level of skill among all the inspectors in the 351 separate jurisdictions! | Sep 6, 2011 5:36 AM |
| 13 | Too much time elapses between revisions and updates are made to the training materials | Sep 2, 2011 1:02 PM |
| 14 | Lenght of classroom courses and travel restrictions. | Sep 2, 2011 12:53 PM |

Page 6, Q26. Are there any additional training needs you have identified?

| | | |
|---|---|-----------------------|
| 1 | We will be doing some serious assessment in 2012 that may shed light on training needs. | Nov 1, 2011 3:18 PM |
| 2 | Love the small series about how to do an inspection, prepare for doing an inspection. Need more training on how to document inspections. | Oct 31, 2011 5:00 PM |
| 3 | jurisdictions that regulate both retail and manufacturing could benefit by a course that points out the common food safety components involved and the major differences | Sep 19, 2011 1:30 PM |
| 4 | 1) Compliance & enforcement activities 2) Understanding and applying the guidance information outlined in the FDA Food Code | Sep 19, 2011 12:36 PM |
| 5 | We need to formalize our training on plan review for retail. We also need to provide our staff with more training on special processes that fall under a variance and/or HACCP. | Sep 13, 2011 12:02 PM |
| 6 | There is much more out there than just retail and we need more training for manufactured foods, LACF, etc. | Sep 12, 2011 11:57 AM |
| 7 | See above. | Sep 9, 2011 5:51 PM |
| 8 | Nothing beats ride-a-longs in the field with experienced inspectors | Sep 6, 2011 10:33 AM |
| 9 | No | Sep 2, 2011 1:02 PM |

Third Party Auditors Survey Questions

| State | #1 | #2 | #3 | #4 | Completed by | Email | Telephone |
|--------------------|---|---|-----|--|-----------------|--|--------------|
| Alabama | | | | | | | |
| Alaska | | | | | | | |
| Arizona | | | | | | | |
| Arkansas | N | Arkansas does not have local jurisdictions. | N/A | N | Teresa Bullock | teresa.bullock@arkansas.gov | 501-661-2171 |
| California | | | | | | | |
| Colorado | | | | | | | |
| Connecticut | N | Soma may hire individuals as consultants to perform inspections of regulated food establishments, but they are persons who are certified (per CT Regulations) by the CT Dept. of Public Health to conduct such inspections. | N/A | N | Tracey Weeks | tracey.weeks@ct.gov | 860-509-7297 |
| Deleware | | | | | | | |
| Florida | No. All food safety regulatory authority is preempted to the state. | N | N/A | There has been no discussion for authorizing third party audits. | Lee M.. Cornman | lee.cornman@freshfromflorida.com | 850-245-5595 |
| Georgia | | | | | | | |
| Hawaii | | | | | | | |
| Idaho | N | N | N/A | N | Patrick Guzzle | guzzlep@dhw.idaho.gov | 208-334-5936 |
| Illinois | | | | | | | |
| Indiana | No, but it does not prohibit it either. | None that I am aware of. | N/A | Yes, we are looking at recognizing legitimate 3rd party audits such as AIB, SQF, Silliker, etc., to offset the inspection load in our manufactured foods program to allow us to spend more time on problem and high risk facilities. | Scott Gilliam | sgilliam@isdh.in.gov | 317-233-7467 |
| Iowa | | | | | | | |
| Kansas | N | Not to my knowledge | N/A | No, but we do have authority to authorize third party inspections on lodging facilities. | Steve Moris | steve.moris@kda.ks.gov | 785-296-5600 |
| Kentucky | N | N | N/A | N | Pamela Hendren | pamelam.hendren@ky.gov | 502-564-7181 |
| Louisiana | | | | | | | |

Third Party Auditors Survey Questions

| | | | | | | | |
|--------------------|--|--|--|-------------------------|-----------------|--|--------------|
| Maine | There are 4 municipalities within Maine that have state delegated authority to inspect eating establishments. There are no third party audits. | N | N/A | N | Lisa Brown | lisa.brown@maine.gov | 207-287-5691 |
| Maryland | | | | | | | |
| Massachusetts | | | | | | | |
| Michigan | Y | Yes, may LHD's utilize 3rd party consultants. Some are individuals (Retired LHD Staff) & some are universities (MSU, U of M, Wayne State). | Carmen Merz, cmerz@ingham.org , 517-887-4312 | BLANK | Tom Tederington | tederingtont@michigan.gov | 517-335-7092 |
| Minnesota | N | None that I am aware of. A few local health agencies contract with a neighboring local health agency to provide inspection service for restaurant and food service. Restaurant and food service inspections are under the jurisdiction of the MN Dept of Health. They delegate their inspection authority to a number of local health agencies and will allow a local health agency to contract with another local health agency for inspection services. The MN Dept of Agriculture inspects retail food stores such as bakeries, convenience and grocery stores. The MDA delegates retail inspection authority to a small number of local health agencies but does not allow the agency to contract with another local health agency to conduct inspections. | N/A | Not that I am aware of. | David Read | david.read@state.mn.us | 651-201-6596 |
| Mississippi | N | N | N/A | N | John Luke | john.luke@msdh.state.ms.us | 601-576-7689 |
| Missouri | | | | | | | |
| Montana | N | N | N/A | N | Christine Cox | ccox@mt.gov | 406-444-2089 |
| Nebraska | N | N | N/A | N | George Hanssen | george.hanssen@nebraska.gov | 402-471-3422 |

Third Party Auditors Survey Questions

| | | | | | | | |
|------------------------|-----------|---------------------------|--|-------------------|-----------------|--|--------------|
| Nevada | | | | | | | |
| New Hampshire | | | | | | | |
| New Jersey | N | N | N/A | N | Mary Lou Falco | marylou.falco@doh.state.nj.us | 609-826-4935 |
| New Mexico | | | | | | | |
| New York | | | | | | | |
| North Carolina | | | | | | | |
| North Dakota | N | N | N/A | BLANK | Kenan Bullinger | kbullin@nd.gov | 701-328-1292 |
| Ohio | | | | | | | |
| Oklahoma | | | | | | | |
| Oregon | N | N | N/A | N | Dave Martin | david.c.martin@state.or.us | 971-673-0450 |
| Pennsylvania | | | | | | | |
| Puerto Rico | | | | | | | |
| Rhode Island | | | | | | | |
| South Carolina | | | | | | | |
| South Dakota | | | | | | | |
| Tennessee | N | N | N/A | Not at this time. | Lori LeMaster | lori.lemaster@tn.gov | 615-741-8531 |
| Texas | Y | Yes, at least 10. | Lisa Pomeroy, Bureau Veritas, lisa.pomeroy@us.bu reauveritas.com, 800-907-7199 | BLANK | Ruth Hendy | ruth.hendy@dshs.state.tx.us | 512-834-6753 |
| Utah | | | | | | | |
| Vermont | | | | | | | |
| Virginia | N | N | N/A | BLANK | Chris Gordon | christopher.gordon@vdh.virginia.gov | 804-864-7417 |
| Washington | | | | | | | |
| West Virginia | N | N | N/A | N | Linda Whaley | Linda.k.whaley@wv.gov | 304-356-4283 |
| Wisconsin | N | Not that we are aware of. | N/A | None whatsoever | James Mack | james.mack@wisconsin.gov | 608-266-8351 |
| Wyoming | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total Responses | 18 | | | | | | |
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Third Party Auditors Survey Questions

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|---|--|---|--|
| Does your state provide the legislative authority to state and local government agencies to contract independent third party auditing firms to conduct institutional foodservice, restaurant, and retail food | Are there any local jurisdictions within your state that are currently contracting with independent third party auditing firms to conduct institutional foodservice, restaurant, and retail food compliance inspections in lieu of State/local/tribal regulatory retail food programs? | If so, please provide a contact name, email address, and office telephone number where more information can be obtained from those jurisdictions. | If state and local jurisdictions are currently conducting regulatory inspections only, is any consideration being given to authorizing third party audits of retail food establishments in the future? |
|---|--|---|--|

**International Food Protection Training Institute
Curriculum Framework
For An
Integrated Food Safety System**

| Certificate and CEU Issuance (IACET/ANSI) | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|-------------------------------------|---|---|--|------------------------|--------------------------|---------------------|--|-----------------------|-------------------------------|-------------------|--------------------|--|---|----------------------|---------------------------|---------------|----------------|------------------------------|------------------|---------------------|-----------------|-----------------------|----------------------|
| Leadership (Leadership) L4 - 4000 | Professional Level Program Certificates | | | | | | | | | | | Instructor Development | Executive Program | Leadership Program | | | | | | | | | | | | |
| | Advocacy | Budget | Change Management | Continuity of Operations | Human Resource Management | Legislative Affairs | Policy Making | Public Relations | Resource Leveraging | Risk Analysis (Management & Communication) | Stakeholder Support | | | | | | | | | | | | | | | |
| | Animal Drugs | BSE Investigations | Medicated Feed | Non-Medicated Feed | Rendering Plants | Shellfish | Tissue Residue | Acidified Foods | Aseptic Processes | Biotechnology and Nanotechnology | Dietary Supplements | | | | Economic adulteration | Infant Formula | Juice HACCP | Low Acid Canned Food | Medical Foods | Pasteurization | Seafood HACCP | Web Site Reviews | Specialized Process | Standardization | | |
| Technical Specialist: (Master) L3 - 3000 | Professional Level Program Certificates | | | | | | | | | | | Instructor Development | Executive Program | Leadership Program | | | | | | | | | | | | |
| | Unprocessed Concentration | | Electives | | Manufactured Concentration | | | | | | Electives | | | | Retail Concentration | Electives | | | | | | | | | | |
| | Audit | Food Defense Vulnerability Assessment (Carver Plus Shock, etc) | | | | Food Emergency Response (ICS) | | | Risk Analysis | | Electives | | | | Research Design | Statistical Analysis | | | | | | | | | | |
| Journey Level: (Application) L2 - 2000 (Applied Inspection Techniques) | Professional Level Program Certificates | | | | | | | | | | | Fellowship in Food Protection | Annual Updates | Emerging Issues | | | | | | | | | | | | |
| | Aquaculture | Dairy | Food Animals (Eggs) | Produce (Sprouts, Leafy Green Vegetables) | Shellfish | Additives | Animal Food Processing | Commodity-Specific | Feed | Food | Milk or Milk Products | | | | Meat & Poultry | Packaging | Seafood/Shellfish | Active Managerial Control | Catering | Cottage Foods | Food Preparations Techniques | Food Service | Grocery | Plan Review | Retail HACCP/Variance | Vending, Temp, Other |
| | Unprocessed Concentration | | Electives | | Manufactured Concentration (labeling, etc) | | | | | | Electives | | | | Retail Concentration (labeling, etc.) | | | | Electives | | | | | | | |
| | Good Agricultural Practices (GAPs) | | | Allergens | Food Processing & Preservation | | | Food Salvage & Disposal | | Formula Review | Imports | | | | Ingredients & Additives | | | | | | | | | | | |
| | Communication Skills | Epidemiology, Foodborne Illness Investigation & Response | Food Defense | Food Emergencies (ICS) | Food Safety Programs | (HACCP, GMPs, GAPs, GWPs, SSOPs, Personal Health and Hygiene, Sanitary Design and Construction) | | | Food Transportation | Investigation, Sampling Techniques, & Laboratory Methodology | Law | | | | Professional (soft) Skills (EG time management, etc) | Risk Analysis (Management, Assessment, & Communication) | Science & Technology | Traceability & Recalls | | | | | | | | |
| Entry Level: (Knowledge) L1 - 1000 | Professional Level Program Certificates | | | | | | | | | | | Fellowship in Food Protection | Annual Updates | Emerging Issues | | | | | | | | | | | | |
| | Unprocessed Foundations | Manufactured Foundations | | | | Feed Only | | | | Retail Foundations | | | | | | | | | | | | | | | | |
| | | Allergens (ORAU) | Labeling (ORAU) Manufactured & Feed | Food Defense Awareness (ORAU) | Environmental Health Safety (ORAU) | Inspections, Compliance & Enforcement (ORAU) | | Sampling (ORAU) | | | | | | | | | | | | | | | | | | |
| | Integrated Food Safety System Orientation | | | | | | | | | | | | | | Fellowship in Food Protection | Annual Updates | Emerging Issues | | | | | | | | | |
| | Jurisdiction | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employee Safety | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Communication Skills | Epidemiology (Not in Feed) | | HACCP | Microbiology (not in Feed) | Prevailing Statutes, Regulations & Ordinances | | | Public Health Principles | | | | | | | | | | | | | | | | | | |
| (ORA-U Level I - Feed, Milk & Local, Shellfish, Standard 2: Manufactured, Retail) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Vertically Integrated National Curriculum (Secondary Education - Higher Education - Career Spanning Professional Development) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Higher Education Food Protection Curriculum | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Secondary Education (high school) Curriculum Focus | | | | | | | | | | | | | | | | | | | | | | | | | | |

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Secondary Education (high school) Curriculum Focus

| Certificate and CEU Issuance (IACET/ANSI) | | | | | | |
|---|----------------------|-----------------|------------------------|-------------------|------------|--|
| Leadership (Leadership) L4 - 4000 | Program Certificates | | | | | Leadership (Leadership) L4 - 4000 |
| | | | | | | |
| Technical Specialist: (Master) L3 - 3000 | | | | | | Technical Specialist: (Master) L3 - 3000 |
| | | | | | | |
| Journey Level: (Application) L2 - 2000 (Applied Inspection Techniques) | Epidemiology | Food Regulatory | Information Technology | Homeland Security | Laboratory | Veterinary |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Entry Level: (Knowledge) L1 - 1000 | | | | | | Entry Level: (Knowledge) L1 - 1000 |
| | | | | | | |
| Vertically Integrated National Curriculum (Secondary Education - Higher Education - Career Spanning Professional Development) | | | | | | |
| Higher Education Food Protection Curriculum | | | | | | |
| Secondary Education (high school) Curriculum Focus | | | | | | |

Secondary Education (high school) Curriculum Focus

1 Conference for Food Protection Committee Report

COMMITTEE NAME: Certification of Food Safety Regulation Professionals Committee

COUNCIL (I, II, or III): II

DATE OF REPORT: December 05, 2011

SUBMITTED BY: Susan Kendrick, Committee Co-Chair; Ron Grimes Co-Chair

COMMITTEE CHARGES:

| |
|--|
| 1. Collaborate with the FDA Center for Food Safety and Applied Nutrition and the FDA Division of Human Resource Development to: |
|--|

- Review all initiatives: existing, new or under development; involving the training, evaluation and/or certification of Food Safety Inspection Officers. This collaborative working relationship will ensure the sharing of information so as not to create any unnecessary redundancies in the creation of work product or assignment of tasks/responsibilities.
- Review and revise, as needed, Standard 2 classroom curriculum, time frame for completion of Steps 1 through 4 for new hires or staff newly assigned to the regulatory retail food protection program.
- Determine if the CFP Field Training Manual and forms have completely addressed all recommendations received as part of the 2007 Assessment of Training Needs (ATN) pilot project.

| |
|--|
| 2. Eliminate the potential redundancy of multiple verification tools (FDA Retail Food Level I Performance Audit and FDA Procedures for Standardization and Certification of Retail Food Inspection / Training Officers) utilized by FDA programs, work in collaboration with FDA's Center for Food Safety and Applied Nutrition, FDA's National Retail Food Team and the FDA's Division of Human Resource Development to: |
|--|

- Conduct a pilot project over the next year using the FDA Retail Food Level I Performance Audit with a limited and selected number of jurisdictions. The FDA Performance Audit will be piloted for use during the two joint inspections conducted as part of the quality assurance component of Standard 4 - Uniform Inspection Program. An outline of the pilot project objectives, protocol, and projected timeline is included as Attachment A with this Issue. The CFP CFSRP work group will submit a report to the 2012 Biennial Meeting that documents the result of the pilot project and any recommendations for the use of verification tools as part of the FDA Program Standards; and,
- Conduct a joint assessment of FDA Standardization Procedures and FDA Performance Audit documents to determine if both verification tools are equally viable with distinct purposes and outcomes; and,
- Explore the feasibility of merging these existing verification tool documents and provide a plan for consolidation of such; and,

- Upon determination, assess the placement and administration of final verification tool(s) within the FDA Program Standards as appropriate, or separately as appropriate; and, with input and guidance from the CFSRP Work Group, FDA will determine if modifications to their draft FDA Performance FDA Retail Food Level I Performance Audit and/or Standardization documents are needed. Any modifications that would include changes to the Program Standards will be submitted as Issues by the CFP CFSRP Work Group to the 2012 Biennial Meeting.

3. Collaborate with FDA, other federal agencies, professional and industry associations to research what criteria is currently being used to assess the education and training qualifications of independent third party auditors that have been contracted to conduct institutional foodservice, restaurant, and retail food compliance inspections in lieu of a State/local/tribal regulatory retail food program. The re-created Work Group is to provide a report to the 2012 Biennial Meeting that:

- Assesses the number of jurisdictions and geographic areas where retail food compliance Inspections are conducted by independent third party auditors in lieu of a regulatory compliance program;
- Delineates the reasons jurisdictions have moved to a third party auditor inspection compliance program;
- Summarizes criteria used to select third party auditors for inspection compliance oversight responsibilities including, but not limited to, education and training qualifications;
- Assesses and determines appropriate training and standardization processes/protocols for third party auditors, and
- Identifies any agencies/organizations/working groups currently addressing education and training standards for third party auditors conducting retail food compliance inspections.

Based on the above research, the work group will provide a recommendation to the Conference as to what actions/initiatives, if any, need to be undertaken to provide a national structure for ensuring that third party auditors possess the necessary knowledge, skills, and abilities to conduct retail food program compliance inspections.

4. Evaluate and determine the best approaches to promoting awareness and implementation of the national training model contained in the CFP Field Training Manual and forms, Appendix B 2, Standard 2 the Work Group will:

- Research the use of websites, list serves, newsletters, testimonials, presentations, and training workshops, etc.
- Assess opportunities for enhancing the electronic versions of the CFP Field Training Manual and forms to minimize paperwork.

5. Report back to the 2012 Biennial Meeting its findings regarding the above charges

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

Meetings and Workgroup Assignments:

The CFSRP Work Group was charged with a great deal of significant work to be completed by the 2012 CFP Biennial meeting. In order for the Work group as a whole to accomplish these charges, the workgroup was divided into smaller sub-workgroups centering on individual committee charges. Each committee member was asked to participate on at least one sub-workgroup. The CFSRP Co-Chair Susan Kendrick and Co-Chair Ron Grimes selected sub-workgroup chairs as follows:

| <u>Workgroup</u> | <u>(Co) Leaders</u> | <u>Function</u> |
|-----------------------------|--------------------------------------|--|
| Subgroup 1 FSIOs | Dave Read and Michelle Motsinger | Work with FDA CFSAN on training, evaluation, and/or certification of |
| Subgroup 2 John Marcello | Lee Cornman and Performance Audit | Conduct and evaluate FDA Program |
| Subgroup 3 auditors | Christina Johnson and Ruth Hendy | Research criteria used to assess qualifications third party |
| Subgroup 4 Manual | Michelle Samarya-Timm | Determine the best approaches to promoting CFP Field Training |

The CFSRP held all meetings by conference calls in an effort to ease travel restrictions that were placed on the individual committee members. The dates of the conference calls were: September 23, 2010; December 3, 2010; February 8, 2011; April 26, 2011; June 22, 2011; August 18, 2011; October 3, 2011; October 31, 2011; and November 30, 2011.

Due to the complexity of the charges and information presented, the CFSRP Work Group final report is presented in two parts:

- Part A – All committee charges and activities except for the pilot project noted in Part B.
- Part B – Uniform Inspection Program Audit Pilot Project.

Charge 1: Collaborate with the FDA Center for Food Safety and Applied Nutrition and the FDA Division of Human Resource Development.

- The FDA’s Food Protection Plan, the President’s Food Safety Working Group, and the recent passage of the Food Safety Modernization Act are major drivers for the development of the Integrated Food Safety System to ensure food safety in a cohesive and comprehensive manner. Collaboration and coordination of federal, state, tribal, and local food safety program efforts is essential for implementation of this system. One important step toward integration is the adoption of the Retail Food Regulatory Program Standards and the Manufactured Food Regulatory Program Standards by food safety regulatory agencies to promote uniformity and the use of best practices in their regulatory programs.

The Conference for Food Protection has a role in assisting retail food programs to develop the capacity and infrastructure for an integrated approach.

- The CFSRP Workgroup has members participating on the Partnership for Food Protection (PFP) Training and Certification Workgroup (TCWG). The workgroup was formed in 2008 as an outcome of the FDA/ 50 State Gateway to Food Protection meeting held in St Louis, MO. The committee's charges were to:
 - Establish competencies and certification for all disciplines.
 1. Short-term deliverable: Perform a job analysis for (all governmental jobs and stakeholders) inspectors involved in food and feed protection (prevention, intervention, and response). Identify current competency assessments and credentials. Develop a set of core competencies. Develop a framework for credentialing that could be taken back to associations and agencies to share.
 2. Long-term deliverable: To expand to include other disciplines, experienced staff, and stakeholders involved in food and feed protection.
 - Establish a national training center.
 1. Short-term deliverable: Assess and review training currently available for all disciplines involved in food and feed protection (prevention, intervention, and response) and identify any gaps. Use this information to assess whether Kellogg Foundation International Food Protection Training Institute (IFPTI) proposal fits needs and goals identified by the work group.
 2. Long-term deliverable: To put together a comprehensive course catalog.
- The PFP TCWG has worked diligently on these charges since inception. For additional detail, see the links to the 2008 50 State Meeting Report, the 2010 50 State Meeting Report, the 2010 PFP TCWG report, and the 2010 Food Safety Training and Certification Vision for Federal, State, Local, Territorial, and Tribal Regulators.

Link directly to the 50 State Meeting Reports:
<http://www.fda.gov/ForFederalStateandLocalOfficials/Meetings/50-StateMeeting/default.htm>

Link directly to the Vision:
<http://www.fda.gov/downloads/ForFederalStateandLocalOfficials/Meetings/UCM274679.pdf>

Link directly to the training work group final report:
<http://www.fda.gov/downloads/ForFederalStateandLocalOfficials/Meetings/UCM274677.pdf>
- The TCWG developed a plan to conduct Retail Food Safety Specialist Job Task Analysis (JTA) for food inspection positions that FDA has initiated through a contract and has completed a number of JTA's for federal staff conducting specific food safety inspections. This work can be used by state and local entities

to compare to their own inspection activities to verify similar activities and identify differences or gaps that may exist between federal, state, and local food inspection activities.

- The TCWG also endorsed the IFPTI as a training institute to deliver food safety training to federal, state, and local food safety staff. Additionally, the IFPTI has inventoried food safety training available around the country into a course catalog currently available on their website at www.ifpti.org. The IFPTI established a Curriculum Development Team that included members of the CFSRP and the PFP TCWG to design a competency based framework to identify and develop food safety curriculum addressing four professional levels (entry, journey, technical, and leadership) for training people at different stages of their career. The IFPTI Curriculum Framework is attached to this report.
- As a result of the ongoing work of the Partnership for Food Protection Training and Certification Workgroup, the CFSRP workgroup decided **not** to recommend revisions to Retail Food Regulatory Program Standard 2 until more information is available from the Retail Food Safety Specialist Job Task Analysis for state and local food safety regulatory professionals.
- Once the Retail Food Safety Specialist Job Task Analysis is complete, the information can be used to review the Standard 2 curriculum to identify any gaps and recommendations for change and has been included as a continuation charge – See Issue titled: Re-create CFSRP Work Group.
- A follow-up survey to the CFSRP 2008 Assessment of Training Needs Pilot Project was conducted (see attached *Assessment of Training Needs Survey Summary*).
 - The original pilot project participants were re-surveyed to identify and assess existing training and gaps in training for food safety inspection officers (FSIO's).
 - The survey was completed by 16 of the 30 original pilot project participants and 53% of respondents represented State agencies while 35% represented local county agencies, and 12% represented local city agencies.
- A majority of respondents require a Bachelors Degree (94%) as the minimum level of education an FSIO must have to be considered for employment with their agency, and 70% require at least 30 semester hours of science as a part of their academic degree prior to employment or assignment to the retail food protection program.
- As a part of their agency's training program, a large majority of respondents had utilized FDA sponsored food safety classroom courses (82.4%) and FDA web-based learning such as ORA-U (100%). Additionally, many also provided in-house classroom courses (71%) and over half were utilizing IFPTI as a mechanism for training (59%).
- Feedback on course delivery, effectiveness, content, and objectives were very favorable for all of the above-mentioned training methods.
 - Respondents did offer suggestions for improvement including:
 1. Providing better information before the course,
 2. Updating content,
 3. Adding video as a training method,
 4. Making courses more interactive, and more difficult.

- Feedback from respondents also indicated there was a gap in training and that some topics were not currently being addressed in trainings, including:
 1. Communication,
 2. Problem solving,
 3. Conflict management, and
 4. Actual application of learned knowledge and skills in a classroom environment.

- The 2010-2012 CFP CFSRP Work Group is recommending that a new charge be assigned to a re-created CRFSP Work Group to collaborate with the FDA Center for Food Safety and Applied Nutrition, the FDA Division of Human Resource Development, and the Partnership for Food Protection Training and Certification Workgroup (PFP TCWG) to:
 - Continue review of all initiatives: existing, new or under development; involving the training, evaluation and/or certification of food safety inspection officers. This collaborative working relationship will ensure the sharing of information so as not to create any unnecessary redundancies in the creation of work product or assignment of tasks/responsibilities.
 - When completed, use the Retail Food Safety Specialist Job Task Analysis being developed under the umbrella of the PFP TCWG to review and revise the Standard 2 curriculum to identify any gaps and recommendations for change and review the time frame for completion of Steps 1 through 4 for new hires or staff newly assigned to the regulatory retail food protection program.
 - Determine if the CFP Field Training Manual and forms need to be revised based on the findings of the PFP TCWG and the Retail Food Safety Specialist Job Task Analysis.

Charge 2: Eliminate the potential redundancy of multiple verification tools (FDA Retail Food Level I Performance Audit and FDA Procedures for Standardization and Certification of Retail Food Inspection / Training Officers) utilized by FDA programs, and work in collaboration with FDA's Center for Food Safety and Applied Nutrition, FDA's National Retail Food Team, and the FDA's Division of Human Resource Development.

- Developed a uniform inspection program audit pilot project jurisdiction feedback on the audit process and forms.
- Seventeen jurisdictions enrolled in the pilot study. Fourteen of those completed the pilot and returned the forms (6 State, 7 County, 1 City jurisdiction).
- Results of the feedback from the Standardization/Certification of Retail Food Safety Inspection Officers Pilot Project was statistically analyzed and categorized.
- The Pilot Project is presented under separate cover as an Issue document titled: Report – CFSRP Part B – Uniform Inspection Program Audit Pilot Project.
- Participating jurisdictions have indicated that both the FDA Standardization Procedures and FDA Performance Audit documents are valuable verification

tools but rather than merging the two documents, they would prefer to have the training tool as an Appendix to Standard 4.

- The Conference recommends that a letter be sent to FDA requesting that they:
 1. Work in collaboration with the Program Standards Committee to revise Standard 4, Uniform Inspection Program, to address the pilot project comments and to assess the criteria in Standard 4 to make it more program focused rather than focused on the individual.
 2. Review for potential revisions to the Standard 4 Uniform Inspection Program criteria and field inspection review process, the following recommendations contained in the CFP CFSRP Uniform Inspection Program Audit Pilot Project Report.
 - Revise the Guide to Conducting a Uniform Inspection Program Audit. Some changes that should be considered include:
 - Developing a more comprehensive guidance document similar to the CFP Field Training Manual contained in Standard 2 that explains the criteria for each component of the audit process;
 - Clarifying the process for selecting the establishments that are to be used for the file and field review;
 - Clarifying the parameters for what is to be included as part of the establishment file review;
 - Providing expanded guidance on the auditor's qualifications, role, and responsibilities.
 - The 10 Program Elements contained in Standard 4 need to be aligned with the Performance Elements and competencies identified in the Standard 2 – CFP Field Training Plan. This alignment would necessitate revisions to the Guide to Conducting a Uniform Inspection Program Audit, Audit Worksheet, and Audit Reference Guide.
 - The presentation of the 10 Program Elements contained in the Standard 4 criteria, the Guide to Conducting a Uniform Inspection Program Audit, and Audit Worksheet need to be presented in a linear format to reflect a logical sequence to the inspection process.
 - The information contained in the Audit Reference Guide should be incorporated into the Guide to Conducting a Uniform Inspection Audit to eliminate the need for multiple documents.
 - The weighting/assessing of each of the 10 Program Elements is not consistent. Some Program Elements, such as the one that relates to assessing risk factors, are much more complex than others, such as the timely filing of reports and documents. A more equitable, objective assessment system should be established for the audit process.
 - The Standard 2 – CFP Field Training Plan builds in the flexibility for a jurisdiction to include performance elements / competencies that are important to their program. The Standard 4 criteria and associated audit

worksheet and guides are more rigid in their format. The audit process and worksheet should be designed to allow jurisdictions the flexibility for assessing inspection Program Elements that are specific to their retail food protection program.

- The field inspection assessment conducted as part of Standard 4 seems to take an all or nothing approach. Item 1 for example pertains to an assessment of observations of risk factors and public health interventions – eleven different categories. If an inspector fails to make an observation of just one item in this category, this Program Element is not met. This level of performance is higher than what is used for FDA Food Code Standardizations. The assessment protocol for Performance Elements needs to be re-evaluated and better guidance provided as to what constitutes an effective performance measurement.
 - Some of the Program Elements are very subjective in nature and do not contain definitive performance measurements, such as producing legible reports. The Program Elements contained in Standard 4 should have defined performance measurements that are quantifiable.
 - The Audit Worksheet should include a comment section so that a more detailed description can be provided as to the observations made of an inspector's performance of any one of the 10 Program Elements.
3. Obtain input and feedback from the CFP Program Standards Committee to assist FDA in the review of the recommendations contained in the CFP CFSRP pilot project report.

Charge 3: Collaborate with FDA, other federal agencies, and professional and industry associations to research what criteria is currently being used to assess the education and training qualifications of independent third party auditors that have been contracted to conduct institutional foodservice, restaurant, and retail food compliance inspections in lieu of a State/local/tribal regulatory retail food program.

- Explored option of obtaining third party audit information from NEHA surveys, but these did not provide any information relevant to the work of this committee.
- Decided to survey States to see where Third Party Audits could/were being utilized to offset regulatory inspections.
- Developed a short four question survey (see attached *Third Party Auditor Survey Summary*).
- Discussed how contract inspectors might be standardized.
- The 2010 CFP delegates were sent a survey but only 36% responded.
- A follow-up email to the non-responsive states was conducted.
- The results of the survey revealed mixed results of the 18 respondents:
 - Only two states indicated that there are third party auditors performing inspections in their states.
 - One State indicated authority to authorize third party inspections of lodging facilities but they were not aware of any current situations.

- One State indicated “consultants” certified to conduct inspections by the State Dept of Public Health could be utilized.
- One State is considering recognizing third party audits for manufactured foods.
- The 2010-2012 CFP CFSRP Work Group is recommending that new charges be assigned to a re-created CFSRP Work Group to:
 - Collaborate with FDA, other federal agencies, and professional and industry associations to evaluate the results of the Retail Food Safety Specialist Job Task Analysis being developed under the umbrella of the PFP TCWG to:
 1. Assess and determine appropriate training and standardization processes/protocols for third party auditors.
 2. Identify any agencies/organizations/working groups currently addressing education and training standards for third party auditors conducting retail food compliance inspections.
 3. Provide a recommendation to the Conference as to what actions/initiatives, if any, need to be undertaken to provide a national structure for ensuring that third party auditors possess the necessary knowledge, skills, and abilities to conduct retail food program compliance inspections.

Charge 4: Evaluate and determine the best approaches to promoting awareness and implementation of the national training model contained in the CFP Field Training Manual and forms, Appendix B 2, Standard 2.

- The 2010-2012 CFP CFSRP Work Group recommends that the FDA serve as the appropriate authority to implement and promote the CFP Field Training Manual. The Work Group has identified the following items to provide assistance to the FDA in their promotional activities:
 - CDC’s Environmental Public Health Performance Standards toolkit, which was created in partnership with National Association of County and City Health Officials (NACCHO), was reviewed and determined to be a valuable model for promotion and implementation of the CFP Field Training Manual.
 - Case studies of jurisdictions that use the CFP Field Training Manual would be a valuable resource in a toolkit provided by FDA to jurisdictions that are working to include the Field Training Manual in their program.
 - Application forms for available financial incentives would be an asset in a toolkit provided by FDA as financial assistance would promote implementation of the Field Training Manual in jurisdictions that are not currently using the Manual.
 - The toolkit should also include references of agencies and subject matter experts to contact for implementation questions.

The Conference recommends that a 2012-2014 Certification of Food Safety Regulation Professionals Work Group be re-created to address the charges listed above.

REQUESTED ACTION:

The Committee submits the following Issues and attachments to the 2012 CFP Biennial Meeting:

- 1) Issue #1: CFSRP Part A – Work Group Report
Recommending acceptance of CFP CFSRP Work Group Report
Attachments to this Issue includes:
 - 2012 CFP-CFSRP Committee Final Report (content attachment to be reviewed and acknowledged by Council II)
 - CFSRP Work Group Roster (supporting attachment)
 - IFPTI Curriculum Framework (supporting attachment)
 - Assessment of Training Needs Survey Summary (supporting attachment)
 - Third Party Auditor Survey Results (supporting attachment)
- 2) Issue #2: CFSRP Part B – Uniform Inspection Program Audit Pilot Project
Recommending acceptance of CFP CFSRP Uniform Inspection Program Audit Pilot Project
Attachments relevant to this Issue include:
 - Uniform Inspection Program Audit Pilot Project Report (content attachment to be reviewed and acknowledged by Council II)
 - Guide to Uniform Inspection Program Audit, Worksheet, and Reference Guide (supporting attachment)
- 3) Issue #3: Recommendations from Uniform Inspection Program Audit Pilot Project
Attachments relevant to this Issue include:
 - The *Uniform Inspection Program Audit Pilot Project Report*, submitted as an attachment to the Issue titled: “CFSRP Part B – Uniform Inspection Program Audit Pilot Project.”
- 4) Issue #4: Recommendations for Promoting the Field Training Manual
- 5) Issue #5: Re-create Certification of Food Safety Regulation Professionals Work Group

ATTACHMENTS:

- IFPTI Curriculum Framework
- Assessment of Training Needs Survey Summary
- The Uniform Inspection Program Audit Pilot Project Report
- Guide to Uniform Inspection Program Audit, Worksheet, and Reference Guide
- Third Party Auditor Survey Results
- CFSRP Work Group Roster

COMMITTEE MEMBER ROSTER:

- See attached: CFP CFSRP Work Group Member Roster (pdf)

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 049
Issue: 2012 II-024**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Report - CFSRP Part B - Uniform Inspection Program Audit Pilot Project

Issue you would like the Conference to consider:

The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group seeks the Conference's acknowledgement of Part B of its report summarizing the data and feedback received from the 14 State and local jurisdictions that participated in the Uniform Inspection Program Audit Pilot Project.

(NOTE: Part A of the Work Group report is submitted in a separate Issue titled: Report - CFSRP Part A - Certification of Food Safety Regulation Professionals Work Group)

Public Health Significance:

The 2010 Conference charged the CFSRP Work Group with coordinating a pilot project that assessed the appropriateness of using a customized version of the FDA Retail Food Level I Performance Audit process and forms with a limited number of jurisdictions enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards. One of the intended outcomes of the pilot project was to assess the feasibility for incorporating the *Uniform Inspection Program Audit* process and *Audit Worksheet* as model template contained in an Appendix to Standard 4.

The CFP *Guide to the Uniform Inspection Program Audit, Audit Worksheet, and Audit Reference Guide* used for the pilot study are available on the CFP web link:

<http://foodprotect.org/about/news/?id=cfp-cfsrp-pilot-project-announcement>

The pilot project report summarizes the feedback from the participating jurisdictions who:

- Determined the strengths and weaknesses of the *Uniform Inspection Program Audit* process, *Audit Worksheet*, instructions, and guidance documents.
- Provided assessments on the ease of use of the documents.
- Determined the length of time and resource commitment necessary to complete the audit process.
- Reviewed the 10 inspection program areas and competencies that comprise the Standard 4 criteria for omissions, additions, and items deemed to be not applicable. (A detailed description of the 10 inspection areas and competencies is contained in the *Audit Reference Guide* available on the CFP web link noted above.)

- Assessed the appropriateness of including the *Uniform Inspection Program Audit* process and *Audit Worksheet* as a model template for Standard 4.

The *Uniform Inspection Program Audit Pilot Project Report* is included with this Issue as an Attachment.

Recommended Solution: The Conference recommends...:

acknowledgement of the Certification of Food Safety Regulation Professionals - Work Group's Report Part B, the summary and findings in the attached *Uniform Inspection Program Audit Pilot Project Report*.

The Conference further recommends that an expression of thanks be extended to the 14 State and local jurisdictions (listed in the report Acknowledgements) for their invaluable contributions.

Submitter Information:

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Attachments:

- "Guide to Uniform Inspection Program Audit, Worksheet, and Reference Guide"
- "Uniform Inspection Program Audit Pilot Project Report 12-01-11"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

CFP CFSRP Work Group 1-4-12

Guide to the Uniform Inspection Program Audit, Audit Worksheet, and Audit Reference Guide

Guide to the Uniform Inspection Program Audit

<http://foodprotect.org/about/news/?id=cfp-cfsrp-pilot-project-announcement>

Audit Worksheet Form

<http://foodprotect.org/about/news/?id=cfp-cfsrp-pilot-project-announcement>

Audit Reference Guide

<http://foodprotect.org/about/news/?id=cfp-cfsrp-pilot-project-announcement>

CONFERENCE FOR FOOD PROTECTION

CERTIFICATION OF
FOOD SAFETY REGULATION PROFESSIONALS
WORK GROUP

UNIFORM INSPECTION PROGRAM
AUDIT PILOT PROJECT REPORT

December 1, 2011

Uniform Inspection Program Audit Pilot Project Report

ACKNOWLEDGEMENTS

The following individuals and/or entities are to be recognized for their invaluable contributions to the development of this report and the implementation of the Uniform Inspection Program Audit Pilot Project

REGULATORY RETAIL FOOD PROTECTION PROGRAM – PILOT JURISDICTIONS

County of Santa Clara, Department of Environmental Health, Consumer Protection Division, CA

Florida Department of Agriculture, Food Safety Division, FL

City of Wichita, KS

Genesee County Health Department, MI

Minnesota Department of Agriculture, Dairy and Food Inspection Division, MN

Olmsted County Public Health Services, MN

St. Charles County, Department of Community Health and the Environment, MO

Taney County Health Department, MO

Yellowstone City-County Health Department dba RiverStone Health, MT

Lincoln-Lancaster County Health Department, NE

Oregon Department of Agriculture, OR

Texas Department of State Health Services, TX

Wisconsin Department of Agriculture, Trade, and Consumer Protection, WI

Wyoming Department of Agriculture, Consumer Health Services, WY

Uniform Inspection Program Audit Pilot Project Report

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CERTIFICATION OF FOOD SAFETY REGULATION PROFESSIONALS WORK GROUP

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Uniform Inspection Program Audit Pilot Project Report

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Uniform Inspection Program Audit Pilot Project Report

Executive Summary

The Certification of Food Safety Regulatory Profession (CFSRP) Work Group, originating with the 2004 Conference for Food Protection (CFP), has been working with representatives of the Food and Drug Administration to create a multi-tiered process for training and standardizing Food Safety Inspection Officers (FSIOs). The goal of this initiative is to develop a nationally recognized training and standardization process for FSIOs that can be used as a model by retail food regulatory programs to enhance the effectiveness of food establishment inspections and increase uniformity among regulatory professionals in their assessment of food safety practices in the retail food industry.

Over the past 5 years, the CFP CFSRP Work Group has used the criteria contained in the *FDA Voluntary National Retail Food Regulatory Program Standards (FDA Program Standards)*, Standard 2 – Trained Regulatory Staff to develop a comprehensive training model for regulatory retail Food Safety Inspection Officers. Jurisdictions using the CFP field training process and forms have indicated an overwhelmingly favorable experience.

Results from the follow-up interviews with jurisdictions using the Standard 2 criteria to train their retail food inspection staff indicated support for the development of an audit tool that mirrored the CFP field training process. The 2010 Conference charged the CFSRP Work Group with coordinating a pilot project to assess the appropriateness of using a customized version of the FDA Retail Food Level I Performance Audit process and forms with a limited number of jurisdictions enrolled in the *FDA Voluntary National Retail Food Regulatory Program Standards*.

The primary objective of the pilot project was to evaluate the *Uniform Inspection Program Audit* process and *Audit Worksheet* as tools for conducting the quality assurance evaluations included as part of Standard 4 – Uniform Inspection Program criteria. The Standard 4 criteria requires an assessment of each inspector's work during at least two joint on-site inspections, with a corresponding file review of at least the three most recent inspection reports of the same inspected establishment. A model template for conducting this type of field assessment is not currently provided in Standard 4. One of the intended outcomes of the pilot project was to assess the feasibility for incorporating the *Uniform Inspection Program Audit* process and *Audit Worksheet* as model template contained in an Appendix to Standard 4.

A pilot application of the *Uniform Inspection Program Audit* process and *Audit Worksheet* was conducted by 14 retail food regulatory programs between July, 2010 and June, 2011. The type and number of jurisdictions that participated in the pilot project are: State (6), County (7), and City (1). The population living in the pilot jurisdictions ranged from 50,000 to more than 500,000. The total number of retail food and foodservice establishments under permit in the pilot jurisdictions ranged from 101 to over 6,000. The pilot jurisdictions were selected from regulatory agencies enrolled in the *FDA Voluntary National Retail Food Regulatory Program Standards* that had reported meeting the training requirements described in Steps 1 through 3 of Standard 2 – Trained Regulatory Staff.

A total of 76 FSIOs were assessed using the quality assurance inspection program criteria contained in Standard 4. A total of 42 FSIOs successfully performed all 10 Program Elements during the audit process. Seventy-one percent (71%) indicated that the uniform inspection program audit process is designed to facilitate a strengths-weaknesses assessment of a regulatory jurisdiction's retail food inspection program

Uniform Inspection Program Audit Pilot Project Report

More than seventy-eight percent (78.6%) of the pilot participants agreed that the Uniform Inspection Program audit process was a valuable use of their jurisdiction's resources. Most respondents were complimentary to the process and identified it as a "good start." These same respondents, however, submitted several recommendations for enhancing the effectiveness of the audit process and audit worksheet. Some of the recommendations were specific to re-evaluating the 10 Program Elements described in Standard 4 criteria.

Key recommendations for enhancing the effectiveness of the Standard 4 include, but are not limited to:

- Aligning the 10 Program Elements described in Standard 4 with the Performance Elements and Competencies contained in the Standard 2 – *CFP Field Training Plan* for new hires or staff newly assigned to the retail food protection program.
- Providing a linear listing of the Program Elements in Standard 4 to reflect an organized flow to the inspection process.
- Providing an assessment system that differentiates between the complexity and importance of the 10 Program Elements, particularly as they are assessed during the inspection review process.
- Clarifying the Standard 4 criteria as to what qualifications an individual charged with assessing the performance of field staff should have and what type of establishments should be selected for the file and field review.
- Re-evaluating the system currently in place for determining compliance with the Standard 4 criteria. The Standards are intended to apply to the operation and management of regulatory retail food programs NOT as assessments of practitioners in the field. The current system weighted on a practitioner's ability to demonstrate the 10 Program Elements during field inspections seems to be skewed more toward an assessment of the individual rather than an evaluation of the regulatory retail food inspection program.

The CFP CFSRP Work Group has prepared two issues related to the Uniform Inspection Program Audit Pilot Project for deliberation at the April 2012 Conference for Food Protection (CFP) in Indianapolis, IN. The issues include a recommendation for the Conference to send a letter to FDA requesting review of the recommendations outlined in this pilot project report including potential revisions to the Standard 4 criteria. The FDA review process is to illicit input and feedback from the CFP Program Standards Committee.

Uniform Inspection Program Audit Pilot Project Report

Introduction

Pilot Project

A pilot program began during the biennial CFP Conference in April 2010 when jurisdictions at all levels were solicited for their participation. During the conference, a fact sheet was distributed to prospective participants with basic information regarding the project. A gap analysis was conducted of the interested jurisdictions to determine if additional solicitation was needed to attain a demographically representative sample to reflect a national composition of regulatory retail food protection programs. In May of 2010, participant jurisdictions were selected and pilot project information packages were distributed.

In June of 2010, conference calls were held with the selected jurisdictions to provide them an overview of project objectives and information regarding the goals, methodology, data collection, and other pertinent issues. The pilot project was then launched in the summer of 2010 with a total enrollment of 14 State and Local jurisdictions. Additional conference calls were held as needed throughout the project and participating jurisdictions were able to correspond as needed with the Project Managers (Ms. Lee Cornman, Ms. Susan Kendrick, and Mr. John Marcello) for answers to their questions and problem resolution.

The pilot project was completed in July 2011 and this report represents the results.

Uniform Inspection Program Audit Pilot Project – Jurisdiction Feedback Form

To facilitate data collection on the project results and use of the Audit Worksheet, a survey instrument was designed for completion by the participant jurisdictions. The survey instrument titled, *Jurisdictions Feedback of the Audit Process and Forms*, (included as Appendix A), was designed to provide a structured process for collecting and analyzing feedback on the project. Results were then tabulated using statistical scoring software and narrative comments were tabulated and analyzed by Committee members.

For purposes of this report, the project results are presented in the same format as the actual Audit Process Feedback Form with each question appearing first followed by the tabulated results depicted in bold and within parenthesis after each response variable. Additionally, a summary of the analysis of the results is provided with tables and graphics where appropriate.

Pilot Project Objectives

The primary objectives of the pilot project focused on an assessment of the Uniform Inspection Program Audit Worksheet (included with this pilot project package) as a tool for the quality assurance evaluations conducted as part of Standard 4. Companion documents that included instructions and formats for using the Uniform Inspection Audit Worksheet were also included with this pilot project package.

Pilot project participants:

- Determined the strengths and weakness of the Uniform Inspection Audit Worksheet; instructions; and guidance documents.

Uniform Inspection Program Audit Pilot Project Report

- Provided feedback on the ease of use of the documents, including the instructions and format. Were jurisdictions able to use the documents independently without direct supervision or oversight?
- Determined the length of time required to use the documents and complete the audit process.
- Determined whether the audit process is an appropriate to assess the FSIO's knowledge, skills and ability when applying the competencies required during a field inspection.
- Reviewed the 10 inspection program areas and competencies that comprise the Uniform Inspection Program Audit Worksheet for omissions, additions, and items they deem to be not applicable.
- Determined whether the audit process is properly positioned as part of the Standard 4 criteria.

Uniform Inspection Program – Audit Worksheet

A significant component of the pilot project was the use of the Uniform Inspection Program – *Audit Worksheet*. This worksheet was developed during 2008 and 2009 after the CFP Certification for Food Safety Regulatory Professionals Work Group completed a comprehensive review of the field audit process used by FDA for their Consumer Safety Officers. The Uniform Inspection Program – *Audit Worksheet* was designed to be used by the jurisdictions as a quality assurance tool to measure the effectiveness of a jurisdiction's inspection program based on the performance elements and competencies identified in the Standard 2 – Trained Regulatory Staff, Field Training Plan. The use of the Uniform Inspection Program Audit provides a mechanism for regulatory jurisdictions to conduct quality assurance evaluations of their retail food protection programs while assessing the strengths and weakness within their training program for Food Safety Inspection Officers.

The data and feedback received from the pilot project jurisdictions on actual use of the Uniform Inspection Program – *Audit Worksheet* provide important insights on the strengths and weaknesses of using the Standard 4 criteria and assessment protocol as a quality assurance measurement. As a result of input received during the project, the CFP Certification for Food Safety Regulatory Professionals is submitting an issue to the 2012 Conference recommending that the Standard 4 criteria be reviewed, and revised were appropriate, to better reflect a comprehensive inspection program quality assurance protocol and measurement.

Terminology

For purposes of this report, the following terms and acronyms are defined:

Audit Worksheet – *Worksheet* used by jurisdictions during the two joint food safety inspections to assess FSIOs ability to demonstrate specific performance elements and competencies

FSIO – Food Safety Inspection Officer is an individual that has been newly hired or newly assigned to a regulatory retail food program

Uniform Inspection Program - Jurisdiction Audit Feedback Form – The survey instrument used during the pilot project to collect data and feedback from jurisdictions on the uniform inspection program audit process and forms. Terms in the narrative of the report pertaining to “survey”; “survey instrument”; and/or “survey questions” are direct references to the Jurisdiction Audit Feedback Form.

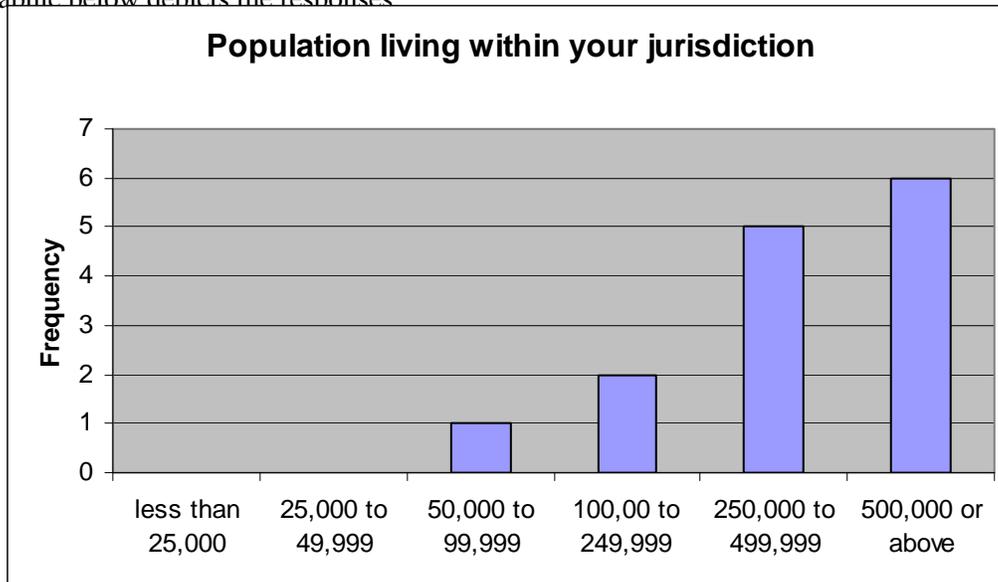
Uniform Inspection Program Audit Pilot Project Report

Section I - Demographics of Participant Jurisdictions

What is the population living within your Jurisdiction?

- A. less than 25,000 (0) B. 25,000 to 49,999 (0) C. 50,000 to 99,999 (1)
D. 100,000 to 249,999 (2) E. 250,000 to 499,999 (5) F. 500,000 or above (6)

A total of 14 jurisdictions participated in the Audit Pilot Project. The population in these jurisdictions ranged from one jurisdiction with a population of 50,000 to 99,999 to 11 jurisdictions with populations of 250,000 or higher. Of the jurisdictions responding, 43% had population sizes of 500,000 or higher. The graphic below depicts the responses.

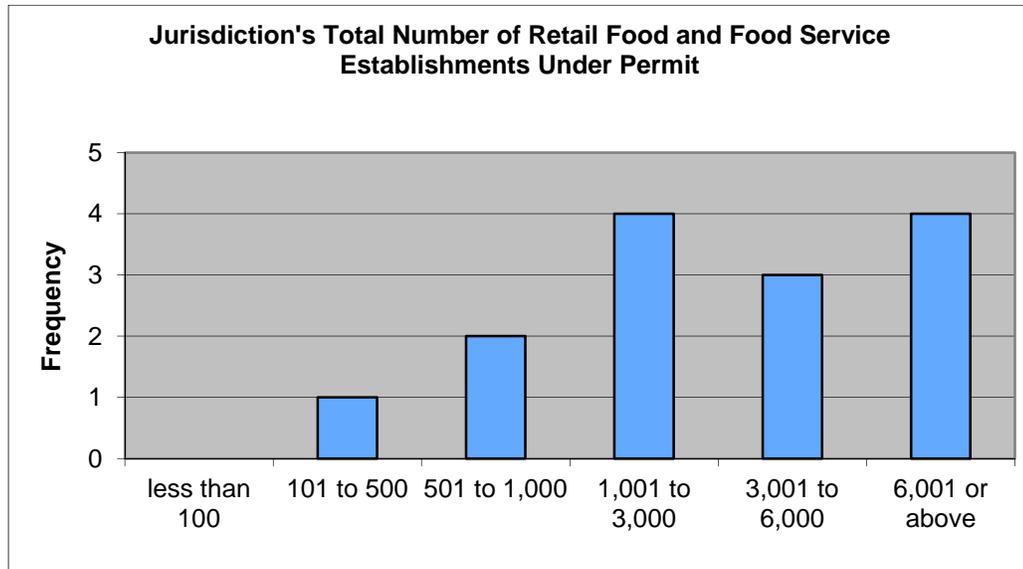


What is your Jurisdiction's total number of retail food and foodservice establishments under permit?

- A. less than 100 (0) B. 101 to 500 (1) C. 501 to 1,000 (2)
D. 1,001 to 3,000 (4) E. 3,001 to 6,000 (3) F. 6,001 or above (4)

Of the 14 jurisdictions responding, no jurisdictions had less than 100 foodservice establishments under permit, while seven reported 3,001 or more such establishments. Fifty-nine percent (59%) of the jurisdictions reported having 3,001 or more establishments under permit. Twenty-nine percent (29%) of the jurisdiction reported having 6,001 or more establishment under permit. The graphic that appears at the top of the next page depicts the responses.

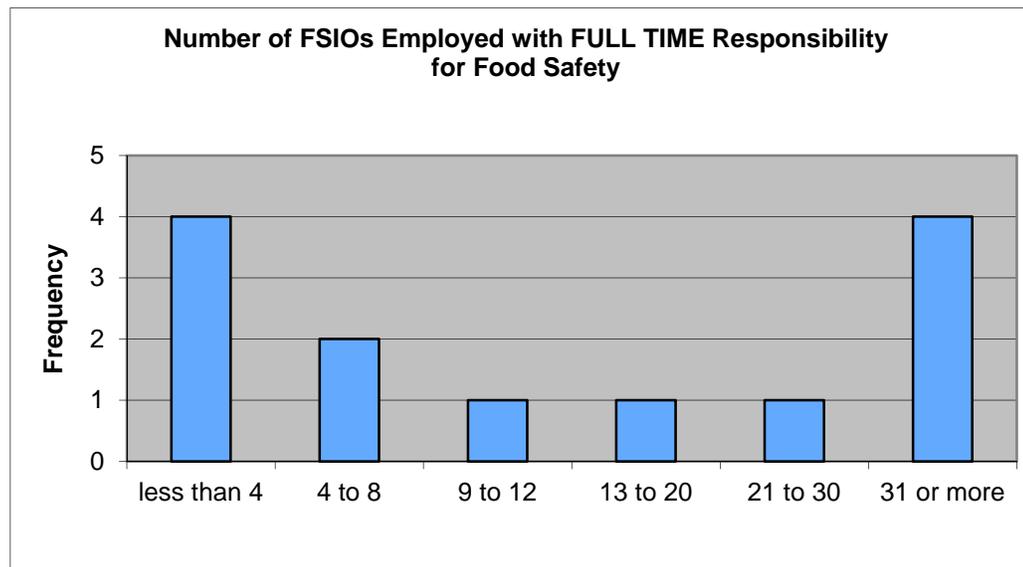
Uniform Inspection Program Audit Pilot Project Report



How many Food Safety Inspection Officers are employed by your Jurisdiction with FULL TIME (i.e., 100%) responsibility in the food safety program?

- A. less than 4 (4)
- B. 4 to 8 (2)
- C. 9 to 12 (1)
- D. 13 to 20 (1)
- E. 21 to 30 (1)
- F. 31 or more (4)
- G. No Response (1)

Of the 13 jurisdictions responding, four (31%) reported having less than 4 full-time FSIOs while four (31%) reported having 31 or more full-time FSIOs. The median number of responding jurisdictions was 9 to 12 full-time FSIOs. The chart below depicts the responses.

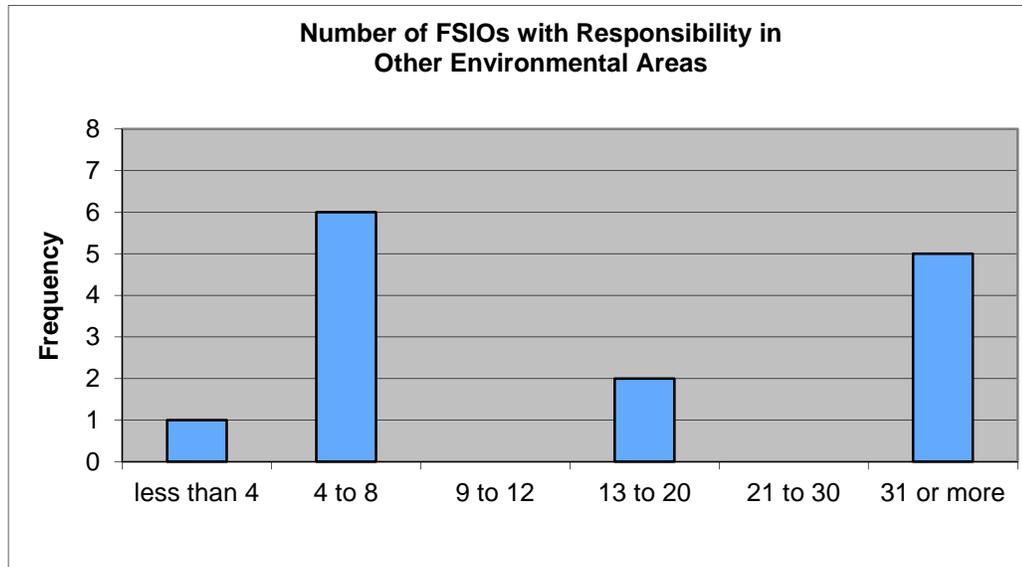


Uniform Inspection Program Audit Pilot Project Report

How many Food Safety Inspection Officers are employed by your Jurisdiction with responsibilities in other environmental health program areas in addition to their retail food protection duties?

- A. less than 4 (1) B. 4 to 8 (6) C. 9 to 12 (0)
D. 13 to 20 (2) E. 21 to 30 (0) F. 31 or more (5)

Of the 14 jurisdictions responding, the number of FSIOs with responsibilities in other environmental health program areas in addition to their retail food protection duties ranged from one jurisdiction with less than 4 FSIOs with alternate assignments to five jurisdictions (36%) having 31 or more FSIOs with alternate assignments. The graphic below depicts the responses.

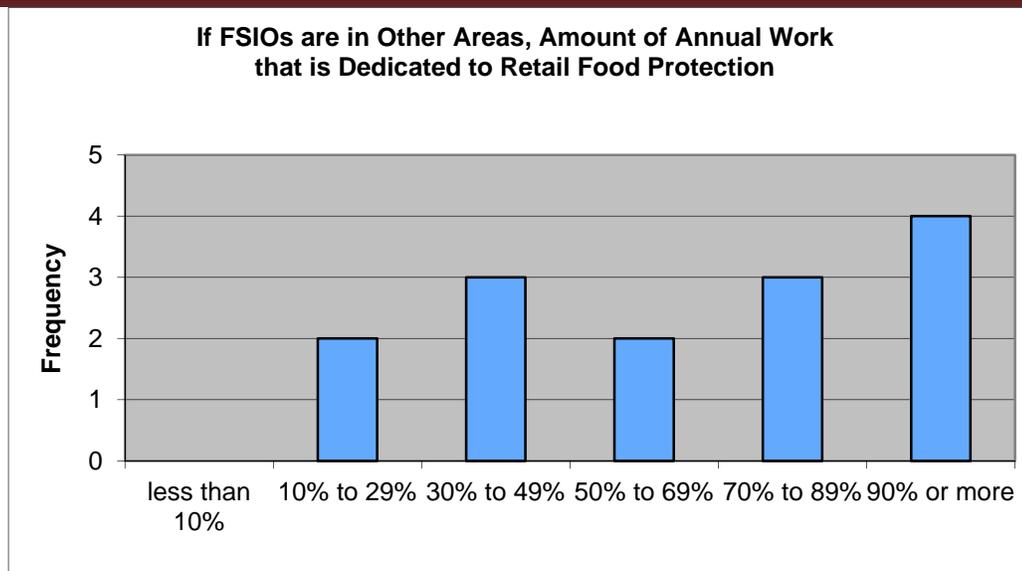


If your Food Safety Inspection Officers have responsibilities in other environmental health program areas, on average, how much of their annual work plan is dedicated to the retail food protection program?

- A. less than 10% (0) B. 10% to 29% (2) C. 30% to 49% (3)
D. 50% to 69% (2) E. 70% to 89% (3) F. 90% or more (4)

Of the 14 jurisdictions responding, two jurisdictions reported that their FSIOs dedicate, on the average, 10% to 29% of their annual work plan to the retail food program, while seven jurisdictions (50%) reported that their FSIOs dedicate 70% or more on their retail food program responsibilities. Twenty nine percent (29%) reported that their FSIOs dedicate 90% or more percent of their annual work plan to the retail food protection program. The following graphic appearing at the top of the next page depicts the response.

Uniform Inspection Program Audit Pilot Project Report



Is your Jurisdiction AWARE of the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*?

Yes (14) No (0)

All 14 jurisdictions responding reported that their jurisdiction is aware of the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*.

Is your Jurisdiction ENROLLED in the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*?

Yes (14) No (0)

All 14 jurisdictions responding reported that their jurisdiction is enrolled in the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*.

If enrolled in the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*, has your jurisdiction MET all the Standard 2 – Trained Regulatory Staff criteria?

Yes (14) No (0)

All 14 jurisdictions responding reported that their jurisdiction meets the Standard 2 – Trained Regulatory Staff criteria contained in the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*.

Does your Jurisdiction have a written field training plan that identifies the specific job performance elements and competencies a FSIO is expected to demonstrate during foodservice and retail food inspections?

Yes (14) No (0)

All 14 jurisdictions responding reported that their jurisdiction has a written field training plan that identified the specific performance elements and competencies a FSIO is expected to demonstrate during inspections of foodservice and retail food establishments.

Uniform Inspection Program Audit Pilot Project Report

If your answer to Question #9 above is YES, please identify the type of written FSIO field training plan that is in use within your jurisdiction.

Of the 14 jurisdictions responding, 12 jurisdictions (86%) indicated that they use a customized version of the CFP Field Training Plan included as an Appendix with Standard 2 – Trained Regulatory Staff.

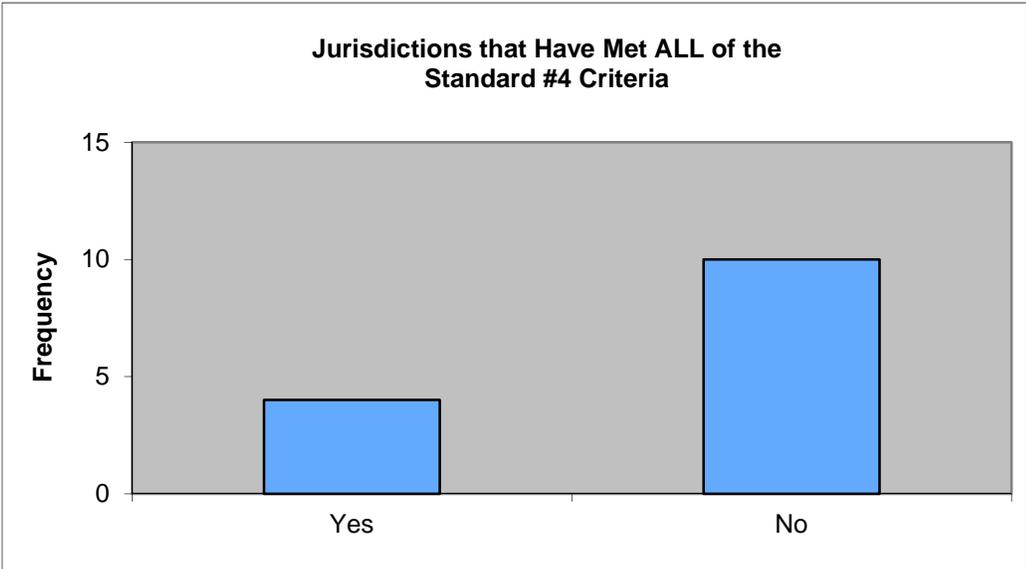
| | |
|---|--|
| <p>A. The CFP Field Training Plan as presented in Appendix B-2, Standard #2 – Trained Regulatory Staff, <i>FDA Voluntary National Regulatory Retail Food Program Standards</i> (0)</p> | <p>C. A Field Training Plan developed in-house that meets the intent and scope of the CFP Field Training Plan (1)</p> |
| <p>B. A customized version of the CFP Field Training Plan, Appendix B-2, Standard #2 – Trained Regulatory Staff that is specific to our jurisdictions retail food inspection protocol (12)</p> | <p>D. Other (1)</p> |
| <ul style="list-style-type: none"> • We are moving from a Field Training Plan program developed in-house to a customized version of the CFP Field Training Plan. Mostly we are using a customized version. • We have written policies and procedures for staff to follow while conducting inspections. | |
| <ul style="list-style-type: none"> • We have specific protocols for inspections, training and enforcement that closely emulate federal standards and include state of Michigan accreditation standards. • Our field training worksheet is almost identical to the one in Appendix B, except some sections are removed or slightly edited. For example, we don't use the section about sampling. • Our agency has added the following to the CFP Field Training Plan: 1) the FSIO completes an open-book exercise on the content of the Texas Food Establishment Rules; 2) the FSIO must complete a citation exercise on the first 25 independent inspections. • We have adopted the CFP Field Training Plan Appendix B-2 as presented and all FSIO's/Inspectors have completed the necessary training needs as specified by the Taney County Health Department, TCHD. The training involves mandatory state trainings and jurisdiction specific requirements as determined by the agency administrator. | |

If enrolled in the *FDA Voluntary National Retail Food Regulatory Program Standards*, has your Jurisdiction MET all the Standard #4 – Uniform Inspection Program criteria?

Yes (4)

No (10)

While all 14 jurisdictions reported meeting the Standard 2 – Trained Regulatory Staff criteria contained in the *FDA Draft Voluntary National Retail Food Regulatory Program Standards*, only 4 (29%) indicated they met the Standard 4 – Uniform Inspection Program criteria. The graphic appearing at the top of the next page depicts the response.



Uniform Inspection Program Audit Pilot Project Report

Section II - Guide to Uniform Inspection Program Audit - Content Evaluation

Were the instructions given in the *Guide to the Uniform Inspection Program Audit* sufficient for you to understand and implement the uniform inspection audit process in your jurisdiction?

Yes (11)

No (3)

The majority of respondents (78.6%) indicated that the instructions given in the Guide were sufficient for understanding and implementation of the audit process.

Please put an "X" in the boxes below to identify any Section(s) of the *Guide to the Uniform Inspection Program Audit* you believe needs improvement. Please provide your recommendation(s) for improving the *Guide* in the space provided for each subject area. The page number from the *Guide* for each subject area is included in parentheses. If you have no recommended changes for a specific Section of the Guide, leave the corresponding box and comment area blank.

GUIDE TO THE UNIFORM INSPECTION PROGRAM AUDIT

Preparing for Pilot Project Participation (page 1)

The write-in comments for this section are summarized below:

- Recommend clarifying that the review of the most recent three "inspection reports" are "regular" or "routine" inspections.
- The link to the Clearinghouse Q&A would not work.
- My overall comments on the document are that it's not helpful. We need a document similar to what was developed for Standard 2 that really explains the criteria for each component of the standard. This doesn't do it. We used it for about 4 staff members and found it to be too long and too cumbersome. We developed a one page summary that we used for the rest of our staff with whom we have done the joint inspections. The major item missing is the competencies, the criteria, for the ten elements--what is acceptable and what is not acceptable
- After the following statement:
"After completing the training requirements in Steps 1 through 3, Standard 2, Trained Regulatory Staff,"
List the steps 1 through 3. This gives the reader the needed information instead of having to look on another document to know what the 3 steps are. It may be helpful to describe/define "inspection quality" and the value of assessing quality via an audit process.

Purpose of the Uniform Inspection Program Audit (page 2)

The write-in comments for this section are summarized below:

- Purpose of the UIP could have been expanded and explained a little better.
- The explanation of the purpose of the Uniform Inspection Program Audit was clear and understandable.

Uniform Inspection Program Audit Pilot Project Report

Selection of Establishments (page 2)

The write-in comments for this section are summarized below:

- How to select establishments was confusing. One question that was raised was how we could ensure establishments were not selected (or guard against) because of the amount of time an inspection would take (i.e. pick the “easy” ones).
- There should be additional clarification on determining what facilities should be selected as audit locations. Go back 3-5 years in the file to establish the firm has a history that needs follow-up, since many questions address issues from follow-up on previous violations and long term compliance. For example, pick complex establishments to make sure they are representative of all the components you need to evaluate.
- What are the standard 4 criteria that are to be followed in selecting establishments for the audit?
- The highest risk category establishments should always be included in the evaluation process even if the majority of the workload in the FSIO's jurisdiction is low risk.
- Selection of establishments should be from categories 3 and 4 from 2009 FDA Food Code Annex 5, Table 1 - Risk Categorization of Food Establishments,
- More guidance, education and direction to managers to ensure that they use strategies that involve randomization which will significantly help reduce potential for bias from a statistical standpoint. This will increase the reliability of the data collected.
- List the criteria from Standard 4. This gives the reader the needed information instead of requiring the reader to look on another document.

File Review – Selected Establishments (page 2)

The write-in comments for this section are summarized below:

- Include direction to compare what has changed at the store to the file history (name, operations, menu, etc.) so the need for changes in risk category or inspection frequency are identified.
- Must all 3 inspections in the file review have been completed by the inspector who is being audited? If so, how should newer inspectors be audited? For example, if a restaurant receives one inspection per year, it may be up to 4 years before an inspector can be audited.
- File review could be more clearly defined to include all auxiliary activities related to the establishment e. g. sampling, consumer complaints etc. that may not be included in the 3 most recent inspection reports.
- There needs to be more explanation for what items of the inspection report is to be reviewed during the file review.

FSIO's Role During Joint Field Inspections (page 2)

The write-in comments for this section are summarized below:

- To expect no communication between the FSIO and the auditor is unrealistic. There will be questions asked from both parties.
- The statement "The FSIO is responsible for independently conducting the inspection while being evaluated by the auditor." gives a mixed message, as the audit isn't about evaluating the FSIO. The audit's purpose is to identify strengths and weaknesses within the training program as one means of assessing quality.

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Uniform Inspection Auditor's Role During Joint Inspections (page 2)

The write-in comments for this section are summarized below:

- This is the hardest part of the audit program. When should the auditor step in if the FSIO is giving incorrect corrective actions or missed a potential imminent health hazard. It is very hard to watch the inspection and not give input. It really shows the value of standing back and observing what is going on in the facility as a whole and not jumping to details.
- There is no guidance included for auditor qualifications, only their role during the inspection. This can be difficult for some jurisdictions when there are union contracts, etc. There should be additional training requirements for the auditors specifically on the subject of auditing, since that will make a difference in how the audit protocol is applied and interpreted in the field.
- Please clarify whether or not the auditor should step in if the inspector misses a violation: a) during the inspection? b) at the end of the inspection, before leaving the facility, or c) not at all? Does this answer depend on the nature of the violation, e.g. a non-critical violation vs. a critical violation or a violation that involves adulteration (for example, an employee is about to serve a contaminated food item to a customer)?
- Needs to be expanded so this will not be a re-standardization. Also might list qualifications for the auditor. If the FSIO's are one's own employees then there might be a "halo effect."
- The auditor will have a role during the inspection. The auditor--that third person--will have an impact on the person in charge as well as the FSIO being audited. It needs to be acknowledged and recognized that the FSIO will think their manner of conducting an inspection is being assessed--as it is.
- Auditors need some more education in regard to their role during the inspection.
- Provide a systematic selection process for choosing establishments randomly with more specific criteria such as: establishments must have had an inspection within the last week/month/year; the establishment must be open for business for a set amount of time prior to the audit (such as 1-2 years); the inspector should have previously inspected the select establishments for a specified number of visits (for those jurisdictions with rotating work lists) prior to the audit; to name a few.
- One establishment selected for our audit had not been inspected for over one year and made it hard to track past inspection findings, compliance, and enforcement. Some other establishments selected for the audit were previously inspected by a different inspector which also made it hard to track. It seems that a lack of more specific selection criteria could possibly skew audit results.
- List the standard 4 criteria. This gives the reader the needed information instead of requiring the reader to look on another document.

Pilot Project Steps – Uniform Inspection Program Audit – Step 1 (page 2)

Only one generic comment for this section:

- This looks good

Pilot Project Steps – Uniform Inspection Program Audit – Step 2 (page 3)

Only one generic comment for this section:

- Step 2 This looks good

Uniform Inspection Program Audit Pilot Project Report

Pilot Project Steps – Uniform Inspection Program Audit – Step 3 (page 3)

The write-in comments for this section are summarized below:

- The guidance is confusing when it states "establishments used in the audit must be selected in accordance with the protocol outlined in Appendix D, Std 4". It should clearly state the "number of establishments that need to be selected" instead of just "establishments" since that appendix only addresses the statistical calculations and the number of establishments needed. The way it is currently written implies that protocol for the actual facility selection is found in Appendix D.
- The guide states that "Establishments used in the audit must be selected in accordance with the protocol outlined in Appendix D, Standard 4." This appendix does not specify how establishments should be selected. Establishments selected should be from categories 3 and 4 from 2009 FDA Food Code Annex 5, Table 1 - Risk Categorization of Food Establishments
- Step 3 looks good.

Pilot Project Steps – Uniform Inspection Program Audit – Step 4 (page 3)

The write-in comments for this section are summarized below:

- Again, the competencies for the 10 criteria are not outlined in this document, nor is the audit tool clearly defined.
- Found the Uniform Inspection Program Audit Reference Guide to be very helpful as an auditing tool for determining competencies to observe for each inspection program area. Would prefer using it not only in conjunction with this pilot project, but for future audits as well. The examples were helpful and kept the auditor on task
- Include the 10 inspection program areas listed in standard 4, so the reader doesn't have to refer to another document

Pilot Project Steps – Uniform Inspection Program Audit – Step 5 (page 3)

The write-in comments for this section are summarized below:

- Unclear on what is being looked at by the auditor during the file review. Make sure the FSIO acts on repeat violations or the establishment is acting upon their risk control plans?
- I think I understand, but not sure why the Guide says that the auditor should complete the "Audit Results Summary section of the Audit Results Summary and FSIO Training Plan Form." Why not just say that the auditor should complete the "Audit Results Summary and FSIO Training Plan Form"?
- The following sentence "The Audit Results Summary establishes a method for providing feedback to the FSIO and identifies any inspection program areas or competencies the FSIO needs additional training on." Is confusing. It gives the impression that the Audit and the Assessment of Training Needs processes have the same purpose. Because the 10 inspection program areas are broad (not linked to specific performance elements like the Assessment of Training Needs is) it may be inaccurate to identify an individual's specific training needs based upon 1 or 2 inspections where an auditor is present. The audit seems more suited to identifying areas where further policy development and/or training is needed for all (and where overall strengths are found).

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Pilot Project Steps – Uniform Inspection Program Audit – Step 6 (page 3)

The write-in comments for this section are summarized below:

- It was not clear from the guide that for the pilot project this calculation was an optional step. Only a portion of our staff was audited to do this project, so this step was not possible. However, the step would be clear if the document was for guidance to evaluate the entire program and not just for the purpose of completing this pilot project.
- Attach the tables from Appendix D, Standard 4, so that the reader can access all needed information in one place.

Pilot Project Steps – Uniform Inspection Program Audit – Step 7 (page 3)

No comments were submitted for Step 7

Uniform Inspection Program Audit Pilot Project – Reference Documents (page 4)

Only one comment for this section:

- Add 2009 FDA Food Code as a reference document

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Section III Audit Worksheet and Audit Reference Guide – Content Evaluation

The 10 Uniform Inspection Program Components included on the *Audit Worksheet* (and identified on page 1 of the *Audit Reference Guide*) sufficiently address inspection uniformity, inspection quality, inspection frequency, and uniform application of the regulatory jurisdictions retail food safety regulations and administrative procedures and are appropriate for all retail food program inspection staff. (Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).

Strongly Disagree

1

2 (1)

3 (3)

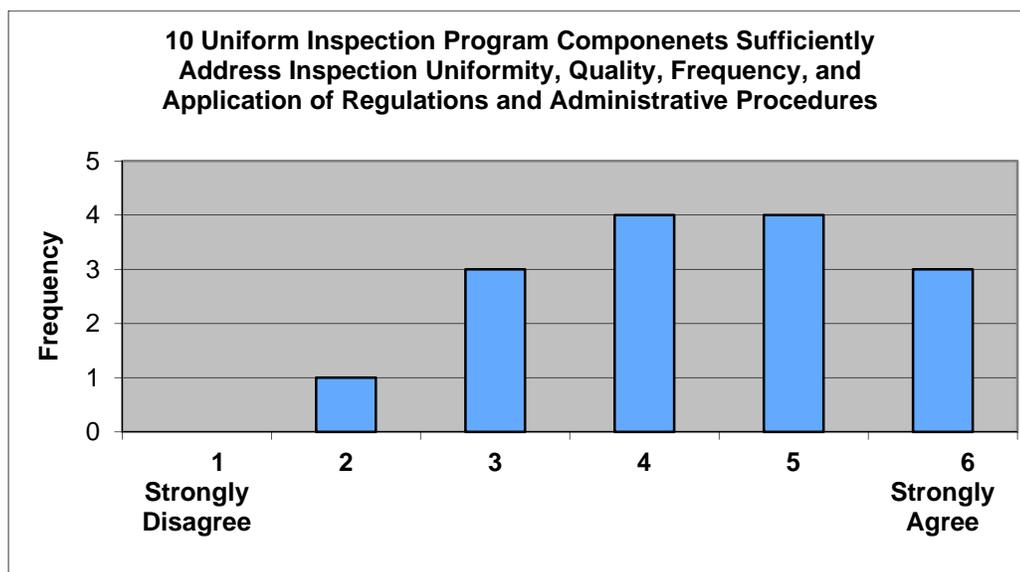
4 (3)

5 (4)

Strongly Agree

6 (3)

Responses to this statement ranged from a low of 2 to a high of 6 with a mode (most frequently selected response) of 5. The mean (average) was 4.36 and the median (midpoint) was 4.5. Half of the jurisdictions (50.0%) selected 5 or higher, agreeing that the 10 performance elements sufficiently address the knowledge and skills a FSIO needs to effectively conduct independent inspections. The graphic below depicts the responses:



Please explain the reasons used to determine this rating.

Positive comments:

- Components made sense and had a lineal path.
- The audit guide explains the worksheet well. The program works well for local health depts. in Michigan that inspect retail food service establishments. Our state accreditation requirements are closely matched to the inspection components.
- All these components are the key to performing the job effectively because they cover all the knowledge, skills and abilities that FSIO's are expected to have to be successful.
- The audit reference guide was helpful in determining what performance elements should be considered for each section of the audit form.

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Challenges:

- It was sometimes difficult to distinguish which category to debit some of the observations because they either blended together or required double debiting because of the nature of the observation.
- Some of the points are subjective and lead to individual interpretation.
- The Audit Worksheet is all subjective; there are no objective standards set for the competencies.

Recommendations for improvement:

- It could be broken down to be more detailed, to be a bit more specific to the needs.
- I believe item #1 can be best determined by creating a checklist, then based on a percentage, the auditor notes YES or NO.
- The identified categories are all there. However, the vagueness of the questions, the order in which the questions were organized, and the performance areas/competencies that are used as examples for each question in the guide do not seem logical for the purpose of conducting a field audit. Many times, the performance area/competency listed in the Reference Guide did not seem related to the question. Also, the weight of each question (i.e. the number of inspectional performance areas/competencies that each question was supposed to represent) did not seem equal for all questions. For example, questions 1 and 2 represented 5 or more competencies while question 10 represented only 1 competency. Additionally, for remotely located staff there can be some difficulty with establishing question 10 based on program policy (we typically mail all inspection and tracking documents in once a week, not per inspection, which is difficult for the auditor to determine while still completing the worksheet for one inspection and presenting findings in a timely manner to the auditee). There also seems to be overlap between question 2 and subsequent questions that discuss documentation in the Reference Guide. Proper documentation (whether a violation in routine inspection report as repeat occurrence or with additional regulatory documentation such as sanitary notice, embargo, etc.) seems to fall under both 2 and 6. There also appears to be overlap between 2 and 4 in regards to documentation in the inspection report for the code provisions (is it there vs. is it accurate?). The documentation for 7 could also be interpreted as being under 2 as well. Items 8-10 might also be better evaluated at a program level through management of resources and follow-up instead of at the individual inspection level. Whether or not the required frequency of inspection is being met could be based on many different factors and I don't think that is captured here (resources vs. improperly assigned risk category vs. management of facility inspection schedules based on risk). Number 8 is limited to long term corrections for continued out of compliance and could be better represented as long term corrections for all out of compliance findings (as opposed to just repeat violations).
- I wish there were a good way to include inspectors' demeanor as part of this audit. For example, focusing on educating the restaurant employees and fostering an atmosphere of change (when necessary), as opposed to focusing on the enforcement of violations through use of force or intimidation.
- Found competencies #1 and #4 to be similar when completing the audit worksheet. The 10 uniform component questions were vague and need to be more specific for the auditor to follow.
- The program components provide a means to sufficiently assess inspection frequency and uniformity (across the 10 components). The 10 components do not adequately address inspection quality. Uniformity does not always equal quality. In order to promote success in long-term control of foodborne illness risk factors, the program components should include an assessment of a food program's capacity for conducting effective risk-based inspections.

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The required minimum of two retail food establishment file reviews and joint field inspections for each FSIO is the appropriate number for completing a uniform inspection program audit

Yes (11)

No (2)

Both (1)

The majority of jurisdictions 78.6% felt that the minimum of two retail food establishment file reviews and joint field inspections for each FSIO is the appropriate number for completing the inspection program audit.

Explanations provided for the responses to the question above.

YES – the minimum of two file reviews and joint inspections are appropriate

- Agreed. Was hard for us to meet this requirement due to the time it took from other tasks.
- The first joint inspection was done incorrectly by the auditor. This is mostly because the auditor did not know how to complete the audit worksheet. Had the audit been done correctly the first time, two inspections would be enough to complete the audit.

NO – the minimum of two file reviews and joint inspection are appropriate

- We feel that only two inspections do not give the training coordinator enough information to get an accurate feedback on what is lacking in the training program. How do you determine if the presence of the auditor is causing the FSIO to be nervous and making errors in the inspection? We are not sure as to how many, but enough to build up a comfort level with the auditor to remove the anxiety. This may be something that has to be developed at the beginning with a trainee and on through a mentor program or audit program with the supervisor.
- It depends on the number of FSIO's on staff. For instance, if we have only a few FSIO's, we need to do more than just two otherwise this can lead to major statistical analysis problems like; lack of internal consistency, unreliability of the data and the validity of the data can be questionable. Increasing the minimal number of file reviews and joint field inspections across the board can take care of these three major statistical analysis problems significantly. Also, encouraging the auditor's to select facilities to be inspected on a proven methodology like randomization thereby eliminating some forms of bias that might interfere with the credibility of the data.

Both YES and NO – the minimum of two file reviews and joint inspection are appropriate

- It depends on how often an audit is conducted. I would think that 2 file reviews and inspections per FSIO every 6 months would be ideal. Less often (once per year) would be acceptable if other uniformity controls were in place, for example, requiring FSIOs to conduct joint inspections with each other every so often, so they can see their differences for themselves. We have found that this is a good way to discover questions you didn't know you even had.

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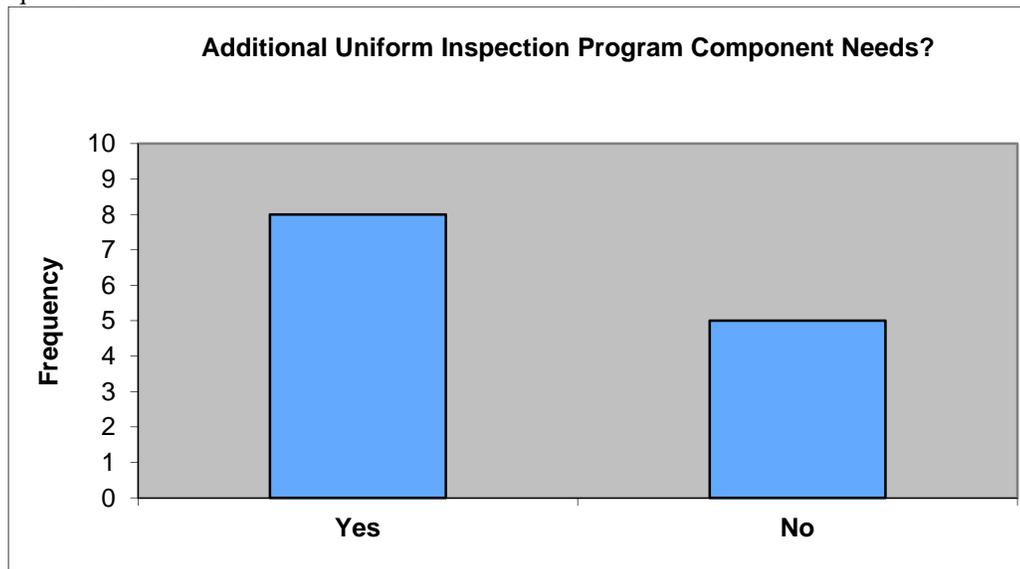
Are there additional Program Components that you believe are necessary in order to effectively conduct a uniform inspection program audit but are MISSING from the current *Audit Worksheet*?

Yes (8)

No (5)

No Response (1)

Of the 13 jurisdictions responding, eight jurisdictions (61.5%) indicated that the current Audit Worksheet did not contain all the program components that are necessary to effectively conduct an inspection program audit. The graphic below depicts the response to this question.



Please identify and describe these missing components

YES– additional program components need to be added to effectively conduct a uniform inspection program audit

- Issues directly related to scoring an inspection. Feds/State do not score inspection. This can get “sticky” when doing an audit.
- Does the FSIO verify compliance with local requirements (i.e., is the establishment properly permitted based on the local/state permit requirements and meets the jurisdiction’s requirements regarding food manager and employee food handler permit training requirements)? Perhaps this is to be included in #9.
- Some sort of weighting to make not meeting number 1 to be of greater import statistically than the other items like number 10. Maybe breaking the large section questions into multiple questions?
- The importance of determining risk factors is unquestionable. However good retail practice need to be represented in a distinct manner whether it be in a separate category or made clearer in the categories already developed.
- I was unable to find a good place to document items related to professionalism as exhibited by the FSIO. I was looking for something similar to the professionalism performance elements found in the CFP training guide.
- The program components should include an assessment of a food program's capacity for conducting effective risk-based inspections.

NO – additional program components need to be added to effectively conduct a uniform inspection program audit

(No specific comments provided on feedback form for the “NO” responses)

Uniform Inspection Program Audit Pilot Project Report

Were any of the 10 Program Components consistently difficult to assess during the uniform inspection program audit?

Yes (8)

No (4)

No Response (2)

Two-thirds (66.7%) of the 12 jurisdictions responding indicated that some of the 10 Program Components were consistently difficult to assess during the inspection program audit.

If you have identified DIFFICULT TO OBSERVE Program Component(s), what factors made them difficult to observe?

ITEMS 1, 3, 6

- Please refer to #1 of this section. Both are asking if the FSIO interpret enforcement procedures that are similar. For instance, 3 is looking at part to policies and procedures while 6 is looking at jurisdictions administrative procedures. One and the same, although the examples do give some differentiation.

ITEM 3

- Unclear – Explain what “Interpret” means or put into context.

ITEM 5

- This item could be addressed using a database and is harder when agency (local) depends on “Paper” review.
- The Audit Worksheet is vague and it is very hard to use as a standalone document. The questions do not clearly indicate or represent the performance areas/competencies that the Guide indicates. The 10 program components on the Audit Worksheet are not coordinated to flow with the normal inspection process itself. It also does not follow the same flow that the Abbreviated Field Inspection Training Worksheet has, which was used as a secondary reference when additional guidance was needed to connect observations from the audit with the proper program area/competency for documentation.
- It was difficult to assess review of past inspection findings when there were no violations present or when a different inspector previously inspected. Our files are mostly electronic.

ITEM 6

- File review may not have included any inspections that required follow up, or the previous inspections for the establishment may have been conducted by a different inspector. If the current joint inspection required a follow up, I would generally have completed my audit before the follow up inspection came due. (Perhaps I should have kept the audit "open" until after the follow up inspection, a month or so later?)
- The Audit Reference Guide gives the following examples of competencies for Item 6
 - *FSIO follows the jurisdiction’s compliance and enforcement policies and procedures regarding repeated and unresolved violations.*
 - *FSIO follows the jurisdiction’s policy in regard to disclosure of confidential information.*

There was never an opportunity to assess FSIO adherence to our policy regarding of confidential information during the audit process.

ITEMS 8 and 9

- We are still working on some of the components of the standards such as a uniform system for determining the risk category for a facility. We did not run across a situation where we had a long term control problem that could be addressed with the options listed in item 8 nor have we consistently used these options as a tool.

ITEM 9

- It’s easy to observe licensed risk category but difficult to observe FSIO confirming the license process codes used in WI match the processes the establishment is engaged in.

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ITEMS 8 and 10

- If you are only doing two joint inspections with the FSIO, documenting long term issues may be difficult to document. On item 10 our program does this but indirectly by receiving a report from our IT department when each inspector downloads their inspections.

Were there specific Program Components that FSIOs consistently experienced DIFFICULTY with?

Yes (10)

No (4)

Please identify these by placing an “X” adjacent to the item number of the Performance Element(s) FSIOs had DIFFICULTY with. The Item number below corresponds to the same item number on the Audit Worksheet.

Audit Worksheet

Item 1 (4)

Item 2 (1)

Item 3 (1)

Item 4 (2)

Item 5 (5)

Item 6 (1)

Item 7 (1)

Item 8 (3)

Item 9 (1)

Item 10

Based on the responses above, 10 jurisdictions (71.4%) indicated there were Program Components that FSIOs had consistent difficulty with. These pilot project results appear to indicate that there are several Program Components that should be reviewed for clarification or re-assessed to address the specific comments presented in the next section.

If you have identified Program Component(s) that FSIOs experienced DIFFICULTY with, what factors contributed to their challenges

ITEM 1

- How many of the Risk Factors would an FSIO be allowed to miss? Very few FSIOs inquire about health policies and perhaps missed a food cooling in the walk-in cooler.
- There was almost always some variation between the auditor and the FSIO. If the inspector misses just one violation, or forgets to ask about food source, or fails to take a temperature of an item that was cooked, then Item 1 is marked NO. So more often than not, our FSIOs did not meet item 1.
- Inspectors did not like the change of form from critical/non-critical to in/out/not observed/not applicable. Once the form was explained while looking at an inspection, they understood it better. It is also now used as a tool to educate operators to the overall picture of food safety in their establishment.

ITEM 2

- Legibility is in the eye of the beholder--handwriting that one person can easily read may not be easily read or understood by another person.

ITEM 3

- This program component was a catch all for not following our local jurisdictions policies and procedure. It is important that we capture the specific similar problems on the notes section to determine where the actual problem lies, especially for training purposes. There are too many variables in this program component that lead to non-compliance.

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ITEM 4

- The FSIO did not always give the violation citation on the narrative. How many times does it take before the Auditor says that the FSIO gets a "did not meet the competency?"

ITEM 5

- Our agency does not have a computer system to track inspections. FSIOs do not have files in field and makes it hard to show facility staff past practices.
- What is meant by "act on repeated or unresolved violations"? We all know that there are those violations that will be noted as a repeat violation until such time the business is sold or burns down. Or are these only the High Risk areas?
- Historically, we have placed very little emphasis on reviewing past inspections (unless following up on a particular issue, short term). We are working on this weakness, but at this time, most inspectors were marked NO for item 5.
- Some of the FSIO's did not have a copy of the previous inspection with them. I feel you could present a case that is this really necessary? If the FSIO has been in this establishment sixteen times, is the previous inspection going to help?
- Not all FSIO's acted on repeated and unresolved violations and several of them did not file their reports on a timely manner as required.

ITEM 8

- Is there a difference between Item #5 and Item #8? Seems somewhat redundant. #5 and #8 should either be combined into one, or clarify the difference intended between the two.
- FSIO's struggled with documentation of correction recommendations or long term corrective action plans for items identified as out of control either during current inspection or from consecutive inspections. WI training has not emphasized the successful use of risk control plans. Encouraging and assisting the PIC to create a risk control plan for items identified as out of control will become an opportunity for WI to eliminate this difficulty.

ITEMS 1, 4, 6, 7

- Our current database system is lacking and causes inconsistency between inspectors. This is because inspectors have the option of completing a report that assesses the risk factors and interventions. Some inspectors are good at assessing all the risk factors, some are good at assessing some of the risk factors, and one inspector does not assess them at all. Additionally, there is a lack of program policies/procedures to insure uniformity such as required inspection form completion, disclosure of confidential information, filing of reports, administrative policies, jurisdictional statutes, etc. With the lack of program policies comes the lack of requiring immediate corrective action for out-of-control risk factors and overall compliance. Our inspectors also need better training on the application of rules/regs for the manufacturing establishments.

ITEMS 8 and 9

- We are still working on some of the components of the standards such as a uniform system for determining the risk category for a facility. We did not run across a situation where we had a long term control problem that could be addressed with the options listed in item 8 nor have we consistently used these options as a tool except during standardization.

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Do you think there are any Program Components that should be DELETED from the *Audit Worksheet*?

Yes (5)

No (8)

No Response (1)

The thirteen jurisdictional responses to this item were fairly evenly spread. Eight jurisdictions indicated that none of program component should be deleted. Those that indicated yes were asked to identify the program components that should be deleted from the audit process. Out of the 10 Program Components, only three, Items 8, 9, and 10 were identified as one that should be deleted or combined with other program components.

Please identify these by placing an "X" adjacent to the item number of the Performance Component(s) that should be DELETED. The Item number below corresponds to the same item number on the Audit Worksheet.

Audit Worksheet

Item 1

Item 2

Item 3

Item 4

Item 5

Item 6

Item 7

Item 8 (2)

Item 9 (5)

Item 10 (1)

If you have recommended that one or more Program Components be deleted, what rationale can you provide to support the recommendation?

ITEM 8

- I think it may be difficult to document what was discussed during an exit interview. I think this could be corrected by training and documenting procedures.
- I don't foresee us incorporating the risk control plans, etc. into our program in the immediate future. We are however actively working on a system to identify if a firm is in the proper risk category with the proper frequency of inspection so item 9 will be very helpful to us once our system is in place.

ITEM 9

- RISK characterization should be a separate process that is very objective (not connected to an inspection).
- Items #5 and #8 can be combined.
- These elements may not need to be deleted completely, but analyzed in a subsequent process outside of individual inspections. They do not seem of equal weight to questions 1 and 2. They might also be better analyzed on a program level as opposed to during an individual inspection, such as question 9 determining if the required inspection frequencies are being met based on risk (probably more reflective of a resource allocation issue or prioritization issue at the program level as opposed to an individual inspector choosing to review an individual facility for inspection). More pieces of the program come into play for these items so it is deserving of a review in a broader context than an individual inspection.
- I don't necessarily think Item 9 should be deleted, but it doesn't really apply to us as every establishment has the same inspection frequency (once per year). I do realize that ideally, we would base our inspection frequency on risk- but at this time, as directed by our contract with KS Dept of Agriculture, we do not consider risk.
- There is too much latitude in the current risk category worksheets that are in use.

ITEM 10

- I don't feel this would help in the assessment of a program's effectiveness.

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The performance areas/competencies listed as examples under each Program Component on pages 2 through 4 of the *Audit Reference Guide* are helpful to conducting the uniform inspection program audit. (Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).

Strongly Disagree

Strongly Agree

1

2 (1)

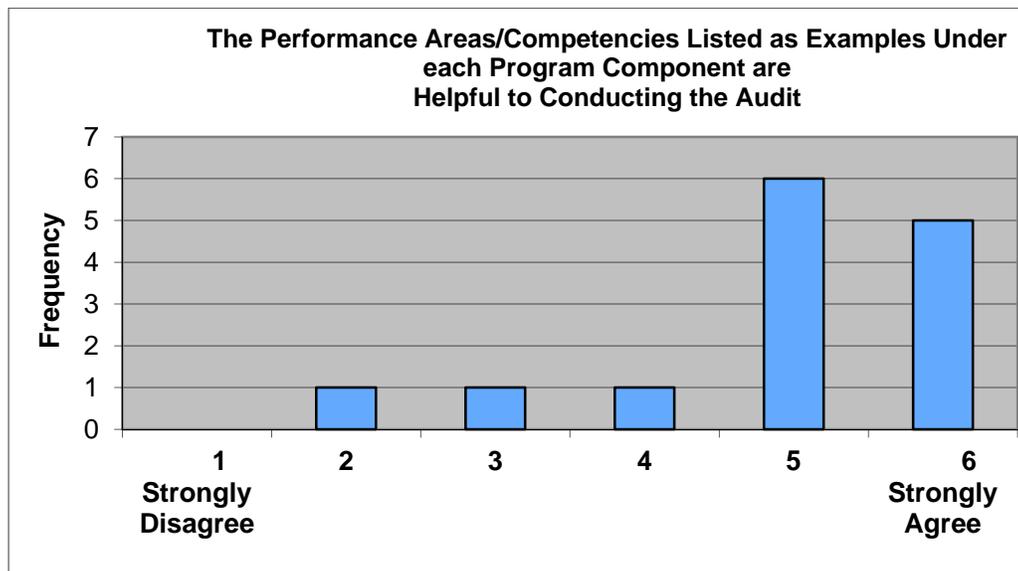
3 (1)

4 (1)

5 (6)

6 (5)

Responses to this statement ranged from a low of 2 to a high of 6 with a mode (most frequently selected response) of 5. The mean (average) was 4.92 and the median (midpoint) was 5. Eleven jurisdictions (78.8%) responded with a 5 or above indicating agreement that the performance areas/competencies listed as examples, were for the most part helpful to conducting the inspection program audit.



Please provide an explanation for your response.

- We felt this guide was very useful in navigating through the program.
- Yes, we like the detailed examples given.
- Item #1 is the most difficult one to assess and rate for our department. We currently have 27 Risk Factors and 27 Good Retail Practices. If the FSIO consistently misses one of these does the Auditor mark NO on the Audit sheet for #1?
- The audit Reference Guide is too abbreviated. Pages 2-4 help a little, but it is just too abbreviated. The performance areas/competencies listed in the Reference Guide have their own guide of associated inspection observations in the Abbreviated Field Training Reference Document (pages 7-10 of the Abbreviated Field Training Worksheet). It was difficult to use the forms (Audit Worksheet, Audit Reference Guide, Abbreviated Field Training Worksheet references) during the audit inspection because you had to jump around between 3 forms that do not follow the same pattern. This meant that the Audit Worksheet could not be completed during the audit inspection, but was completed at a later time when paging through resources and cross referencing was possible using notes from the audit inspection. The Abbreviated Field Training Reference Guide was the most helpful and the easiest to use as a reference while completing the Audit Worksheet.
- The reference guide helped with details of each audit question.

Uniform Inspection Program Audit Pilot Project Report

- Some areas may need more or better examples to help clarify the component.
- The examples are very helpful, but some could use additional clarification.
 - Item 1: Is the list of regulations all-inclusive, or should other critical violations also be considered in Item 1 (presence of pests, toxic chemical violations, plumbing problems, etc.)? Also, should Item 1 be marked NO if only one performance area is out (for example, missed checking one cooler but did check all other coolers at an inspection)? Or should we mark YES if there is substantial competency shown?
 - Item 3: Does "other regulations... prevailing statutes, regulations and/or ordinances" refer to other critical violations from the Food Code (such as presence of pests, etc.), non-critical violations in the Food Code, or violations that are not even in the food code (which for us could include verifying that employees possess Food Handler Cards, or whether or not they are in compliance with their grease interceptor pumping)?
 - Item 9: the second example (HACCP Plans and Variance documentation) doesn't seem to go with the header for Item 9 (proper risk category and required inspection frequency). But maybe that is because the intention is to base risk category on presence or absence of HACCP plans and variances (this is not the case for us)?
- The listing was very helpful and I feel that it could be expanded by offering more examples.
- Need more examples or more objective examples of what competency of the criteria means.
- This is one way to help the auditor understand the different components of each item thus ensuring that they consider all the possible problems that might be associated with each item. From a statistical standpoint, this is a way that the CFP team can ensure that all the auditors understand the parameters that they are supposed to assess and provide them with the most accurate information so that they may be able to increase the accuracy of the information that they collect from the different jurisdictions in the country. Those examples increase the specificity of the data collected.
- Could not use the audit worksheet without referring back to the reference guide. Suggest combining the audit worksheet and reference guide as one document.
- The list of examples was essential to the process.
- The examples are very helpful. They help to further define the expectation of each area. Without them the audit process would include a much higher potential for subjectivity and inconsistency.

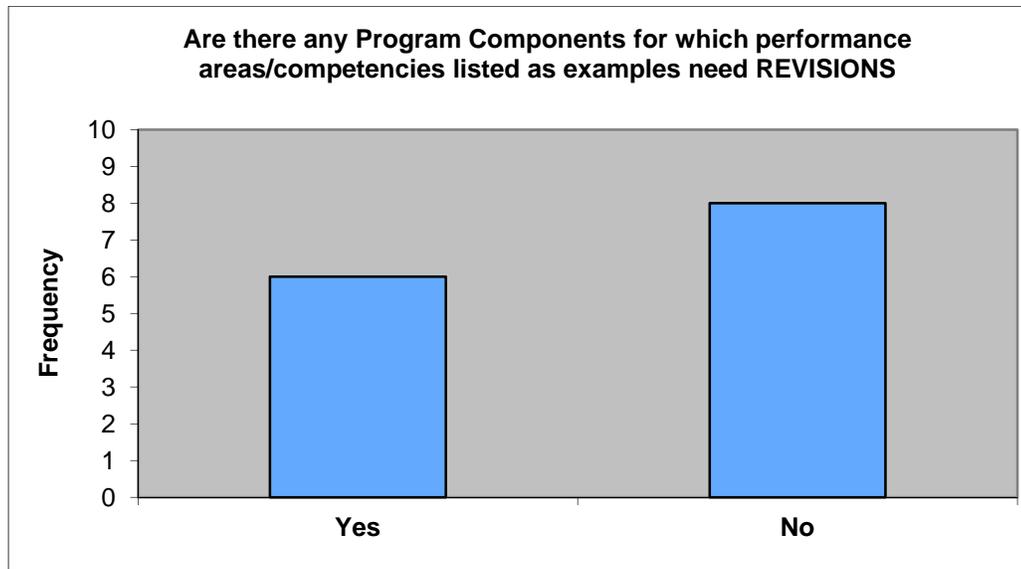
Are there any of the 10 Program Components for which the performance areas/competencies listed as examples on pages 2 through 4 of the Audit Reference Guide need REVISIONS (additions, deletions, changes)?

Yes (6)

No (8)

The responses to this item were almost evenly split with 6 jurisdictions (42.9%) indicating there were Program Components in need of revisions and 8 jurisdictions (57.1%) indicating there were NOT any Program Components in need of revisions. The graphic at the top of the next page depicts these responses.

Uniform Inspection Program Audit Pilot Project Report



Please identify these by placing an “X” next to the item number of the Program Component(s) needing REVISIONS to the examples provided on pages 2 through 4 of the *Audit Reference Guide*.

Audit Reference Guide (pages 2-4)

| | | | | |
|------------|------------|------------|------------|-------------|
| Item 1 (5) | Item 2 (2) | Item 3 (1) | Item 4 (1) | Item 5 (1) |
| Item 6 | Item 7 (1) | Item 8 | Item 9 (1) | Item 10 (1) |

Eight of the 10 Program Components were identified by at least one jurisdiction as an area needing revision. Six Program Components were identified only once as an area needing revision. Item 1 was identified by five jurisdictions (35.7%) as a Program Component in need of revision. The comments provided in the section below shed some light on potential challenges associated with the Program Components identified as ones needing revisions.

If you identified one or more Program Component(s) needing REVISIONS, what changes would you recommend to the performance areas/competencies listed as examples?

General Comments

- Perhaps a checklist for the auditor is needed and then a percentage is used to determine if the FSIO is meeting #1.
- The reference Guide and all supporting forms (Field Training Manual, etc.) lack a review of the planning and organizing component of an inspection. In some instances, an FSIO may overemphasize one component of the verification of risk based inspection methodology while missing another component entirely. This seems to be an issue that is not captured, especially if you are not seeing any violations in the one component that is being focused on. For example, the FSIO is observed taking numerous compliant temperatures in one display case while neglecting to make observations of a product cooling. There is no direction for how many of those performance areas/competencies listed in the guide for each question need to be deficient for the entire question to be answered "No". Is it one program area/competency, the majority of those that are listed, or would it be based on the severity of which ones are noted deficient (i.e. used risk based inspection methodology vs. correctly used inspection equipment from question 1) etc.? There also is no direction on how to document when an FSIO is neglecting to anticipate opportunities to make risk based observations (i.e. 10 items are observed being cooked during inspection and only 1 cooking temperature is verified by the FSIO).

Uniform Inspection Program Audit Pilot Project Report

ITEM 1

- For Item 1, if the intention is to identify all critical violations (risk factors), a line at the bottom of the list might read "any other critical (or priority or primary) risk factors." Also please identify where non-critical (supportive, secondary, core) risk factors are to be evaluated. Also there are so many components to item 1. I would prefer to break down Item 1 into separate sections.
- Item 1...Maybe a review of how many times a certain violation is marked by an FSIO?
- Example from Item 1.

FSIO used a risk-based inspection methodology to correctly assess regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food. When the risk factor and/or intervention was applicable and observable during the inspection, the FSIO verified.

I recommend removing "and observable" from the last sentence. Lack of (active) managerial control of FBI risk factors can be identified via discussion even when the FSIO is unable to observe specific processes because they are not happening during the time of inspection.

Recommend changing the word "verified" to "assessed" or "evaluated"

ITEMS 2 and 4

- The differences between Item 2 and Item 4 could be better defined as they both identify documenting code references

ITEMS 2 and 7

- The differences between Item 2 and Item 7 could be better defined as they both identify documenting corrective actions.

ITEM 3

- For Item 3, it would be helpful if examples of "other regulations" were included.
- Item 3...Might offer better examples to assist the accompanying supervisor.

ITEM 5

- Item 5...As stated above, does the previous inspection a good guide or a crutch?

ITEM 9

- Item 9...Maybe a better risk evaluation and maybe some jurisdictions are hindered by funding, staffing or legal guidelines.

ITEM 10

- Item 10...I wonder if this is necessary?

Uniform Inspection Program Audit Pilot Project Report

Section IV – Audit Worksheet – Format Evaluation

The format of the *Audit Worksheet* is user-friendly. (Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).

Strongly Disagree

Strongly Agree

1 (2)

2

3 (1)

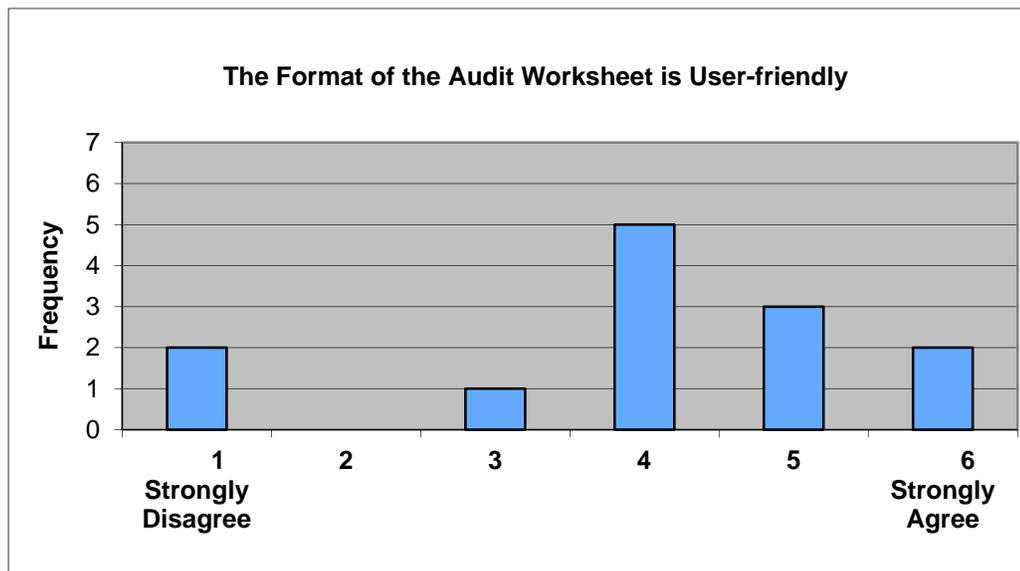
4 (5)

5 (3)

6 (2)

No Response (1)

Responses to this statement ranged from a low of 1 to a high of 6 with a mode (most frequently selected response) of 4. The mean (average) was 3.92 and the median (midpoint) was 4.0. The graphic below depicts the responses:



What improvements would you recommend?

- Try to get complete audit worksheet on one page.
- The flow could be improved by having it match the workflow in the Field Training worksheet. For those program areas/competencies listed in the Audit Reference Guide that have additional reference observations in the Field Training Reference Document, just include the Field Training Reference Document observation list to eliminated the need for cross-referencing.
- Instead of just YES and NO being the only options for each of the 10 items, I would prefer to see some sort of a scale, for example "Always, Often, Sometimes, Rarely" or a numerical scale 1-5, so that I can indicate when something is very good but has room for improvement, or needs a lot of improvement. I want to be able to differentiate between a marginal FSIO and one who did everything great, but may have just missed one or two minor items
- The format was OK but had to adapt it so I could show percentages
- Response options should not be yes and no. Recommendation is to change yes and no to exceeds, meets, needs improvement and does not meet.
- Auditor instructions should indicate that all audit conclusions are supported in the comments section of the form.

Uniform Inspection Program Audit Pilot Project Report

- The audit worksheet jumps around rather than following the natural progression of an inspection e.g. reviewing the previous three reports would be one of the first thing to occur but is not referenced until Item 5. Item 9 references the confirmation of risk category and inspection frequency through file review which would come at the beginning of the process. Would conducting the risk category review during the inspection to confirm the establishment has not eliminated or added processes be a better fit for Item 9?
- We converted the 4 page worksheet to a one page worksheet.
- Combine the worksheet and reference guide. There needs to be examples for the auditor to follow.
- It would be nice to use one form to record the results of all of the audit inspections rather than having a separate form for each inspection.
- List the Performance Areas/Competencies under each Program Component

The header labels are appropriate.

Strongly Disagree

Strongly Agree

1 (2)

2 (1)

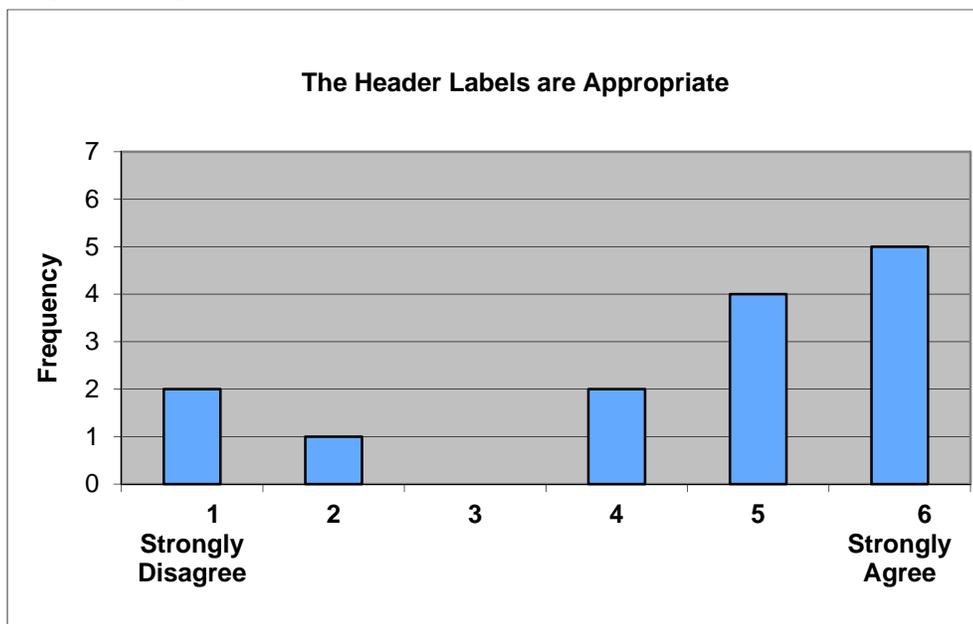
3

4 (2)

5 (4)

6 (5)

Responses to this statement ranged from a low of 1 to a high of 6 with a mode (most frequently selected response) of 6. The mean (average) was 4.43 and the median (midpoint) was 5.0. Nine jurisdictions 64.3% responded with a rating of 5 or above. The graphic below depicts the responses:



Uniform Inspection Program Audit Pilot Project Report

What improvements would you recommend?

- The audit form is too vague for questions 1 and 2 to represent the large number of program areas listed in the Audit Reference Guide and the questions are not really descriptive of those performance areas/competencies indicated in the Guide in many cases. The Audit Worksheet questions (which is what is assumed to be meant by "header labels") could be broken down to a larger number of questions or sub-questions (1a, 1b, 1c) to prevent false indications of program trends or deficiencies (for example, when question 1 may statistically indicate an overall program deficiency, when the deficiencies were actually spread in small numbers over multiple of the program areas/competencies that question 1 represents).
- I would suggest either removing the HACCP/ Variance component from item 9, or else rewording the title of #9 to clarify how this is relevant.
- Use newer Excel template.
- Rather than copying the header labels directly from Standard 4 they should be expanded to better incorporate the examples provided. During an audit we would not expect the auditor to have the examples memorized and flipping between the audit reference guide and the audit worksheet would be awkward.
- I didn't see header labels--just the competency.
- The first statement about the pre-requisite training courses could be separated more from the 10 questions - I put the information for question #1 in the wrong box the first time.

Enough space is provided for responses and comments.

Strongly Disagree

1

2 (1)

3 (2)

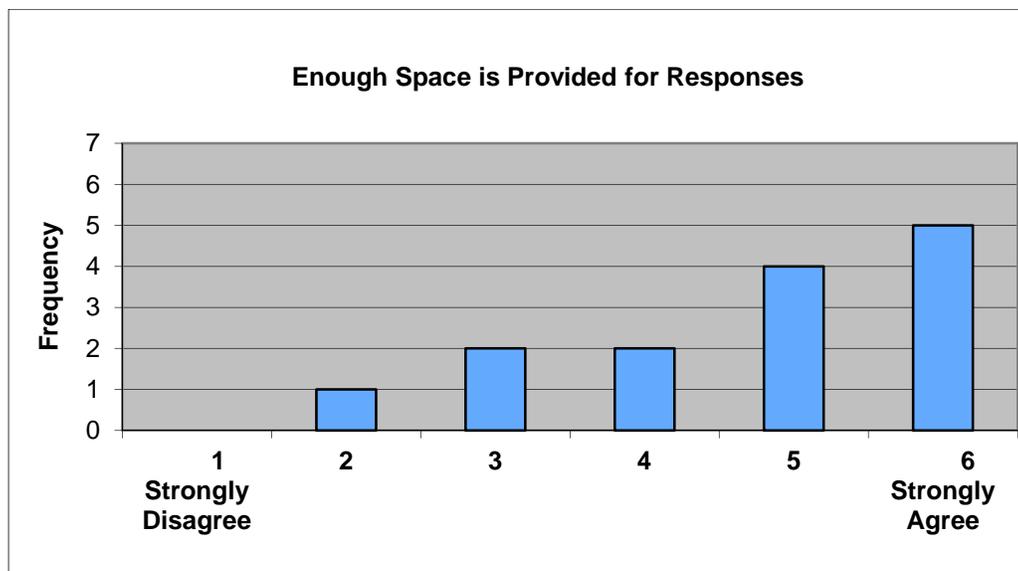
4 (2)

5 (4)

6 (5)

Strongly Agree

There was a large spread of responses on this item with the responses ranging from a low of 2 to a high of 6. The mode (most frequently selected response) was 6. The mean (average) was 4.71 and the median (midpoint) was 5. Sixty-four percent (64.3%) of the respondents selected 5 or higher indicating there was enough space provided for responses. The narrative comments in the next section provide additional information regarding this. The graphic below depicts the responses:



What improvements would you recommend?

Uniform Inspection Program Audit Pilot Project Report

- We thought there was too much room--as stated, we converted it to a one page table.
- More space would be better.
- Provide enough space to include the performance areas/competencies under each program area and room to make comments about the performance of the competency.

Is there any general information you believe is important that is MISSING?

Yes (3)

No (11)

The majority of the jurisdictions (78.6%) indicated there was not any general information that was missing. Those that responded "yes" were asked to elaborate and a summary of their responses is provided below.

Please identify information that needs to be ADDED.

- Grade/Scoring space
- There should also be additional guidance on review of the individual Audit Worksheets for trends in the comments (if the overall answer for meeting the category is yes, b/c only one small section was not addressed but was documented in the comments, there should be a way to capture if that same small deficiency was noted among multiple audits). This would be for a competency such as risk based methodology, where 11 different elements are verified (demo of knowledge through consumer advisory). If 1-2 elements are consistently documented as being overlooked (such as cooling and food sources), the trend would still be identified if overall question 1 was answered as "yes" for all audits.
- I would like to see clarified in the general information, how this audit form is different (or how it is to be used differently) from the field training worksheet, since so many of the components are exactly the same.

Is there any general information you believe should be DELETED?

Yes (1)

No (12)

No Response (1)

The majority of jurisdictions (92.3%) that responded felt there was NOT any general information that should be deleted. Those that responded "yes" were asked to elaborate and a summary of their responses is provided below.

Please identify information that should be DELETED.

- The question asking if the FSIO has successfully completed the pre-requisite training courses is not needed, because those FSIOs that have not completed the pre-requisites should not be eligible for auditing because they are "still in training"

Did you modify the Audit Worksheet during the Uniform Inspection Program Pilot?

Yes (4)

No (10)

The majority of the jurisdictions (71.4%) did not modify the *Audit Worksheet* during the pilot project.

Uniform Inspection Program Audit Pilot Project Report

Section V – Audit Results Summary and FSIO Training Plan (*optional form*)

The Audit Results Summary and FSIO Training Plan was included as an optional form a jurisdiction could use during the uniform inspection program audit pilot project. Did your jurisdiction decide to use the form?

Yes (3)

No (11)

Of the 14 jurisdictions, 11 (78.6) did not choose to use the optional Audit Results Summary and FSIO Training Plan during the pilot project. The following section provides some insights as to the factors that impacted the jurisdictions decision not to use the form.

What factors influenced your decision?

- A little too much paperwork. Need to simplify.
- Summarizing in that format helped me tie together information from the audits. In the initial CFP Uniform Inspection Program, I was the sole auditor, this time around there were two of us, so at a quick glance and discussion, we were able to identify areas to develop in our training program.
- Our staff is regularly "Standardized". Any incompetencies observed on routine inspections can be addressed at that time. Staff meets the training requirements of Standard 2 before they are allowed to operate independently.
- The audit results were shared with the FSIO alone and they were allowed to seek additional training with their supervisor at their own discretion. Since this was a pilot project and not all FSIO staff was audited, it was deemed to be unfair to require follow-up with the supervisor on an individual basis when a significant number of staff was not audited. The auditors reviewed general audit findings as a group to determine if trends were present (which would then be identified as program trends for supervisors to address with the entire inspection staff). However, no clear trends were identified for reporting to supervisors in this project.
- We are using the State of Michigan Field Evaluation Form which is more detailed than the federal audit form. Items are broken down into more questions for the in/out/no/na answers. Michigan used the form from the Federal Voluntary Standards to create one for all jurisdictions to use.
- Standardization performed on a yearly basis (2-2-2=6) and a Supervisor's ongoing audit provide the necessary tools to evaluate individual performances.
- Time and resources to dedicate to this.
- A lot of these issues were already instituted and already in place.
- We did not use the document with the FSIO but decided it is important to go through the exercise to evaluate the usefulness of the too.
- We decided that it was too cumbersome. I would still like to see an audit tool that more completely describes what is needed to determine if competency for the program components has been met.
- Form was simple to use and very well structured.
- During the time of this audit, our department lost its' Director. Newly assigned staff to replace the Director was also an FSIO and was part of the audit process. Essentially, there was no supervisor available to address identified competencies in need of improvement.
- Feedback to the FSIO was handled verbally and only minor corrections were needed.
- The Audit Results Summary and Training plan puts the emphasis on individual performance. This should occur in the assessment of training needs and as part of overall performance management of an employee, so that auditing can focus on identifying overall program strengths and weaknesses and improving the program overall.

Uniform Inspection Program Audit Pilot Project Report

Responses from jurisdictions that used the optional Audit Results Summary and FSIO Training Plan

It should be noted that only a minority of jurisdictions that participated in the uniform inspection program audit pilot project opted to use the Audit Results Summary and FSIO Training Plan. The following items contained on the Uniform Inspection Program – Jurisdiction Audit Feedback Form pertain to the use of that form during the pilot project. Since a low number of jurisdictions used the form, the responses presented here should be used as informational references rather than used to draw any definitive conclusions.

The Audit Result Summary and FSIO Training Plan is a useful tool for documenting the audit process and ensuring that additional training is provided to the FSIO for Program Components noted as needing improvement during the establishment file reviews and joint field inspections. (Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).

| <u>Strongly Disagree</u> | | | | | | <u>Strongly Agree</u> |
|--------------------------|---|-------|-------|---|-------|-----------------------|
| 1 | 2 | 3 (2) | 4 (1) | 5 | 6 (3) | |
| No Response (8) | | | | | | |

Six (42.8%) of the 14 jurisdictions responded this item. The responses ranged from a low of 3 to a high of 6 with a mode (most frequently selected response) of 6.

What improvements would you recommend?

- Maybe developing a spreadsheet so that you can see all the results summarized in one shot.
- More examples of good practices and maybe include more in depth instructions to the supervisor on how to "score" the audit sheet. I feel that Standard 4 should be re-worked and to get individual interpretations out of the process. Many of these same issues are covered in STD 2 and Std 9.
- None

The format of the Audit Results Summary and FSIO Training Plan is user-friendly

| <u>Strongly Disagree</u> | | | | | | <u>Strongly Agree</u> |
|--------------------------|---|-------|---|-------|-------|-----------------------|
| 1 | 2 | 3 (1) | 4 | 5 (3) | 6 (2) | |
| No Response (8) | | | | | | |

Six (42.8%) of the 14 jurisdictions responded this item. The responses ranged from a low of 3 to a high of 6 with a mode (most frequently selected response) of 5.

What improvements would you recommend?

(None of the pilot jurisdictions submitted comments for this item)

Uniform Inspection Program Audit Pilot Project Report

The header labels on the *Audit Results Summary and Training Plan* are appropriate.

Strongly Disagree

1

2

3 (1)

4

5 (3)

Strongly Agree

6 (2)

No Response (8)

Six (42.8%) of the 14 jurisdictions responded this item. The responses ranged from a low of 3 to a high of 6 with a mode (most frequently selected response) of 5.

What improvements would you recommend?

(None of the pilot jurisdictions submitted comments for this item)

Enough space is provided for responses and comments on the form.

Strongly Disagree

1

2

3 (1)

4

5 (4)

Strongly Agree

6 (1)

No Response (8)

Six (42.8%) of the 14 jurisdictions responded this item. The responses ranged from a low of 3 to a high of 6 with a mode (most frequently selected response) of 5.

What improvements would you recommend?

- When completed electronically the form adjusts and we would check mark 6 (Strongly Agree).
- When completed with pen to paper there is not sufficient room on the form and we would check mark this question 1 (Strongly disagree).
- More space will be needed because we had to use an extra sheet of paper.

Is there any general information that is missing?

Yes (2)

No (4)

No Response (8)

Please identify information that needs to be ADDED.

- A date should be established for completing the required re-training. When re-training has been completed a date should be designated for a follow-up audit.
- Adding a column with a timeframe on when the specific improvement will need to be completed.

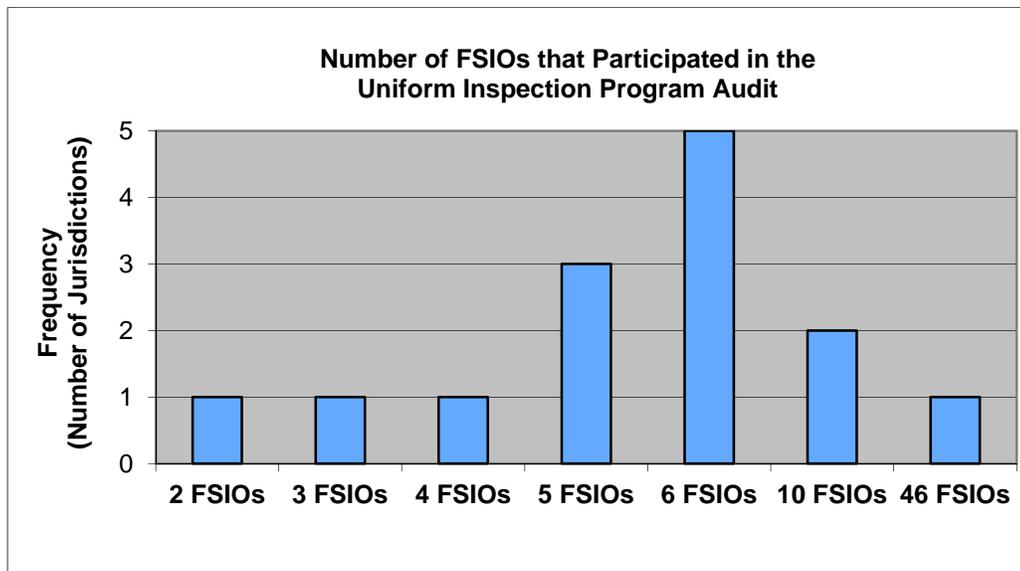
Uniform Inspection Program Audit Pilot Project Report

Section VI – Uniform Inspection Program Audit Pilot Project Results

How many FSIOs were assessed as part of the jurisdiction’s uniform inspection program audit?

- 2 - 1
- 3 - 1
- 4 - 1
- 5 - 3
- 6 - 5
- 10 - 2
- 46 - 1

A total of 76 FSIOs participated in the Uniform Inspection Program Audit Pilot Project. The number of FSIO’s from each individual jurisdiction ranged from one jurisdiction that had two FSIO participating to one jurisdiction that had 46 FSIOs participating. More jurisdictions (5) had six FSIOs participating 35.7% than any other number of FSIOs participating. The graphic below depicts the responses.

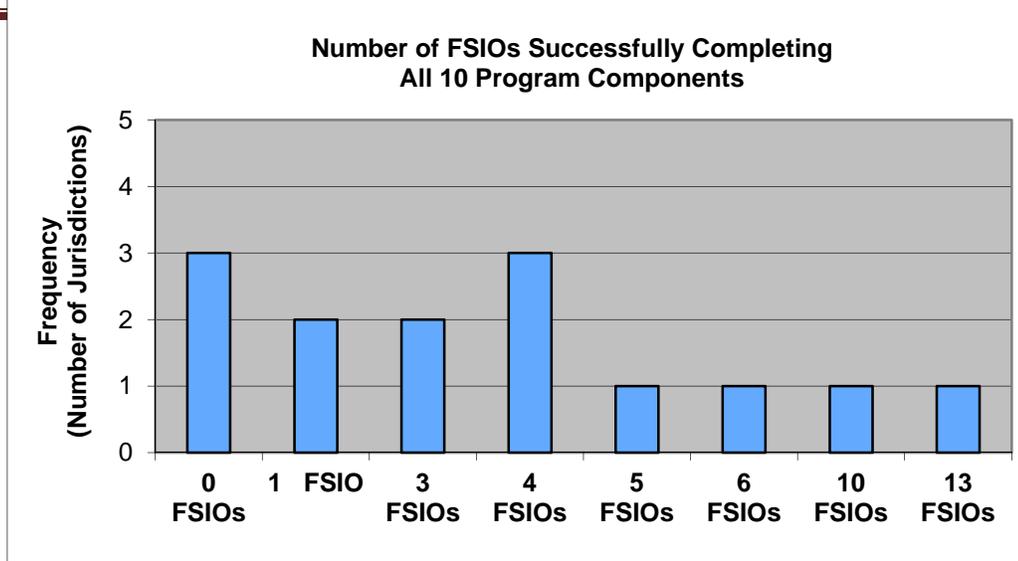


How many FSIOs successfully performed all 10 Program Components during the Audit Process?

- 0 - 3
- 1 - 2
- 3 - 2
- 4 - 3
- 5 - 1
- 6 - 1
- 10 - 1
- 13 - 1

A total of 42 FSIOs successfully performed all 10 Program Components during the audit pilot project. This represents 55.3% of the total number of FSIOs participating in the audit process. The number of FSIO’s successfully performing all 10 Program Components process ranged from zero (in 3 jurisdictions) to thirteen FSIOs in 1 jurisdiction. The graphic at the top of the next page depicts the responses.

Uniform Inspection Program Audit Pilot Project Report



Within your jurisdiction, who served as the “auditors” (individuals responsible for assessing FSIOs as part of the uniform inspection program audit)?*

| | |
|---|--|
| A. Retail Food Program Managers (2) | D. Senior Food Safety Inspection Officers (4) |
| B. The Supervisors of the Food Safety Inspection Officer (3) | E. Quality Assurance/Quality Control Officers (2) |
| C. Training Officers (2) | F. Other – (Please described in the box provided below) |

*** Total exceeds 14 because two jurisdictions listed more than one answer**

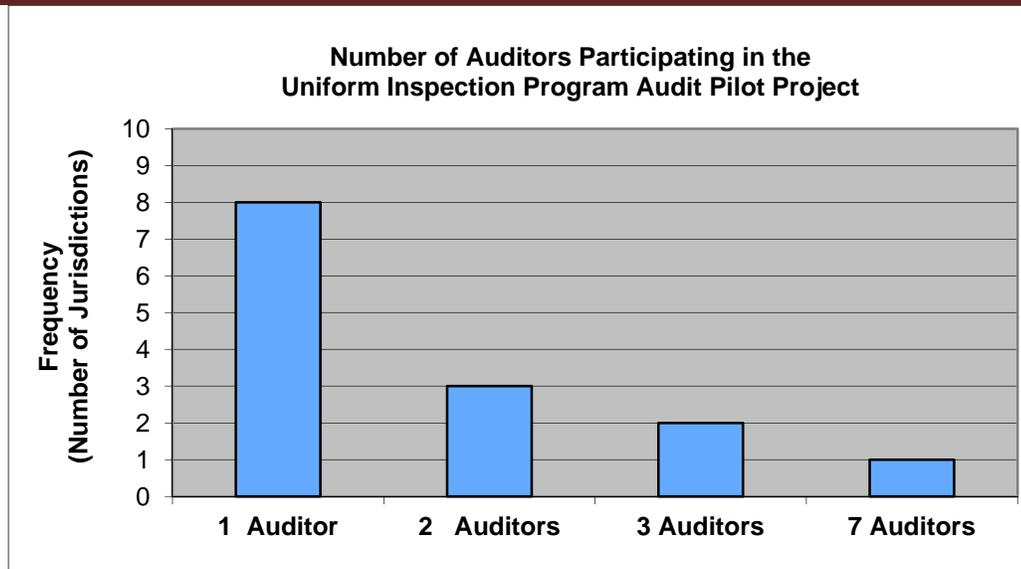
- The auditors are experience FSIOs, but not the most senior FSIOs on staff. These experienced FSIOs are also field inspection trainers as part of their job description (as are all FSIOs of that level in this program). They were chosen as auditors based on their ability to articulate their observations to the auditees. Only one auditor had completed formal auditor training designed specifically to impart skills on auditing field inspections.
- A, B, and C are all the same person (me) for our jurisdiction.
- The reason I put zero for completing all ten components was that the average was 80% and no one received a 100%
- FDA Certified Retail Standard and Evaluation Officer
- Registered Sanitarian knowledgeable with the audit process, but not manager of the program.

How many “auditors” (individuals responsible for assessing FSIOs as part of the uniform inspection program audit participated in the pilot project?

1 - 8
 2 - 3
 3 - 2
 7 - 1

A total of 27 “auditors” participated in the Pilot Project. The number of auditors participating within each jurisdiction ranged from a low of one (57.1% reported using one auditor) to a high of seven. The graphic at the top of the next page depicts the responses.

Uniform Inspection Program Audit Pilot Project Report



Was there more than one auditor per Food Safety Inspection Officer?

Yes (1)

No (13)

Only one (7%) of the 14 jurisdictions reported using more than one auditor per FSIO. In this one instance, FSIOs did not report any differences between the auditors (per the item below).

If you answered YES to the question above, did Food Safety Inspection Officers report any differences between the auditors related to how the audit was conducted?

Yes (0)

No (1)

If differences were noted, provide specific examples?

(None reported)

Uniform Inspection Program Audit Pilot Project Report

The uniform inspection program audit process is designed in such a way as to facilitate a strengths-weaknesses assessment of our jurisdiction regulatory retail food protection inspection program. *(Please place an "X" in the box next to the rating that reflects the level of your agreement or disagreement with this statement).*

Strongly Disagree

Strongly Agree

1

2 (2)

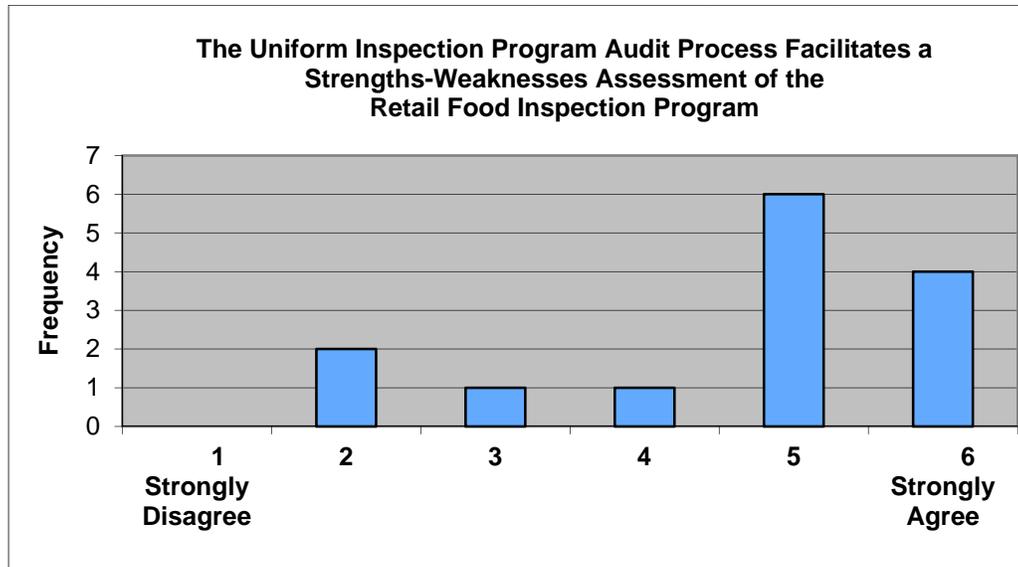
3 (1)

4 (1)

5 (6)

6 (4)

The responses ranged from a low of 2 to a high of 6 with a mode (most frequently selected response) of 5. The mean (average) was 4.64 and the median (midpoint) was 5. Seventy-one percent (71%) of the respondents selected 5 or higher agreeing that the Uniform Inspection Program audit process is designed in such a way as to facilitate a strengths-weaknesses assessment of a jurisdiction's regulatory retail food inspection program. The graphic below depicts the responses.



What factors influenced your decision?

- Shorten length of all forms, if possible.
- It is a very useful tool. The area of concern for me, for one is doing enough audits to get representative samples to determine what change need to done. I feel that many FSIO feel that the ATN process is a pass or fail, even when they are repeatedly told it is not. Staff gets very nervous having someone evaluate them in the field. This may be an internal problem where there has not been any type of mentorship and/ audit program in the food inspection program. Also, how/when is it determined that it is the training program or an employee's lack to follow through with the training.
- Lincoln Lancaster County Health Department is evaluated by the NE Department of Agriculture, Bureau of Dairies and Foods every 5 years. Perhaps there can be a means to incorporate their evaluation of our program into Standard 4.
- The current design of the questions on the Audit Worksheet would result in a lot of individual interpretation during application in the field that would lead to inconsistent audit reporting and subsequently misleading program audit results. Specific areas resulting in individual interpretation are the potential overlap between audit questions and with other Voluntary Program Standards that is implied by the program areas/competencies listed in the Audit Reference Guide (see Section III question 1 for additional comment). The lack of auditor qualifications and marking instructions (such as when enough non-observations or deficiencies in individual program areas/competencies would warrant a "No" as opposed to a "Yes") would also lead to inconsistent application in the field and mis-representative program reporting.

Uniform Inspection Program Audit Pilot Project Report

On average, how long did it take to complete an audit of the Pre-Inspection Establishment File Review?

Half of the participating jurisdictions indicated it took less than 30 minutes for the FSIO to conduct a Pre-Inspection Establishment File Review while the other indicated the review tool between 31 and 60 minutes. The table below summarized the responses to this question:

| Average time it took a FSIO to conduct a Pre-Inspection Establishment File Review | | | | | |
|---|----------------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | less than 30 minutes | 7 | 50.0 | 50.0 | 50.0 |
| | 31 - 60 minutes | 7 | 50.0 | 50.0 | 100.0 |
| | Other | 0 | 0.0 | 0.0 | 100.0 |
| | Total | 14 | 100.0 | 100.0 | |

On average, how long did it take to complete the audit of a joint field inspection (SINGLE INSPECTION) using the Audit Worksheet (actual time in hours – including inspection, completion of the inspection report, and discussion of the inspection report with the person in charge)? Do NOT include travel time to & from the establishment.

As the table below indicates, the half of jurisdictions (n=7, 50%) indicated it took between 61 and 120 minutes (one to two hours) for an FSIO to complete a single on-site joint field inspection while using the Audit Worksheet. One jurisdiction reported it took four hours and one reported it took 5 hours.

| Average time it took to complete an on-site joint field-training inspection | | | | | |
|---|----------------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | less than 60 minutes | 0 | 0.0 | 0.0 | 0.0 |
| | 61 - 120 minutes | 5 | 35.7 | 35.7 | 35.7 |
| | 121 - 180 minutes | 7 | 50.0 | 50.0 | 85.7 |
| | Other (see below*) | 2 | 14.3 | 14.3 | 100.0 |
| | *4 hours – (1) | | | | |
| | *5 hours – (1) | | | | |
| | Total | 14 | 100.0 | 100.0 | |

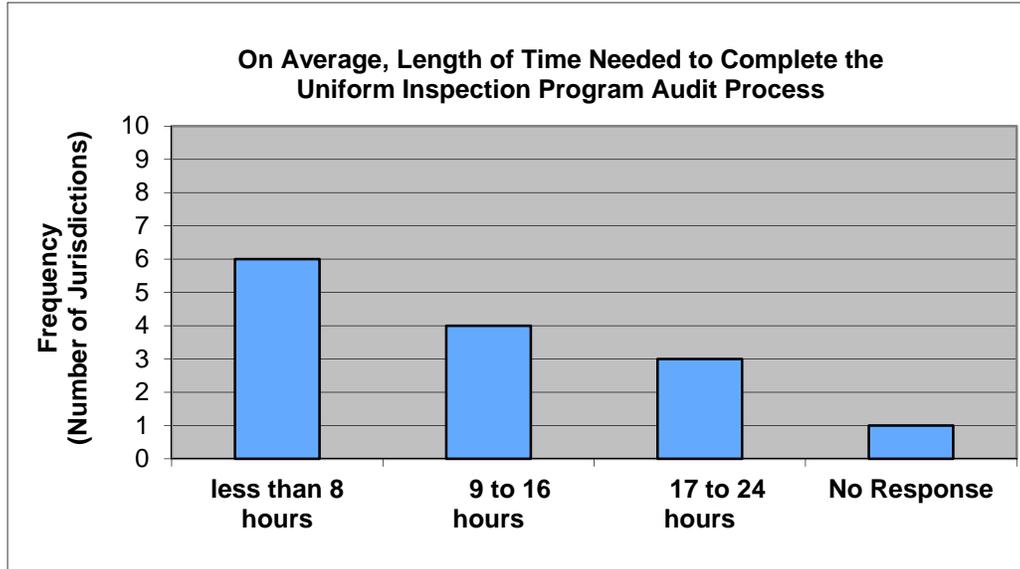
On average, how long did it take to complete the audit process for each individual FSIO? (Include the orientation process; establishment file reviews; actual inspection time; review of the audit reports with the FSIO; and completion of all inspection program audit documents/worksheets.)

The table below contains a frequency distribution of the responses regarding the average time for the FSIO to complete the audit process. The responses varied greatly from less than 8 hours to 17 - 24 hours. Ten (76.9%) of the 13 jurisdiction submitting responses indicated that the audit process was completed in less than 16 hours.

| Average time for the FSIO to complete the Audit Process | | | | |
|---|--------------------|-----------|---------|--------------------|
| | | Frequency | Percent | Cumulative Percent |
| Valid | less than 8 hours | 6 | 42.9 | 42.9 |
| | 9 to 16 hours | 4 | 28.6 | 71.5 |
| | 17 to 24 hours | 3 | 21.4 | 92.9 |
| | 25 to 32 hours | | | |
| | 33 to 40 hours | | | |
| | Other (see below*) | | | |
| | No Response | 1 | 7.1 | 100.0 |
| | Total | 14 | 100.0 | |

Uniform Inspection Program Audit Pilot Project Report

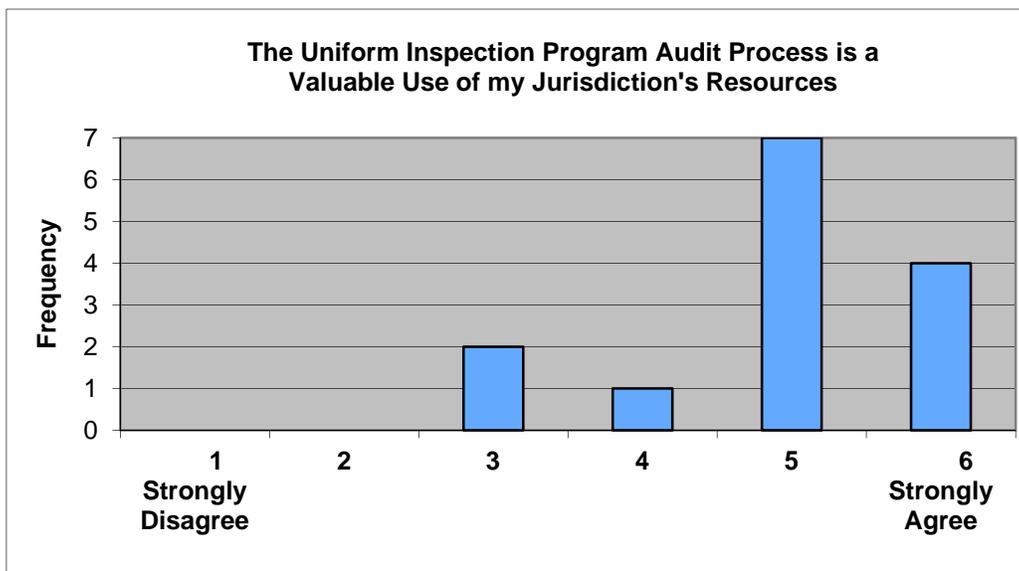
The graphic below depicts the response from the previous page pertaining to the average time needed to complete the audit process with FSIOs.



The uniform inspection program audit process is a valuable use of my Jurisdiction’s resources (e.g., time; staff; finances).

Strongly Disagree 1 2 3 (2) 4 (1) 5 (7) 6 (4) Strongly Agree

The responses ranged from a low of 3 to a high of 6. The mode (most frequently selected response) was 5. The mean (average) was 4.93 and the median (midpoint) was 5. A total of 11 (78.6%) jurisdictions selected either a 5 or 6 indicating agreement that the Uniform Inspection Program audit process was a valuable use of the Jurisdiction’s resources. The graphic below depicts the results of this item.



Uniform Inspection Program Audit Pilot Project Report

Explain, why?

- Time consuming , but in the end gave us a very good understanding of the “big picture” of our program.
- The program is very useful. Even with the limited number of FSIO's audits we were able to find some areas in the inspection program that may need reviewed or beefed up in our training program.
- Lincoln Lancaster County Health Department is evaluated by the NE Department of Agriculture, Bureau of Dairies and Foods every 5 years. Perhaps there can be a means to incorporate their evaluation of our program into Standard 4.
- For our program, there is a limited set of resources for the evaluation of field inspections. The audit process would overlap with the standardization process, which is already a challenge to complete with current resources. It seems that there needs to be more clarification to the auditor and the auditee on the difference of the audit process from the standardization process to avoid getting bogged down in an exercise of evaluating very single observation (or lack thereof) from the audit inspection. Another option may be development of a tool to link portions of the current standardization process with the audit process to reduce the resources necessary since both the program audit and standardization are necessary. An example would be to have the audit conducted by the standard (for those programs that complete standardization within the agency) and the risk based inspection marking observations from the standardization documentation could be used as support for marking on questions 1 and 4 of the Audit Worksheet.
- We already complete audits/ reviews of staff to work on uniformity for Michigan accreditation so this uniform inspection program process was not anything new and different.
- Integrated nicely with our program and availability of Quality Assurance Specialist that are strategically placed around the State to handle this type of assessment as part of their responsibilities. Program evaluation is unique as another tool assessment for how the program is running collectively and has not put a strain on our resources. Our program initially started over 3 years ago and have benefited from the results in looking at our program collectively. We are in the process of addressing one of the deficiencies found during our first 3 year audit.
- Our program has a policy that each inspector is visited by their supervisor at least twice a year. Standard four can easily be interpreted as doing a standardization. I feel Std 4 should be more distinctive. Maybe a review of the data collected from FSIO's might be more meaningful.
- We modified it and will use our modification to help with the documentation for attainment of Standard 4.
- Because we have been able to develop a quality assurance program that has helped identify deficiencies or gaps within our division. As a result of this process, we have been able to implement a program to detect and deter problems noted during the audits and file reviews thus ensuring that we are using proactive rather than reactive management strategy. Having a division quality assurance for the first time has helped the manager and supervisor identify the training needs for different employees thus helping them to become better FSIO's.
- The process really helped our department to identify our programmatic weaknesses. While we were not able to fully improve upon FSIO competencies (due to loss of supervisor), the audit was useful for planning future program goals and objectives as we move forward with new leadership.
- We need a formalized process to evaluate our program after initial training has been completed.
- With the modifications that we made and the potential for ongoing improvements to the audit process as we continue to use and refine it.

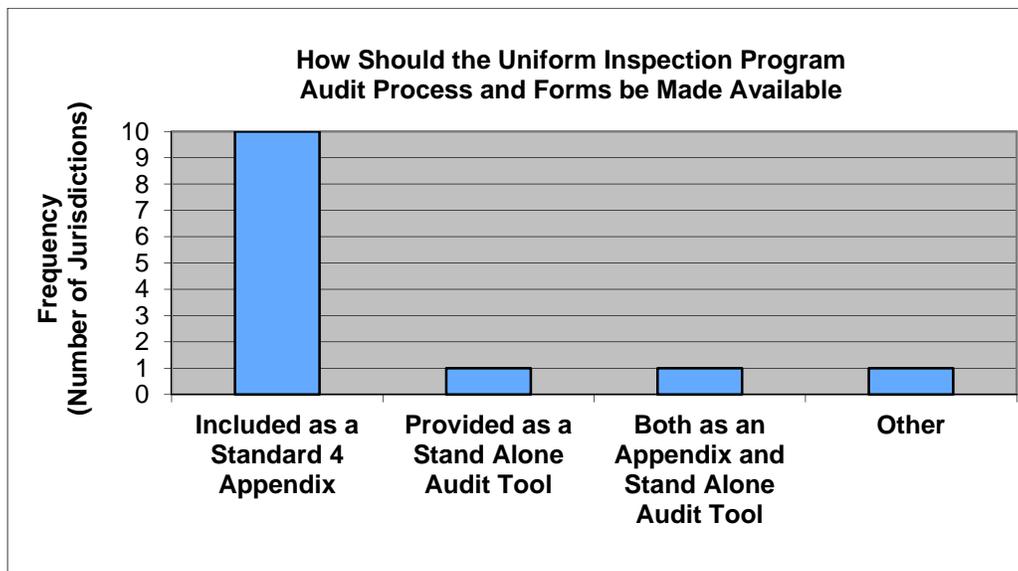
If you indicated in Question #11 that the Uniform Inspection Program Audit process was a valuable use of your

Uniform Inspection Program Audit Pilot Project Report

Jurisdiction’s resources, how should the audit documents and forms be made available to other regulatory retail food protection programs?

| | |
|---|---|
| A. The Uniform Inspection Program Audit and Forms should be included as an example template in an Appendix to Standard 4 – Uniform Inspection Program, <i>FDA Voluntary National Retail Food Regulatory Program Standards</i> (10) | B. The Uniform Inspection Program Audit and Forms should be made available as a resource document on FDA’s web site as a stand alone piece. The audit process and forms should not be included as part of the <i>FDA’s Voluntary National Retail Food Regulatory Program Standards</i> (1) |
| C. Other – <i>Please describe in the box provided below</i> (1) | D. B and C (1) |
| No Response (1) | |

Ten (76.9%) out of the 13 jurisdictions that responded indicated that the Uniform Inspection Program Audit and Forms should be included as an example template in the Appendix to Standard 4 – Uniform Inspection Program, FDA Voluntary National Retail Food Regulatory Program Standards. The graphic below depicting these results is followed by specific comments related to this item.



- Much of the ability to audit is the fact that you are auditing against a set protocol and training regime. If the program does not also work to achieve std 2 and std 3, the feedback from this audit is not useful since the variation in results may be from many different sources (training development issues, training delivery issues, individual inspector implementations issues, supervisory/management issues, etc.), thereby limiting the ability to adequately identify and/or address the root cause of the trend noted in the program audit.
- Many states that do not have accreditation standards could benefit from the use of this tool.
- I believe the documents should be made available in both formats.
- They should be available as an appendix to standard 4 for jurisdictions enrolled in VRFRPS.
- The standalone document should be made user friendly for jurisdictions not enrolled in the VRFRPS e.g. eliminate the reference to standards 2 and 4.
- Consider creating a separate document/report that specifically speaks to Quality Standards for Food Protection Programs and include this as one tool that could be used to audit/assess quality.

Uniform Inspection Program Audit Pilot Project Report

Section VII – Uniform Inspection Program Audit Pilot – Additional Comments

General Comments

- Please remember that most retail inspection programs are local. Ensure audit program is very sensitive to local pressures, etc.
- Using these forms and completing inspections with staff show Michigan evaluation of staff is on target with federal standards
- The process has been presented in a very simplified manner and I would encourage other jurisdictions to participate in this audit process using the approach outlined by the CFP committee. Managers can use this audit process as a way of identifying the problems and devising strategies to deal with them effectively. In Taney County Health Department - Environmental Services Division, we have been able to implement a quality assurance program that utilizes the 10 inspection program areas. We anticipate on conducting the onsite inspections and file reviews biannually to ensure that our workforce is effective in delivery of services to the public.
- It would be very helpful if there were sample policies/procedures available for jurisdictions to utilize and build from rather than having to start from scratch. Sample inspection reports would also be helpful as we are looking at revising ours so that the risk factors will be more routinely addressed for each inspection.

Audit Worksheet

- I find the field inspection worksheet for standard 2 to be very helpful, more so than this form. I don't really understand how this is significantly different from the standard 2 worksheet. For the first several joint inspections, I actually thought I was supposed to be using the field inspection worksheet and didn't realize that there was a separate form for the "audit." Even after realizing I was using the wrong form initially, I preferred to continue using the standard 2 worksheet in addition to the pilot project audit worksheet, since the field training worksheet gives so much more information and breaks everything down.
- I would suggest some rearranging to make things flow better. Item 5 and Item 8 seem to be very closely related and should be next to each other or combined into one item. If I were setting this sheet up, I would arrange the 10 items as follows to reflect a more linear thought process as follows (item number as it appears on the Audit Worksheet is in parenthesis):
 - (1) compliance status
 - (3) interpret and apply laws
 - (5) review past inspections
 - (8) long term control
 - (7) corrective action
 - (6) compliance & enforcement
 - (9) risk category/ inspection frequency
 - (4) proper codes
 - (2) clear report
 - (10) file reports

Uniform Inspection Program Audit Pilot Project Report

- If I were setting this sheet up, I would arrange the 10 items as follows to reflect a more linear thought. The process has been presented in a very simplified manner and I would encourage other jurisdictions to participate in this audit process using the approach outlined by the CFP committee. Managers can use this audit process as a way of identifying the problems and devising strategies to deal with them effectively. In Taney County Health Department - Environmental Services Division, we have been able to implement a quality assurance program that utilizes the 10 inspection program areas. We anticipate conducting the onsite inspections and file reviews biannually to ensure that our workforce is effective in delivery of services to the public.

Audit Reference Guides

- The "Guide" is of little assistance on helping the auditor interpreting "Yes" or "No" on the Audit worksheet item #1. There are, in our case, too many Risk Factors (27) and Good Retail Practices (27) to consider and then determine if item #1 should be a YES or NO.
- "Revised" Audit Reference Guides that were used by auditors are attached. The numbers reference the sections of the Abbreviated Field Training Worksheet Reference Documents sections. One auditor completed the Abbreviated Field Training Worksheet and then used the cross reference numbers to cut and paste comments into corresponding Audit Worksheet sections (with use of the revised Audit Reference Guide).

Uniform Inspection Program Audit Pilot Project Report

Pilot Project Findings and Conclusions

The findings and conclusions for the pilot project will be presented in two parts:

Part I – Uniform Inspection Program Audit Process and *Guides*; and

Part II – *Audit Worksheet*

Part I – Uniform Inspection Program Audit Process and Guides

A solid majority (85.7%) of the pilot participants agreed that the *Uniform Inspection Program Audit* process was a valuable use of their jurisdiction's resources. Most respondents were complimentary to the process and identified it as a "good start." In a minority opinion, two jurisdictions identified the process as time consuming with too much paperwork and a potential drain on employee and monetary resources.

The majority of respondents (78.6%, n=11) indicated that the instructions given in the *Guide to the Uniform Inspection Audit Process* were sufficient for understanding and implementing the training process. However, some very good suggestions were made for clarifying and improving several sections of the *Guide*. For example, a significant number of jurisdictions noted that the *Guide* did not contain the level of detail and step-by-step instructions that is found in the Standard 2 – Field Training Manual. Some jurisdictions recommended revisions to the content to ensure the intended use is clear and terminology remained consistent.

In addition, the responses indicated support for a recommendation to more closely align the Standard 4 Program Elements with the Standard 2 Performance Elements. This appears to be one of the underlying factors for a majority of jurisdictions indicating that Program Components were "missing" (61.5%, n=8); difficult to assess (66.7%, n=8); or difficult for the FSIO to demonstrate (71.4%, n=10). The majority of these respondents (80%, n=10) agreed that the *Uniform Inspection Program Audit* process is designed to facilitate a strengths-weaknesses assessment of the jurisdiction's retail food protection program.

A majority (57.1%, n=8) of the pilot jurisdictions only used one auditor to conduct the all assessments of FSIOs during the two joint inspections. Of the jurisdictions that used multiple auditors, only one used more than one auditor to assess an individual Food Safety Inspection Officer's performance of the 10 Program Elements. The pilot jurisdictions reported selecting their auditors from a variety of positions within their retail food inspection program including: Senior Food Safety Inspection Officers (n=4); Supervisors of the Food Safety Inspection Officer (n=3); Training Officers (n=2); Retail Food Program Managers (n=2), and Quality Assurance/Quality Control Officers (n=2).

Eleven of the pilot jurisdictions (78.6%) agreed that a minimum of two retail food establishment file reviews and joint field inspections for each FSIO is the appropriate number for completing a uniform inspection program audit. Two jurisdictions indicated that a minimum of two file reviews and field inspections were not enough. One of the primary reason cited centered on a lack of sufficient information to conduct an assessment of root causes that may be associated with gaps in the administrative process and training program supporting the retail food inspection program. Slightly over fifty five percent (55.3%, n=42) of the FSIOs successfully performed all 10 Program Elements during the audit process.

Uniform Inspection Program Audit Pilot Project Report

When the pilot jurisdictions were asked how long it took for the FSIO to complete the Uniform Inspection Program Audit process, the responses varied from less than 8 hours to 24 hours. The majority of the respondents (76.9%, n=10) indicated the average time for the FSIO to complete the audit process was less than 16 hours.

Some pilot jurisdictions encouraged revision of the Standard 4 criteria so that the 10 Program Elements reflect a more linear process and can be directly associated with Performance Elements and competencies contained in the Standard 2 – FSIO Field Training Plan. In addition, a few jurisdictions noted that the audit process intended to assess inspection program strengths and weaknesses tends to focus too much on an assessment of the FSIO’s individual performance. It was reported that inspection staff participating in the pilot project viewed the audit process as a mechanism to evaluate their own performance rather than a tool for determining program strengths-weaknesses. One jurisdiction recommended that process for determining compliance with the Standard 4 criteria be re-examined so that it more accurately reflects a quality assurance review of the inspection program rather than being solely based on the performance of staff during inspections.

Part II – Audit Worksheet

Only half the jurisdictions (50.0%, n=7) agreed that the 10 Program Elements sufficiently address inspection uniformity, inspection quality, inspection frequency, and uniform application of the regulatory jurisdiction’s retail food safety regulations and administrative procedures. A majority of the jurisdictions (78.8%, n=11), however, indicated the competencies/criteria listed as examples under each program component were helpful to the audit process. Recommendations for improving the *Audit Worksheet* included:

- Developing a comprehensive instruction guide to accompany the reference sheet similar to that provided for the Standard 2, CFP Field Training Plan;
- Organizing the 10 Program Components in a linear format to better reflect the sequence encountered during the inspection process;
- Aligning the 10 Program Elements with the Performance Elements and competencies identified in the Standard 2, CFP Field Training Plan;
- Revising the 10 Program Elements to clarify the process for assessing a complex area such as observations of risk factors versus simpler areas such as the timely filing of inspection reports and other documentation;
- Reexamining the weighting of the 10 Program Elements based on their public health significance; and
- Expanding the quality assurance assessments to include a review of other Program Elements besides the field inspections, such as an analysis of the type and frequency of out of compliance observations.

Feedback related to format of the *Audit Worksheet* varied greatly. Suggestions for improving the format included:

- Providing a numerical scale assessment rather than an all or nothing Yes / No determination for each of the Program Elements.

Uniform Inspection Program Audit Pilot Project Report

- Providing a comment section to note specific observations made of the FSIO performance for each of the Program Elements;
- Combine and streamline the various Audit Guides / Reference documents that support the use of the Audit Worksheet; and
- Providing a linear presentation of the 10 Program Elements; and
- Providing enough space to include the competencies that pertain to each of the Program Elements.

Uniform Inspection Program Audit Pilot Project Report

Pilot Jurisdictions Recommendations to the Conference

Based on the findings and conclusions from the pilot project, the following summarizes recommendations received from participating jurisdictions for enhancing the effectiveness of the *Uniform Inspection Program Audit* process, *Audit Worksheet*, and *Audit Guides*.

1. Revise the *Guide to Conducting a Uniform Inspection Program Audit*. Some changes that should be considered include:
 - Developing a more comprehensive guidance document similar to the CFP Field Training Manual contained in Standard 2 that explains the criteria for each component of the audit process;
 - Clarifying the process for selecting the establishments that are to be used for the file and field review.
 - Clarifying the parameters for what is to be included as part of the establishment file review;
 - Providing expanded guidance on the auditor's qualifications, role, and responsibilities, and.
2. The 10 Program Elements contained in Standard 4 need to be aligned with the Performance Elements and competencies identified in the Standard 2 – CFP Field Training Plan. This alignment would necessitate revisions to the *Guide to Conducting a Uniform Inspection Program Audit*, *Audit Worksheet*, and *Audit Reference Guide*.
3. The presentation of the 10 Program Elements contained in the Standard 4 criteria, the *Guide to Conducting a Uniform Inspection Program Audit*, and *Audit Worksheet* need to be presented in a linear format to reflect a logical sequence to the inspection process.
4. The information contained in the *Audit Reference Guide* should be incorporated into the *Guide to Conducting a Uniform Inspection Audit* to eliminate the need for multiple documents.
5. The weighting/assessing of each of the 10 Program Elements is not consistent. Some Program Elements, such as the one that relates to assessing risk factors, are much more complex than others, such as the timely filing of reports and documents. A more equitable, objective assessment system should be established for the audit process.
6. The Standard 2 – CFP Field Training Plan builds in the flexibility for a jurisdiction to include performance elements / competencies that are important to their program. The Standard 4 criteria and associated audit worksheet and guides are more rigid in their format. The audit process and worksheet should be designed to allow jurisdictions the flexibility for assessing inspection Program Elements that are specific to their retail food protection program.
7. The field inspection assessment conducted as part of Standard 4 seems to take an all or nothing approach. Item 1 for examples pertains to an assessment of observations of risk factors and public health interventions – eleven different categories. If an inspector fails to make an observation of just one item in this category, this Program Element is not met. This level of performance is higher than what is used for FDA Food Code Standardizations. The assessment protocol for Performance

Uniform Inspection Program Audit Pilot Project Report

Elements needs to be re-evaluated and better guidance provided as to what constitutes an effective performance measurement.

8. Some of the Program Elements are very subjective in nature and do not contain definitive performance measurements, such as producing legible reports. The Program Elements contained in Standard 4 should have defined performance measurements that are quantifiable.
9. The *Audit Worksheet* should include a comment section so that a more detailed description can be provided as to the observations made of an inspector's performance of any one of the 10 Program Elements.

Uniform Inspection Program Audit Pilot Project Report

Next Steps

The CFP CFSRP Work Group conducted conference calls to discuss the data results and feedback from pilot project jurisdictions. Based on these conference calls, the Work Group reached consensus that the pilot project contained significant recommendation pertaining to the Standard 4 – Uniform Inspection Program criteria and should be forwarded to the U.S. Food and Drug Administration (FDA). FDA provides administrative oversight of the *Voluntary National Retail Food Regulatory Program Standards* and would be the lead entity for assessing any potential changes to the Standard 4 criteria.

The CFP CFSRP Work Group has prepared two issues related to the *Uniform Inspection Program Audit Pilot Project* for deliberation at the April 2012 Conference for Food Protection in Indianapolis, IN. The first issue recommends that the Conference accept this pilot project summary report and recognize the 14 State and local jurisdictions listed in the Acknowledgements section at the beginning of this report for their contributions to the success of the pilot project and recommendations for enhancing the quality assurance component contained within Standard 4.

The second issue recommends that the Conference send a letter to FDA requesting that they:

- Review for potential revisions to the Standard 4 – Uniform Inspection Program criteria and field inspection review process, the recommendations contained in this pilot project report.
- Obtain input and feedback from the CFP Program Standards Committee as part of FDA's review of the recommendations contained in this pilot project report.

Appendices

APPENDIX A – Jurisdiction Feedback Form on the Audit Process and Forms

APPENDIX B – CFP *Guide to the Uniform Inspection Program Audit*

APPENDIX C – CFP Uniform Inspection Program *Audit Worksheet*

APPENDIX D – CFP Uniform Inspection Program *Audit Reference Guide*

APPENDIX E – CFP Uniform Inspection Program *Audit Results Summary and FSIO Training Plan*

**CONFERENCE FOR FOOD PROTECTION (CFP)
UNIFORM INSPECTION PROGRAM AUDIT
PILOT PROJECT**

JURISDICTION FEEDBACK ON THE AUDIT PROCESS AND FORMS

| | | | | |
|--|--|--|---------------------------------|--|
| Name of Jurisdiction | | Type <i>(place an "X" in the appropriate box)</i> | | |
| | | <input type="checkbox"/> Federal | <input type="checkbox"/> State | <input type="checkbox"/> County |
| | | <input type="checkbox"/> District | <input type="checkbox"/> Tribal | <input type="checkbox"/> Other Specify _____ |
| Jurisdiction Mailing Address: | | | City | State |
| | | | | Zip |
| Contact Person for the Jurisdiction | | Contact Phone # | Contact Fax # | Contact E-mail Address |
| | | | | |
| Report Prepared By: <i>(if different from the Contact Person for the Jurisdiction)</i> | | Preparer Phone # | Preparer Fax # | Preparer E-mail Address |
| | | | | |

(Place an "X" in the space adjacent to the most appropriate response for each question)

**SECTION I
JURISDICTION DEMOGRAPHICS**

1. What is the population living within your Jurisdiction?

- A. less than 25,000 B. 25,000 to 49,999 C. 50,000 to 99,999
 D. 100,000 to 249,999 E. 250,000 to 499,999 F. 500,000 or above

2. What is your Jurisdiction's total number of retail food and foodservice establishments under permit?

- A. less than 100 B. 101 to 500 C. 501 to 1,000
 D. 1,001 to 3,000 E. 3,001 to 6,000 F. 6,001 or above

3. How many Food Safety Inspection Officers are employed by your Jurisdiction with FULL TIME (i.e., 100%) responsibility in the food safety program?

- A. less than 4 B. 4 to 8 C. 9 to 12
 D. 13 to 20 E. 21 to 30 F. 31 or more

4. How many Food Safety Inspection Officers are employed by your Jurisdiction with responsibilities in other environmental health program areas in addition to their retail food protection duties?

- A. less than 4 B. 4 to 8 C. 9 to 12
 D. 13 to 20 E. 21 to 30 F. 31 or more

(Section I – continues on the next page)

SECTION I
JURISDICTION DEMOGRAPHICS

(Section I – continued from the previous page)

5. If your Food Safety Inspection Officers have responsibilities in other environmental health program areas, on average, how much of their annual work plan is dedicated to the retail food protection program?

- A. less than 10% B. 10% to 29% C. 30% to 49%
 D. 50% to 69% E. 70% to 89% F. 90% or more

6. Is your Jurisdiction AWARE of the FDA Voluntary National Retail Food Regulatory Program Standards?

- Yes No

7. Is your Jurisdiction ENROLLED in the FDA Voluntary National Retail Food Regulatory Program Standards?

- Yes No

8. If enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards, has your jurisdiction MET all the Standard #2 – Trained Regulatory Staff criteria?

- Yes No

9. Does your Jurisdiction have a written field training plan that identifies the specific job performance elements and competencies a FSIO is expected to demonstrate during foodservice and retail food inspections?

- Yes No

10. If your answer to Question #9 above is YES, please identify the type of written FSIO field training plan that is in use within your jurisdiction.

- A. The CFP Field Training Plan as presented in Appendix B-2, Standard #2 – Trained Regulatory Staff, *FDA Voluntary National Regulatory Retail Food Program Standards* C. A Field Training Plan developed in-house that meets the intent and scope of the CFP Field Training Plan
 B. A customized version of the CFP Field Training Plan, Appendix B-2, Standard #2 – Trained Regulatory Staff that is specific to our jurisdictions retail food inspection protocol D. Other – Please describe in box provided below

11. If enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards, has your Jurisdiction MET all the Standard #4 – Uniform Inspection Program criteria?

- Yes No

SECTION II
GUIDE TO THE UNIFORM INSPECTION PROGRAM AUDIT
EVALUATION OF CONTENT

(Please refer to the “Guide to the Uniform Inspection Program Audit” document when responding to the following questions)

1. Were the instructions given in the *Guide to the Uniform Inspection Program Audit* sufficient for you to understand and implement the uniform inspection audit process in your jurisdiction?

Yes No

2. Please put an “X” in the boxes below to identify any Section(s) of the *Guide to the Uniform Inspection Program Audit* you believe needs improvement. Please provide your recommendation(s) for improving the *Guide* in the space provided for each subject area. The page number from the *Guide* for each subject area is included in parentheses. If you have no recommended changes for a specific Section of the *Guide*, leave the corresponding box and comment area blank.

| | |
|--------------------------|---|
| <input type="checkbox"/> | Preparing for Pilot Project Participation (page 1) |
| | |

| | |
|--------------------------|---|
| <input type="checkbox"/> | Purpose of the Uniform Inspection Program Audit (page 2) |
| | |

The Uniform Inspection Program Audit Process

| | |
|--------------------------|---|
| <input type="checkbox"/> | Selection of Establishments (page 2) |
| | |

| | |
|--------------------------|---|
| <input type="checkbox"/> | File Review – Selected Establishments (page 2) |
| | |

(Section II – continues on the next page)

SECTION II
GUIDE TO THE UNIFORM INSPECTION PROGRAM AUDIT
EVALUATION OF CONTENT

*(Section II – continued from the previous page.
Please refer to the “Guide to the Uniform Inspection Program Audit” document
when responding to the following questions)*

The Uniform Inspection Program Audit Process (continued)

| | |
|--------------------------|--|
| <input type="checkbox"/> | FSIO’s Role During Joint Field Inspections (page 2) |
| | |

| | |
|--------------------------|--|
| <input type="checkbox"/> | Uniform Inspection Auditor’s Role During Joint Inspections (page 2) |
| | |

Pilot Project Steps – Uniform Inspection Program Audit

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Step 1 (page 2) |
| | |

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Step 2 (page 3) |
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| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Step 3 (page 3) |
| | |

(Section II – continues on the next page)

SECTION II
GUIDE TO THE UNIFORM INSPECTION PROGRAM AUDIT
EVALUATION OF CONTENT

*(Section II – continued from the previous page.
Please refer to the “Guide to the Uniform Inspection Program Audit” document
when responding to the following questions)*

Pilot Project Steps – Uniform Inspection Program Audit (continued)

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Step 4 (page 3) |
| | |

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| <input type="checkbox"/> | Step 5 (page 3) |
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| <input type="checkbox"/> | Step 6 (page 3) |
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|--------------------------|------------------------|
| <input type="checkbox"/> | Step 7 (page 3) |
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| | |
|--------------------------|--|
| <input type="checkbox"/> | Uniform Inspection Program Audit Pilot Project – Reference Documents (page 4) |
| | |

(Section III – Starts on the next page)

SECTION III
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET AND AUDIT REFERENCE GUIDE
EVALUATION OF CONTENT

(Please refer to the Uniform Inspection Program Audit Worksheet and Audit Reference Guide when responding to the following questions)

1. The 10 uniform inspection Program Components included on the *Audit Worksheet* (and identified on page 1 of the *Audit Reference Guide*) sufficiently address inspection uniformity, inspection quality, inspection frequency, and uniform application of the regulatory jurisdictions retail food safety regulations and administrative procedures and are appropriate for all retail food program inspection staff. *(Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).*

Strongly Disagree

Strongly Agree

1

2

3

4

5

6

Please explain the reasons used to determine this rating.

2. The required minimum of two retail food establishment file reviews and joint field inspections for each FSIO is the appropriate number for completing a uniform inspection program audit?

Yes

No

If you answered No, how many retail food establishment file reviews and joint field inspections do you believe should be conducted with each FSIO as part of the audit process? Please explain the reason for your answer.

3. Are there additional Program Components that you believe are necessary in order to effectively conduct a uniform inspection program audit but are MISSING from the current *Audit Worksheet*?

Yes

No

Please identify and describe these MISSING Program Components.

(Section III – continues on the next page)

SECTION III
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET AND AUDIT REFERENCE GUIDE
EVALUATION OF CONTENT

*(Section III – continued from the previous page.
Please refer to the Uniform Inspection Program Audit Worksheet and Audit Reference Guide
when responding to the following questions)*

4. Were any of the 10 Program Components consistently difficult to assess during the uniform inspection program audit?

Yes No

Please identify these by placing an “X” adjacent to the **item number** that identifies any Program Component(s) that were **DIFFICULT TO OBSERVE**. The Item number below corresponds to the same item number on the Audit Worksheet.

| | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Item 1 | <input type="checkbox"/> Item 3 | <u>Audit Worksheet</u> | <input type="checkbox"/> Item 7 | <input type="checkbox"/> Item 9 |
| <input type="checkbox"/> Item 2 | <input type="checkbox"/> Item 4 | <input type="checkbox"/> Item 5 | <input type="checkbox"/> Item 8 | <input type="checkbox"/> Item 10 |
| <input type="checkbox"/> Item 6 | | | | |

5. If you have identified DIFFICULT TO OBSERVE Program Component(s), what factors made them difficult to observe?

6. Were there specific Program Components that FSIOs consistently experienced DIFFICULTY?

Yes No

Please identify these by placing an “X” adjacent to **the item number** of the Performance Elements(s) FSIOs had **DIFFICULTY** with. The Item number below corresponds to the same item number on the Audit Worksheet.

| | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Item 1 | <input type="checkbox"/> Item 3 | <u>Audit Worksheet</u> | <input type="checkbox"/> Item 7 | <input type="checkbox"/> Item 9 |
| <input type="checkbox"/> Item 2 | <input type="checkbox"/> Item 4 | <input type="checkbox"/> Item 5 | <input type="checkbox"/> Item 8 | <input type="checkbox"/> Item 10 |
| <input type="checkbox"/> Item 6 | | | | |

7. If you have identified Program Component(s) that FSIOs experienced DIFFICULTY with, what factors contributed to their challenges?

(Section III – continues on the next page)

SECTION III
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET AND AUDIT REFERENCE GUIDE
EVALUATION OF CONTENT

*(Section III – continued from the previous page.
Please refer to the Uniform Inspection Program Audit Worksheet and Audit Reference Guide
when responding to the following questions)*

8. Do you think there are any Program Components that should be DELETED from the Audit Worksheet?

Yes No

Please identify these by placing an “X” next to the item number of the Program Component(s) that should be DELETED. The Item number below corresponds to the same item number on the Audit Worksheet.

| | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Item 1 | <input type="checkbox"/> Item 3 | <u>Audit Worksheet</u> | <input type="checkbox"/> Item 7 | <input type="checkbox"/> Item 9 |
| <input type="checkbox"/> Item 2 | <input type="checkbox"/> Item 4 | <input type="checkbox"/> Item 5 | <input type="checkbox"/> Item 8 | <input type="checkbox"/> Item 10 |
| <input type="checkbox"/> Item 6 | | | | |

9. If you recommended that one or more Program Components be deleted in Question #8, what rationale can you provide to support your recommendation?

10. The performance areas/competencies listed as examples under each Program Component on pages 2 through 4 of the *Audit Reference Guide* are helpful to conducting the uniform inspection program audit. (Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).

Strongly Disagree 1 2 3 4 5 6 **Strongly Agree**

Please provide an explanation for your response.

(Section III – continues on the next page)

SECTION III
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET AND AUDIT REFERENCE GUIDE
EVALUATION OF CONTENT

*(Section III – continued from the previous page.
Please refer to the Uniform Inspection Program Audit Worksheet and Audit Reference Guide
when responding to the following questions)*

11. Are there any of the 10 Program Components for which the performance areas/competencies listed as examples on pages 2 through 4 of the *Audit Reference Guide* need REVISIONS (additions, deletions, changes)?

Yes No

Please identify these by placing an “X” next to the item number of the Program Component(s) needing REVISIONS to the examples provided on pages 2 through 4 of the *Audit Reference Guide*.

Audit Reference Guide (pages 2-4)

| | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Item 1 | <input type="checkbox"/> Item 3 | <input type="checkbox"/> Item 5 | <input type="checkbox"/> Item 7 | <input type="checkbox"/> Item 9 |
| <input type="checkbox"/> Item 2 | <input type="checkbox"/> Item 4 | <input type="checkbox"/> Item 6 | <input type="checkbox"/> Item 8 | <input type="checkbox"/> Item 10 |

12. If you identified one or more Program Component(s) needing REVISIONS, what changes would you recommend to the performance areas/competencies listed as examples?

(Section IV – Starts on the next page)

SECTION IV
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET
EVALUATION OF THE WORKSHEET FORMAT

(Please refer to the Uniform Inspection Program Audit Worksheet when responding to the following questions)

1. The format of the *Audit Worksheet* is user-friendly. *(Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).*

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

What improvements would you recommend?

2. The header labels are appropriate.

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

What improvements would you recommend?

3. Enough space is provided for responses and comments.

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

What improvements would you recommend?

4. Is there any general information you believe is important that is MISSING?

Yes

No

Please identify information that needs to be ADDED.

(Section IV – continues on the next page)

SECTION IV
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
AUDIT WORKSHEET
EVALUATION OF THE WORKSHEET FORMAT

(Section IV – continued from the previous page.

Please refer to the Uniform Inspection Program Audit Worksheet when responding to the following questions)

5. Is there any general information that should be DELETED?

Yes

No

Please identify information that should be DELETED.

6. Did you modify the *Audit Worksheet* during the Uniform Inspection Program Pilot Project?

Yes

No

If Yes, please attach a copy of your modified *Audit Worksheet*.

(Section V – Starts on the next page)

SECTION V
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
(OPTIONAL FORM)
AUDIT RESULTS SUMMARY AND FSIO TRAINING PLAN

(Please refer to the Audit Results Summary and FSIO Training Plan to respond to the following questions)

1. The *Audit Results Summary and FSIO Training Plan* was included as an optional form a jurisdiction could use during the uniform inspection program audit pilot project. Did your jurisdiction decide to use the form?

Yes No

What factors influenced your decision?

IF YOUR JURISDICTION USED THE OPTIONAL AUDIT RESULTS SUMMARY AND TRAINING PLAN – PLEASE RESPOND TO QUESTIONS 2-6. IF YOU DID NOT USE THE OPTIONAL AUDIT RESULTS AND TRAINING PLAN PROCEED TO SECTION VI

2. The *Audit Result Summary and FSIO Training Plan* is a useful tool for documenting the audit process and ensuring that additional training is provided to the FSIO for Program Components noted as needing improvement during the establishment file reviews and joint field inspections. *(Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).*

Strongly Disagree

Strongly Agree

1

2

3

4

5

6

What improvements would you recommend?

3. The format of the *Audit Results Summary and FSIO Training Plan* is user-friendly

Strongly Disagree

Strongly Agree

1

2

3

4

5

6

What improvements would you recommend?

(Section V – continues on the next page)

SECTION V
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
(OPTIONAL FORM)
AUDIT RESULTS SUMMARY AND FSIO TRAINING PLAN

(Section V – continued from the previous page.)

(Please refer to the Audit Results Summary and FSIO Training Plan to respond to the following questions)

4. The header labels on the *Audit Results Summary and Training Plan* are appropriate.

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

What improvements would you recommend?

5. Enough space is provided for responses and comments on the form.

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

What improvements would you recommend?

6. Is there any general information that is missing?

Yes

No

Please identify information that needs to be ADDED.

(Section VI – Starts on the next page)

SECTION VI
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
RESULTS SUMMARY

1. How many FSIOs were assessed as part of the jurisdiction’s uniform inspection program audit? _____

2. How many FSIOs successfully performed all 10 Program Components during the Audit Process? _____

3. Within your jurisdiction, who served as the “auditors” (individuals responsible for assessing FSIOs as part of the uniform inspection program audit)?

A. Retail Food Program Managers

B. The Supervisors of the FSIOs

C. Training Officers

D. Senior FSIOs

E. Quality Assurance/Quality Control Officers

F. Other – Please describe in box provided below

3. How many “auditors” (individuals responsible for assessing FSIOs as part of the uniform inspection program audit) participated in the Pilot Project? _____

4. Was there more than one auditor per FSIO?

Yes

No

5. If you answered YES to Question #4 , did FSIOs report any differences between the auditors related to how the audit was conducted?

Yes

No

If differences were noted, provide specific examples?

(Section VI – continues on the next page)

SECTION VI
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
RESULTS SUMMARY

(Section VI – continued from the previous page).

6. The uniform inspection program audit process is designed in such a way as to facilitate a strengths-weaknesses assessment of our jurisdiction regulatory retail food protection inspection program. *(Please place an “X” in the box next to the rating that reflects the level of your agreement or disagreement with this statement).*

Strongly Disagree

Strongly Agree

1

2

3

4

5

6

What changes would you recommend to enhance the inspection program audit process?

7. On average, how long did it take to complete an orientation of the Uniform Inspection Program Audit process and *Audit Worksheet* for each of the FSIOs?

A. less than 60 minutes

B. 61 – 120 minutes

C. 121 – 180 minutes

D. Other. Please Specify

8. On average, how long did it take to complete an audit of the Pre-Inspection Establishment File Review?

A. less than 30 minutes

B. 31 – 60 minutes

C. Other. Please Specify

9. On average, how long did it take to complete the audit of a joint field inspection (SINGLE INSPECTION) using the Audit Worksheet (actual time in hours – including inspection, completion of the inspection report, and discussion of the inspection report with the person in charge)? Do NOT include travel time to & from the establishment.

A. less than 60 minutes

B. 61 – 120 minutes

C. 121 – 180 minutes

D. Other. Please Specify

10. On average, how long did it take to complete the audit process for each individual FSIO? (Include the orientation process; establishment file reviews; actual inspection time; review of the audit reports with the FSIO; and completion of all inspection program audit documents/worksheets.)

A. less than 8 hours

B. 9 – 16 hours

C. 17 – 24 hours

D. 25 – 32 hours

E. 33 – 40 hours

F. Other. Please Specify:

(Section VI – continues on the next page)

SECTION VI
UNIFORM INSPECTION PROGRAM AUDIT PILOT PROJECT
RESULTS SUMMARY

(Section VI – continued from the previous page).

11. The uniform inspection program audit process is a valuable use of my Jurisdiction’s resources (e.g., time; staff; finances).

Strongly Disagree

 1 2 3 4 5 6

Strongly Agree

Explain, why?

12. If you indicated in Question #11 that the Uniform Inspection Program Audit process was a valuable use of your Jurisdiction’s resources, how should the audit documents and forms be made available to other regulatory retail food protection programs?

- A.** The Uniform Inspection Program Audit and Forms should be included as an example template in an Appendix to Standard 4 – Uniform Inspection Program, *FDA Voluntary National Retail Food Regulatory Program Standards*.
- B.** The Uniform Inspection Program Audit and Forms should be made available as a resource document on FDA’s web site as a stand alone piece. The audit process and forms should not be included as part of the *FDA Voluntary National Retail Food Regulatory Program Standards*
- C.** Other – Please describe in box provided below

(Section VII – Starts on the next page)

SECTION VII
UNIFORM INSPECTION PROGRAM AUDIT
ADDITIONAL COMMENTS SECTIONS

(Provide any additional comments on any aspect of the Uniform Inspection Program Audit process or forms)

GUIDE TO THE UNIFORM INSPECTION PROGRAM AUDIT

Conference for Food Protection Uniform Inspection Program Audit Pilot Project

The Guide to the Uniform Inspection Program Audit:

- Provides the background leading up to the development of the Conference for Food Protection (CFP) Uniform Inspection Program Audit Pilot Project;
- Describes the purpose of the audit;
- Defines Food Safety Inspection Officer's (FSIO) role;
- Clarifies the auditor's role;
- Discusses food establishment selection criteria, and
- Outlines the implementation steps for the project.

Preparing for Pilot Project Participation

A work group originally assembled by the 2004 Conference has been working with representatives of the Food and Drug Administration (FDA) to create a multi-tiered process for training and standardizing FSIOs. Over the past 5 years, the work group has used the criteria contained in the *FDA Voluntary National Retail Food Regulatory Program Standards (FDA Program Standards)*, Standard 2 – Trained Regulatory Staff to develop a comprehensive training model for regulatory retail food safety inspection officers.

Jurisdiction's participating in the pilot project must implement the training criteria in Standard #2 for FSIOs newly hired or assigned to the retail food protection program. A copy of the Standard 2 criteria, including the CFP Field Training Plan is included with the CFP Pilot Project Package

After completing the training requirements in Steps 1 through 3, Standard 2, Trained Regulatory Staff, the FSIO is now eligible as a candidate for the Uniform Inspection Program Audit that is to be used in conjunction with the quality assurance criteria contained in Standard 4. Standard 4 applies to the jurisdiction's internal policies and procedures established to ensure uniformity among regulatory staff in the interpretation of regulatory requirements, program policies, and compliance/enforcement procedures. It requires that an assessment review of each inspector's work be made during at least two joint on-site inspections, with a corresponding file review of at least the three most recent inspection reports. The quality assurance assessment must include a review of 10 program components that comprise the Uniform Inspection Program Audit Worksheet used to evaluate inspection uniformity, inspection quality, inspection frequency, and uniform application of the regulatory jurisdictions retail food safety regulations and administrative procedures by all inspection staff.

Jurisdiction's participating in the pilot project must follow the criteria in Standard#4 and commit to conducting at least two file reviews and joint field inspections of selected retail food

establishments with eligible FSIOs. A copy of the Standard 4 criteria is included with the CFP Pilot Project Package.

Purpose of the Uniform Inspection Program Audit

The use of the Uniform Inspection Program Audit provides a mechanism for regulatory jurisdictions to conduct quality assurance evaluations of their retail food protection programs while assessing the strengths and weakness within their training program for FSIOs.

The Uniform Inspection Program Audit Process

Selection of Establishments

Management should select the two establishments to be used for the uniform inspection program audit following the Standard 4 criteria. In all cases, the food establishments selected should reflect the work covered during the FSIO's training and provide an opportunity to assess all 10 program components identified in the Standard 4 criteria.

File Review – Selected Establishments

A file review of each of the selected establishments is to be conducted as part of the audit process in order to assess the inspection program areas and competencies that may not be observable on-site at the facility. For example, repeat violations, follow-up compliance and enforcement, and discussion and documentation of long-term corrective options may be difficult or impossible to assess without an establishment file review.

FSIO's Role During Joint Field Inspections

The FSIO is responsible for independently conducting the inspection while being evaluated by the auditor. The FSIO should refrain from asking the auditor questions pertinent to the inspection (e.g. advice, assistance), but should feel free to explain his/her actions to the auditor before and during the audit. These explanations help the auditor understand the FSIO's approach to the inspection and reduce the risk of the auditor drawing inaccurate conclusions about the FSIO's actions. If unique or unexpected circumstances are encountered during the audit, the FSIO may seek appropriate guidance from his/her supervisor (or designee) while keeping the auditor informed of these contacts.

Uniform Inspection Auditor's Role During Joint Inspections

The uniform inspection program auditor assesses the FSIO's ability to conduct an inspection using the Standard 4 criteria and plays no role in conducting the inspection. The FSIO should conduct the inspection as if the auditor were not present. The auditor needs to be as unobtrusive as possible. The auditor may ask questions of the FSIO to better understand or clarify the rationale for the candidate's actions.

Pilot Project Steps – Uniform Inspection Program Audit

NOTE: Overall responsibility for the implementation of this pilot project within each jurisdiction rests with the (State, Local, Tribal) retail food protection program management. Management may want to delegate audit responsibilities to first line

supervisors (i.e. establishment selection, audit scheduling, and completion of uniform inspection program tables contained in Appendix D, Standard 4).

Step 1 – The FSIO works with his/her first line supervisor (or designee) to complete all requirements listed in Steps 1 through 3, Standard 2 – Trained Regulatory Staff.

Step 2 – The supervisor confirms that the FSIO has completed the required Standard 2 training outlined in Step 1 above.

Step 3 – The Department Director (or designee) selects the individual(s) to conduct the uniform inspection program audits. At least two retail food establishment file reviews and joint field inspections must be completed for each eligible FSIO. Establishments used in the audit must be selected in accordance with the protocol outlined in Appendix D, Standard 4 – Uniform Inspection Program.

NOTE: Jurisdictions having less than four FSIOs will need to conduct extra inspections with each inspector in order to reach a minimum total of 8 inspections. This is necessary in order to have a sample of inspection large enough to statistically measure the uniformity of the inspection program fairly (Standard 4, Appendix D).

Step 4 – Each eligible FSIO performs a file review and field inspection with the jurisdiction’s designated auditor. During these quality assurance assessments, the jurisdiction’s designated auditor will verify that FSIO successfully demonstrates each of the desired activities and competencies for the 10 inspection program areas listed in the Standard 4 criteria. The CFP Uniform Inspection Program Audit Worksheet is completed by the auditor for each of the selected establishments. For this CFP pilot project, the Uniform Inspection Program Audit Reference Guide has been developed as an auditing tool for determining the competencies to observe for each inspection program area.

Step 5 – Upon completion of the file reviews and joint field training inspections for the selected establishments, the jurisdiction’s designated auditor completes the Audit Results Summary section of the Audit Results Summary and FSIO Training Plan Form. The Audit Results Summary establishes a method for providing feedback to the FSIO and identifies any inspection program areas or competencies the FSIO needs additional training on. The jurisdiction has the flexibility to address these additional training areas using their internal procedures and training programs. A FSIO Training Plan template is included as a tool for jurisdiction to develop a structured approach for addressing each competency the FSIO did not perform successfully during the audit process.

Step 6 – The FSIO performance results from all Uniform Inspection Audit Worksheets are used to complete the Standard 4 quality assurance assessment of the retail food protection inspection program. The jurisdiction uses the tables in Appendix D, Standard 4, to determine conformance with the uniform inspection program criteria.

- Jurisdictions with less than 10 FSIOs are to use Table D-1
- Jurisdictions with more than 10 FSIOs are to use Table D-2

Appendix D, Standard 4 provides instructions for how to use each of the tables described above.

Step 7 – The jurisdiction uses the results from the Standard 4 – Uniform Inspection Audit as one of the tools for determining the strengths and gaps within their Food Safety Inspection Officer training program. If any of the 10 uniform inspection program areas are not met, the jurisdiction may need to re-assess the training materials/methods used to prepare FSIOs for performing these inspection program competencies.

Uniform Inspection Program Audit Pilot Project - Reference Documents

- FDA Voluntary National Retail Food Regulatory Program Standards (April 2009):
 - Standard 2, Trained Regulatory Staff
 - Appendix B – Supplement to Standard 2 – Trained Regulatory Staff
 - Standard 4, Uniform Inspection Program
 - Appendix D – Supplement to Standard 4 – Uniform Inspection Program
- Guide to the Uniform Inspection Program Audit
- Uniform Inspection Program Pilot Project – Audit Worksheet
- Uniform Inspection Program Pilot Project – Audit Reference Guide
- Uniform Inspection Program Pilot Project – Audit Results Summary and FSIO Training Plan

Audit Worksheet
Conference for Food Protection
Uniform Inspection Program Audit Pilot Project

| | |
|--|---------------------------|
| Food Safety Inspection Officer: | |
| Date of Audit Start: | Date of Audit End: |
| Jurisdiction's Auditor: | |
| Selected Establishment: | Permit Number: |
| Establishment Address: | |

Uniform Inspection Program Audit Worksheet

(To be used for the two joint field inspections and file reviews conducted as part of the Standard 4 – Uniform Inspection Program quality assurance assessment)

Food Safety Inspection Officer (FSIO) has successfully completed pre-requisite training courses as specified in the *FDA Voluntary National Retail Food Regulatory Program Standards*, Standard 2 – Trained Regulatory Staff.

YES NO

COMMENTS

1. Did the Food Safety Inspection Officer (FSIO) determine and document the compliance status of each risk factor and intervention (i.e., IN compliance, OUT of Compliance, Not Observed, or Not Applicable) through observation and investigation?

YES NO

COMMENTS

2. Did the FSIO complete an inspection report that is clear, legible, concise, and accurately records findings, observations and discussion with establishment management?

YES NO

COMMENTS

3. Did the FSIO interpret and apply laws, regulations, policies and procedures correctly?

YES NO

COMMENTS

4. Did the FSIO cite the proper code provisions for CDC-identified risk factors and Food Code interventions?

YES NO

COMMENTS

5. Did the FSIO review past inspection findings and act on repeated or unresolved violations?

YES NO

COMMENTS

6. Did the FSIO follow through with compliance and enforcement procedures in accordance with the jurisdiction's administrative procedures?

YES NO

COMMENTS

7. Did the FSIO obtain and document on-site corrective action for out-of-control risk factors at the time of inspection as appropriate to the type of violation?

YES NO

COMMENTS

8. Did the FSIO document that options for the long term control of risk factors were discussed with establishment managers when the same out-of-control risk factor occurred on consecutive inspections? Options may include but are not limited to risk control plans, standard operating procedures, equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP Plans.

YES NO

COMMENTS

9. Did the FSIO verify that the establishment is in the proper risk category and that the required inspection frequency is being met?

YES NO

COMMENTS

10. Does the FSIO file reports and other documents in a timely manner?

YES NO

COMMENTS

AUDIT REFERENCE GUIDE
Conference for Food Protection
Uniform Inspection Program Audit Pilot Project

Standard 4 applies to the jurisdiction’s internal policies and procedures established to ensure uniformity among regulatory staff in the interpretation of regulatory requirements, program policies, and compliance/enforcement procedures. It requires that an assessment review of each inspector’s work be made during at least two joint on-site inspections, with a corresponding file review of at least the three most recent inspection reports. The quality assurance assessment must include a review of 10 program components that evaluate inspection uniformity, inspection quality, inspection frequency, and uniform application of the regulatory jurisdictions retail food safety regulations and administrative procedures by all inspection staff. The quality assurance assessment is intended to assure that each inspector:

1. Determines and documents the compliance status of each risk factor and intervention (i.e., IN compliance, OUT of Compliance, Not Observed, or Not Applicable) through observation and investigation;
2. Completes an inspection report that is clear, legible, concise, and accurately records findings, observations and discussion with establishment management;
3. Interprets and applies laws, regulations, policies and procedures correctly;
4. Cites the proper code provisions for CDC-identified risk factors and Food Code interventions;
5. Reviews past inspection findings and acts on repeated or unresolved violations;
6. Follows through with compliance and enforcement;
7. Obtains and documents on-site corrective action for out-of-control risk factors at the time of inspection as appropriate to the type of violation;
8. Documents that options for the long term control of risk factors were discussed with establishment managers when the same out-of-control risk factor occurred on consecutive inspections. Options may include but are not limited to risk control plans, standard operating procedures, equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP Plans;
9. Verifies that the establishment is in the proper risk category and that the required inspection frequency is being met; and
10. Files report and other documents in a timely manner

Standard 4 requires that an assessment of each inspector’s work, using the above 10 inspection program areas, be made during a least two joint on-site inspections, with a corresponding file review of the three most recent inspection reports. Retail food program inspection staff must demonstrate competency for each of the 10 Standard 4 inspection program areas. The Audit Reference Guide is designed to help clarify the competencies that correspond to each of the 10 inspection program areas identified in the Standard 4 criteria and included as part of the Uniform Inspection Program Audit Worksheet.

For each inspection program area, examples of applicable competencies from the CFP Field Training Plan are included as part of the Audit Reference Guide. The list of competencies under each inspection program area, are examples and **not** intended to be all inclusive. Should further guidance be needed, the CFP Field Training Plan contains a comprehensive listing of competencies that can be used to determine that a FSIO has successfully demonstrated the required inspection program area.

UNIFORM INSPECTION PROGRAM AREAS

11. **Did the Food Safety Inspection Officer (FSIO) determine and document the compliance status of each risk factor and intervention (i.e., IN compliance, OUT of Compliance, Not Observed, or Not Applicable) through observation and investigation?**

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO correctly used inspection equipment during joint inspections.
- FSIO asked questions and engages in a dialogue with person in charge/employees to obtain information relevant to inspection.
- FSIO used available means (e.g., interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers.
- FSIO demonstrated proper sanitary practices as expected from a food service employee.
- FSIO used a risk-based inspection methodology to correctly assess regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food. When the risk factor and/or intervention was applicable and observable during the inspection, the FSIO verified:
 - i. Demonstration of Knowledge of the person in charge
 - ii. Approved food sources
 - iii. Food safety practices for preventing cross-contamination of ready-to-eat foods
 - iv. Food contact surfaces are cleaned and sanitized
 - v. Restriction and exclusion of ill employees
 - vi. Employee handwashing
 - vii. Cooking temperatures to destroy bacteria and parasites
 - viii. Cold holding, hot holding, cooling and reheating temperatures of foods requiring time/temperature control for safety (TCS)
 - ix. Procedures are in place when time alone is used as a microbial growth barrier
 - x. Date marking of ready-to-eat, TCS food held for more than 24 hours
 - xi. Availability of a consumer advisory for foods of animal origin served raw or undercooked

12. Did the FSIO complete an inspection report that is clear, legible, concise, and accurately records findings, observations and discussion with establishment management?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO completed inspection form per jurisdiction’s administrative procedures (e.g., observations; corrective actions; public health reason; applicable code reference; compliance dates).
- FSIO included with inspection report any compliance or regulatory documents identified or cross-referenced in written statements (e.g., exhibits, attachments, sample forms, embargo forms, destruction forms, suspension notices).
- FSIO presented inspection report, and when necessary cross-referenced documents, to person in charge.
- FSIO conducted an exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.
- FSIO only reported substantiated findings as violations.
- FSIO used effective communication and conflict resolution techniques to overcome inspection barriers

13. Did the FSIO interpret and apply laws, regulations, policies and procedures correctly?

Examples of Performance Areas/competencies from the Standard 2 CFP Field Training Plan:

- FSIO correctly assessed the compliance status of other regulations (not included in Item 1 above) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.
- FSIO provided the person in charge/employees with accurate answers to inspection-related questions.

14. Did the FSIO cite the proper code provisions for CDC-identified risk factors and Food Code interventions?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO has knowledge of jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.
- FSIO cited the proper code provision for CDC-identified risk factors and Food Code interventions on the written inspection report.

15. Did the FSIO review past inspection findings and act on repeated or unresolved violations?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO reviewed establishment file for previous inspection reports noting documented out of compliance observations.
- FSIO reviewed establishment complaints on file.
- FSIO verified correction of out of compliance observations identified during previous inspections.

16. Did the FSIO follow through with compliance and enforcement procedures in accordance with the jurisdiction’s administrative procedures?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO follows the jurisdiction’s compliance and enforcement policies and procedures regarding repeated and unresolved violations.
- FSIO follows the jurisdiction’s policy in regard to disclosure of confidential information.

17. Did the FSIO obtain and document on-site corrective action for out-of-control risk factors at the time of inspection as appropriate to the type of violation?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO obtained immediate corrective action for out of compliance employee practices and management procedures essential to the safe storage, preparation, and service of food.
- FSIO documented on the written inspection report the immediate corrective action that was taken for each out-of-control risk factor.

18. Did the FSIO document that options for the long term control of risk factors were discussed with establishment managers when the same out-of-control risk factor occurred on consecutive inspections? Options may include but are not limited to risk control plans, standard operating procedures, equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP Plans.

Examples of Performance Areas/Competencies:

- FSIO discussed options, included in the jurisdiction’s administrative policies, for long term control of risk factors with the person in charge in case where the out-of-control risk factor occurred on consecutive inspections.
- FSIO documented on the inspection report the long term control option agreed to by the person in charge for the identified out-of-control risk factor.

19. Did the FSIO verify that the establishment is in the proper risk category and that the required inspection frequency is being met?

Examples of Performance Areas/Competencies from the Standard 2 CFP Field Training Plan:

- FSIO reviewed establishment file to determine proper risk category and that the required inspections have been completed
- If applicable, FSIO reviewed establishment files for required HACCP Plans or documents supporting the issuance of a variance.

20. Does the FSIO file reports and other documents in a timely manner?

Examples of Performance Areas/Competencies:

- A review of the records within the establishment file indicates that the FSIO has followed the jurisdiction's administrative procedures pertaining to the filing of inspection reports and support documents.

Audit Results Summary and FSIO Training Plan

Conference for Food Protection

Uniform Inspection Program Audit Pilot Project

Use of the Audit Results Summary and FSIO Training Plan

The *FDA Voluntary National Retail Food Regulatory Program Standards* (Program Standards) provide a foundation upon which a regulatory retail food protection program can build through a continuous improvement process. The CFP Uniform Inspection Program Audit Pilot Project provides a quality assurance assessment of the jurisdiction's inspection program and identifies training priorities for each Food Safety Inspection Officer (FSIO). The Audit Results Summary and FSIO Training Plan provides a method for addressing additional inspection program training needs identified during the uniform inspection program audit process.

As the title implies, the Audit Results Summary and FSIO Training Plan consists of two parts:

- PART I – Audit Results Summary
- PART II – FSIO Training Plan

Completion of each part of the form establishes a structure for ensuring that FSIOs are provided the necessary program support to address any of the competencies noted during the inspection program audit process as ones where additional training is needed.

PART I – Audit Results Summary

The jurisdiction's designated auditor completes the audit results summary, including the header information. In the header section, the auditor will indicate if the FSIO requires additional training for one or more competencies observed during the audit process.

A. No Additional Training Needs Identified During the Audit

If "NO" additional training needs have been identified, then the auditor, FSIO, and the FSIO's Supervisor sign the bottom of the summary section confirming the audit results. The original should be placed in the FSIO's Training file. The FSIO should make a copy for their records.

B. Additional Training Needs Identified During the Audit

If additional training needs were identified during the uniform inspection program audit process, the auditor checks the "YES" box in the header section. In the table below the header section, the auditor identifies the competencies from the Audit Worksheet for which the FSIO requires additional training. The auditor reviews these items with the FSIO and the FSIO's Supervisor to ensure understanding of the specific competency that is to be addressed through training. The auditor, FSIO, and the FSIO's Supervisor all sign the form at the bottom of the page confirming the audit results.

PART II – FSIO Training Plan

(NOTE: Part II is not completed unless the auditor has identified FSIO competencies (in Part I) that require additional training)

The FSIO's Supervisor meets with the FSIO to set up an appropriate training plan to address competencies in need of improvement. The jurisdiction's inspection program policies and procedures should address appropriate types of training and methods. Training could range from simply a demonstration or discussion of the proper procedures to a structured training workshop. The selected training method should provide the FSIO the knowledge, skill, and ability to perform each of the competencies the auditor earmarked for improvement. In PART II, the FSIO's Supervisor documents the agreed upon training plan. The FSIO and the FSIO's Supervisor sign indicating full understanding and commitment to the training.

The FSIO supervisor follows up to ensure that the training plan is completed per the jurisdiction's administrative procedures and time frames. The supervisor documents when the FSIO has successfully demonstrated the competencies identified in the training plan. If additional training is needed, the supervisor documents the new plan. Upon successful completion of the training plan, the FSIO, FSIO's Supervisor, and Food Program Manager sign the bottom of training plan. The original is placed in the FSIO's Training file. The FSIO retains a copy for their records.

Audit Results Summary and FSIO Training Plan
Conference for Food Protection
Uniform Inspection Program Audit Pilot Project

| |
|--|
| Date: |
| Food Safety Inspection Officers Name: |
| Jurisdiction's Auditor Name: |
| Date Uniform Inspection Audit Completed: |
| Uniform Inspection Program Audits Results indicate additional FSIO training needs: <input type="checkbox"/> YES <input type="checkbox"/> NO |

If Audit Results indicate additional FSIO training is needed, complete the following table:

| PART I – AUDIT RESULTS SUMMARY | |
|---|-------|
| <i>Identify the specific competencies needing improvement from the Uniform Inspection Program Audit Worksheet and describe the specific performance required.</i> | |
| Competency: | |
| <i>Specific Improvement Required:</i> | |
| Competency: | |
| <i>Specific Improvement Required:</i> | |
| Competency: | |
| <i>Specific Improvement Required:</i> | |
| Competency: | |
| <i>Specific Improvement Required:</i> | |
| Competency: | |
| <i>Specific Improvement Required:</i> | |
| Confirmation of Audit Results Signatures | |
| Jurisdiction's Auditor: | Date: |
| FSIO: | Date: |
| FSIO's Supervisor: | Date: |

| PART II – FSIO Training Plan | | | |
|--|--|-------|--|
| <i>Describe the training methods and instruction for addressing each competency identified in the table above.</i> | | | |
| | | | |
| Training Plan Agreement Signatures | | | |
| FSIO: | | Date: | |
| FSIO's Supervisor: | | Date: | |
| Follow-Up on FSIO Training Plan | | | |
| Follow-up Training Completion Date(s): | | | |
| <input type="checkbox"/> <i>FSIO has successfully demonstrated the competencies identified in the training plan</i> | | | |
| <input type="checkbox"/> <i>FSIO has not successfully demonstrated the competencies identified – additional training is needed</i> | | | |
| <i>The competencies where additional training is needed include:</i> | | | |
| | | | |
| Follow-up Review Signatures | | | |
| FSIO: | | Date: | |
| FSIO's Supervisor: | | Date: | |
| Food Program Manager: | | Date: | |

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 051
Issue: 2012 II-025**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Recommendations from Uniform Inspection Program Audit Pilot Project

Issue you would like the Conference to consider:

Based on a review of the findings and feedback from the *Uniform Inspection Program Audit Pilot Project* (conducted July 2010 through June 2011), the CFP Certification of Food Safety Regulation Professionals Work Group has identified specific criteria contained in the Voluntary National Retail Food Regulatory Program Standards, Standard 4 - *Uniform Inspection Program* criteria that should be reviewed and revised, as necessary, to facilitate the implementation of quality assurance assessments within regulatory retail food protection programs. The CFSRP Work Group is recommending that the FDA, with input from the CFP Program Standard Committee, review the pilot project recommendations impacting Standard 4 - *Uniform Inspection Program*, to determine if the suggested revisions to the criteria are appropriate and in keeping with the intent and scope of the FDA *Voluntary National Retail Food Regulatory Program Standards*.

The Work Group's ***Uniform Inspection Program Audit Pilot Project Report*** was **submitted** as an attachment to the Issue titled: Report - CFSRP Part B - Uniform Inspection Program Audit Pilot Project.

Public Health Significance:

Standard 4 applies to a regulatory jurisdiction's internal policies and procedures established to ensure uniformity among regulatory staff in the interpretation of regulatory requirements, program policies, and compliance/enforcement procedures. It requires that a review of each Food Safety Inspection Officer's (FSIO) work be made during at least two joint inspections, with a corresponding file review of at least the three most recent inspection reports. These quality assurance assessments provide important feedback that will assist the regulatory jurisdiction in identifying existing strengths and potential areas for improvement within their existing retail food training program or administrative policies. The *Uniform Inspection Program Audit Pilot Project* provided an opportunity to garner important feedback from a limited number of jurisdictions enrolled in the FDA *Voluntary National Retail Food Regulatory Program Standards* on the practical application of the criteria contained in Standard 4. The subsequent pilot project report contains a number of recommendations for enhancing the effectiveness of the Standard that include, but are not limited to:

- Aligning the 10 Program Elements described in Standard 4 with the Performance Elements and Competencies contained in the Standard 2 - *CFP Field Training Plan* for new hires or staff newly assigned to the retail food protection program.
- Providing a linear listing of the Program Elements in Standard 4 to reflect an organized flow to the inspection process.
- Providing an assessment system that differentiates between the complexity and importance of the 10 Program Elements, particularly as they are assessed during the inspection review process.
- Clarifying the Standard 4 criteria to include qualifications for an individual charged with assessing the performance of field staff and what type of establishments should be selected for the file and field review.
- Re-evaluating the system currently in place for determining compliance with the Standard 4 criteria. The Standards are intended to apply to the operation and management of regulatory retail food programs, NOT as assessments of practitioners in the field. The current system weighted on a practitioner's ability to demonstrate the 10 Program Elements during field inspections seems to be skewed more toward an assessment of the individual rather than an evaluation of the regulatory retail food inspection program.

Recommended Solution: The Conference recommends...:

that a letter be sent to FDA requesting that they:

1. Work in collaboration with the Program Standards Committee to revise Standard 4, Uniform Inspection Program, to address the pilot project comments and to assess the criteria in Standard 4 to make it more program focused rather than focused on the individual.

2. Review for potential revisions to the Standard 4 Uniform Inspection Program criteria and field inspection review process, the following recommendations contained in the CFP CFSRP Uniform Inspection Program Audit Pilot Project Report.

- Revise the Guide to Conducting a Uniform Inspection Program Audit. Some changes that should be considered include:
 - a) Developing a more comprehensive guidance document similar to the CFP Field Training Manual contained in Standard 2 that explains the criteria for each component of the audit process;
 - b) Clarifying the process for selecting the establishments that are to be used for the file and field review;
 - c) Clarifying the parameters for what is to be included as part of the establishment file review;
 - d) Providing expanded guidance on the auditor's qualifications, role, and responsibilities.
- Align the 10 Program Elements contained in Standard 4 with the Performance Elements and competencies identified in the Standard 2 - *CFP Field Training Plan*. This alignment would necessitate revisions to the Guide to Conducting a Uniform Inspection Program Audit, Audit Worksheet, and Audit Reference Guide.
- Present the 10 Program Elements contained in the Standard 4 criteria, the Guide to Conducting a Uniform Inspection Program Audit, and Audit Worksheet in a linear format to reflect a logical sequence to the inspection process.

- Incorporate the information contained in the Audit Reference Guide into the Guide to Conducting a Uniform Inspection Audit to eliminate the need for multiple documents.
- Ensure consistency in the weighting/assessing of each of the 10 Program Elements. Some Program Elements, such as the one that relates to assessing risk factors, are much more complex than others, such as the timely filing of reports and documents. A more equitable, objective assessment system should be established for the audit process.
- Design the audit process and worksheet to allow jurisdictions the flexibility for assessing inspection Program Elements that are specific to their retail food protection program. The Standard 2 - CFP Field Training Plan builds in the flexibility for a jurisdiction to include performance elements / competencies that are important to their program. The Standard 4 criteria and associated audit worksheet and guides are more rigid in their format.
- Re-evaluate the assessment protocol for Performance Elements and provide better guidance as to what constitutes an effective performance measurement. The field inspection assessment conducted as part of Standard 4 seems to take an all or nothing approach. Item 1 for example pertains to an assessment of observations of risk factors and public health interventions - eleven different categories. If an inspector fails to make an observation of just one item in this category, this Program Element is not met. This level of performance is higher than what is used for FDA Food Code Standardizations.
- Provide defined performance measurements that are quantifiable within the Program Elements contained in Standard 4. Some of the Program Elements are very subjective in nature and do not contain definitive performance measurements, such as producing legible reports.
- Include a comment section within the Audit Worksheet so that a more detailed description can be provided as to the observations made of an inspector's performance of any one of the 10 Program Elements.

3. Obtain input and feedback from the CFP Program Standards Committee to assist FDA in the review of the recommendations contained in the CFP CFSRP pilot project report.

Reference:

The *Uniform Inspection Program Audit Pilot Project Report* was submitted as an attachment to the Issue titled: Report - CFSRP Part B - Uniform Inspection Program Audit Pilot Project.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 052
Issue: 2012 II-026**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Re-create Certification of Food Safety Regulation Professionals Work Group

Issue you would like the Conference to consider:

The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group has identified specific initiatives pertaining to the training and professional development of regulatory retail food safety inspection officers that require continued Conference deliberation. A 2012-2014 CFP Certification of Food Safety Regulations Professional (CFSRP) Work Group should be created by the Conference to continue the work on these initiatives.

Public Health Significance:

A national model that addresses training and the professional development of regulatory retail food safety professionals is essential to enhancing the effectiveness of the nation's retail food protection system. The model training plan and log, field training worksheets, and joint field training process presented in the CFP *Field Training Manual for Regulatory Retail Food Safety Inspection Officers (Field Training Manual)*, approved at the 2008 Biennial Meeting are only a part of a professional development continuum that is needed to ensure regulatory retail food safety professionals have the knowledge and skills to effectively conduct inspections of retail food stores, restaurants, and/or institutional foodservice facility types.

The Standard 2 training and standardization model should be viewed as a working document that will need to be updated and revised to meet the ever-changing retail food safety environment. The Conference for Food Protection provides the mechanism to:

- Maintain and update this national training model;
- Explore additional training and/or assessment needs for regulatory retail food programs; and
- Build consensus among all retail food safety stakeholders.

Recommended Solution: The Conference recommends...:

that a re-created 2012-2014 Certification of Food Safety Regulation Professionals (CFSRP) Work Group be charged with the following:

Charge 1: Collaborate with the FDA Center for Food Safety and Applied Nutrition, the FDA Division of Human Resource Development, and the Partnership for Food Protection Training and Certification Workgroup (PFP TCWG) to:

- Continue review of all initiatives: existing, new or under development; involving the training, evaluation and/or certification of food safety inspection officers. This collaborative working relationship will ensure the sharing of information so as not to create any unnecessary redundancies in the creation of work product or assignment of tasks/responsibilities.
- When completed, use the Retail Food Safety Specialist Job Task Analysis being developed under the umbrella of the PFP TCWG to review and revise the Standard 2 curriculum to identify any gaps and recommendations for change and review the time frame for completion of Steps 1 through 4 for new hires or staff newly assigned to the regulatory retail food protection program.
- Determine if the CFP Field Training Manual and forms need to be revised based on the findings of the PFP TCWG and the Retail Food Safety Specialist Job Task Analysis.

Charge 2: Collaborate with FDA, other federal agencies, and professional and industry associations to evaluate the results of the Retail Food Safety Specialist Job Task Analysis being developed under the umbrella of the PFP TCWG to:

- Assess and determine appropriate training and standardization processes/protocols for third party auditors.
- Identify any agencies/organizations/working groups currently addressing education and training standards for third party auditors conducting retail food compliance inspections.
- Provide a recommendation to the Conference as to what actions/initiatives, if any, need to be undertaken to provide a national structure for ensuring that third party auditors possess the necessary knowledge, skills, and abilities to conduct retail food program compliance inspections.

Charge 3: Work in collaboration with the FDA to:

- Revise Standard 4 Uniform Inspection Program to address comments contained in the 2012 Work Group's pilot project report.
- Assess and re-evaluate the criteria in Standard 4 to make it more "program focused" rather than focused on the individual.

Charge 4: Report back the Work Group's findings and outcomes to the 2014 Biennial Meeting of the Conference for Food Protection.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 016
Issue: 2012 II-027**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Recommendations for Promoting the Field Training Manual

Issue you would like the Conference to consider:

An evaluation of the best approaches to promoting awareness and implementation of the national training model contained in the CFP Field Training Manual and forms, Appendix B 2, Standard 2, was conducted by the CFP Certification of Food Safety Regulation Professionals Work Group. The CFSRP Work Group has identified that FDA is the most appropriate authority to promote and implement the Field Training manual and the Work Group has specific recommendations to be presented to FDA in a letter from the Conference.

Public Health Significance:

A national model that addresses training and the professional development of regulatory retail food safety professionals is essential to enhancing the effectiveness of the nation's retail food protection system. The model training plan and log, field training worksheets, and joint field training process presented in the CFP *Field Training Manual for Regulatory Retail Food Safety Inspection Officers (Field Training Manual)*, approved at the 2008 CFP Biennial Meeting are an important part of a professional development continuum that is needed to ensure regulatory retail food safety professionals have the knowledge and skills to effectively conduct inspections of retail food stores, restaurants, and/or institutional foodservice facility types.

Recommended Solution: The Conference recommends...:

that a letter be sent to the FDA recommending that the FDA actively promote implementation and use of the *Field Training Manual for Regulatory Retail Food Safety Inspection Officers (Field Training Manual)*. The following items are offered to provide assistance to the FDA in their promotional activities:

- CDC's Environmental Public Health Performance Standards toolkit, which was created in partnership with National Association of County and City Health Officials (NACCHO), was reviewed and determined to be a valuable model for promotion and implementation of the CFP Field Training Manual.

- Case studies of jurisdictions that use the CFP Field Training Manual would be a valuable resource in a toolkit provided by FDA to jurisdictions that are working to include the Field Training Manual in their program.
- Application forms for available financial incentives would be an asset in a toolkit provided by FDA as financial assistance would promote implementation of the Field Training Manual in jurisdictions that are not currently using the Manual.
- The toolkit should also include references of agencies and subject matter experts to contact for implementation questions.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 086
Issue: 2012 II-028**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

CIFOR Foodborne Illness Outbreak Response Guidelines for Industry

Issue you would like the Conference to consider:

Currently there is no national tool or guidance available directed to the retail industry to assist in preparation for, or in response to a foodborne illness outbreak.

The multi-stakeholder Council to Improve Foodborne Outbreak Response (CIFOR) was established to develop model programs and processes to facilitate the investigation and control of foodborne illness outbreaks. This model was not intended to replace existing procedural manuals found at the local, state and federal agencies but rather to improve the coordination and performance at all levels of government involved in foodborne illness outbreaks. However, the initial voluntary guidelines lacked a defined role for industry during foodborne illness outbreaks.

Recently, the CIFOR Industry Workgroup, composed of representatives from FDA, CDC, state and local health departments, industry and trade associations, completed the Foodborne Illness Response Guidelines for the Food Industry (CIFOR Guidelines for Industry) which was developed as voluntary guidance for managers of food establishments (Industry) to help outline, clarify, and explain Industry's recommended role in a foodborne illness outbreak investigation. The Guidelines provide industry with step-by-step guidance that includes preparation, detection, investigation, control, and follow-up. The Guidelines also provide key information to assist Industry in understanding what to expect when first notified of potential illnesses and provides tools to help guide industry through the investigation process.

Familiarity with the CIFOR Guidelines and Tools will aid regulators, health officials, and industry in responding to an outbreak situation. The CIFOR Guidelines and tools should be included in both the FDA Food Code and Voluntary National Retail Food Regulatory Program Standards for the regulatory community and also made widely available to food service and retail operators.

Public Health Significance:

The CIFOR protocol for investigating foodborne illnesses provides guidance and direction for the regulatory and regulated communities. During a foodborne illness outbreak, time is of the essence in order to identify the offending food product and to remove it from the

market place. To facilitate and ensure correct information is obtained in a timely fashion, a consistent approach to investigating foodborne illness outbreaks is crucial.

By using these *CIFOR Guidelines* and Tools, Industry can take an active and educated role in the outbreak response and investigation, reducing the impact to the public and their business. A fully coordinated investigation can then proceed more quickly and accurately, yielding more dependable results that are in the interest of public health while limiting impact to the involved industry.

The benefits of having a uniform approach include:

1. The *CIFOR Guidelines* are a Best Practices document.
2. Investigation training is simplified by having everyone training to the same requirements and investigation protocols.
3. Industry can be better prepared to supply critical information supporting an investigation and provide better control measures when a multijurisdictional outbreak occurs.
4. As stated in the *CIFOR Guidelines* Preface'...it (*CIFOR Guidelines*) is not intended to replace existing procedure manuals. Agencies and individuals should use the *Guidelines* to compare existing procedures, fill gaps in and update site-specific procedures, create procedures where they do not exist, and train program staff.
5. Even though every outbreak has its own path to completion, a systematic approach, as provided by CIFOR, will help ensure that a thorough and timely investigation is completed.
6. CIFOR addresses the complexity of multijurisdictional investigations and seeks to improve communication and coordination at all levels of government and industry.
7. There has been developmental buy-in to the *CIFOR Guidelines* by all the affected stakeholders (CDC, FDA, state and local health agencies as well as industry).

Recommended Solution: The Conference recommends...:

that a letter be sent to the FDA requesting the 2009 Food Code (as modified by the Supplement issued in 2011) be amended as follows:

1. Addition of the final, approved (currently in draft form per CDC) *CIFOR Guidelines* and Tools to the Food Code, Annex 2 (References), Part 3 (Supporting Documents); and
2. Inclusion of the final, approved *CIFOR Guidelines* and tools as a reference into the FDA Program Standard Number 5, *Foodborne Illness Investigation and Response*. This would be in addition to Standard 5's reference to the International Association of Food Protection's *Procedure to Investigate a Foodborne Illness*.
3. Exploration of other channels of distribution for the *CIFOR Guidelines*.

CIFOR documents will be available here: <http://www.cifor.us/>.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 103
Issue: 2012 II-029**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

CIFOR Foodborne Illness Response Guidelines for the Food Industry

Issue you would like the Conference to consider:

The Council to Improve Foodborne Outbreak Response (CIFOR) *Foodborne Illness Response Guidelines for the Food Industry* was developed as *voluntary* guidance for managers of Food Establishments ("Industry") to help outline, clarify, and explain Industry's recommended role in a foodborne illness outbreak investigation. It provides a step-by-step approach that Industry can take, including preparation, detection, investigation, control, and follow-up. The *Guideline* also describes key information to assist Industry in understanding what to expect when first notified of potential illnesses and provides Tools to help guide Industry through the process.

The Guideline and its tools provide valuable information for industry and the regulatory community in the event of a foodborne disease outbreak. It should be made widely available to stakeholders through publication as part of the FDA Food Code. Once officially adopted by CIFOR, the Guideline and tools will be available at www.cifor.us.

Public Health Significance:

By using this Guideline and Tools, Industry can take an active and educated role in the outbreak response and investigation, reducing the impact to the public and their business. A fully coordinated investigation can then move more quickly and accurately, yielding dependable results that are in the interest of public health while limiting impact to Industry.

Recommended Solution: The Conference recommends...:

that a letter be sent to the FDA requesting the 2009 Food Code:

1. following its publication, the addition of the CIFOR Foodborne Illness Response Guidelines for the Food Industry to the FDA Food Code, Annex 2 (References), Part 3 (Supporting Documents).
2. following its publication, the addition of the CIFOR Foodborne Illness Response Guidelines for the Food Industry as a reference in FDA's Voluntary National Retail Food Regulatory Program Standard #5: Foodborne Illness and Defense Preparedness and Response.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 020
Issue: 2012 II-030**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Transition of the CFP Standard to the ISO/IEC 17024 Standard

Issue you would like the Conference to consider:

The Conference should consider adopting the International Standard "ISO/IEC 17024: Conformity Assessment - General Requirements for Bodies Operating Certification of Persons" developed by the International Organization for Accreditation in lieu of the "Conference for Food Protection Standards for the Accreditation of Food Protection Manager Certification Programs" over a multi-year transition period. The Conference should task the Food Manager Certification Committee with developing a plan to transition from the Conference standard to the ISO standard.

The Conference would still maintain control over the accreditation process associated with the Conference's accreditation. The American National Standards Institute (ANSI) would evaluate applicant certification bodies against ISO/IEC 17024 and determine if the requirements have been met and would accredit the organization against the ISO standard. The Conference would still have to accept ANSI's recommendations before an organization would be deemed to be accredited by the Conference. ANSI cannot accredit a certification body for the Conference. Only the Conference can award conference accreditation unless the Conference designates ANSI to do this for them.

Attached to this issue are three files that should be reviewed. The first is the application for accreditation. This file is attached because it contains the language of the ISO/IEC 17024 standard. Because the standard is a copyrighted standard, it is not allowed to be placed in this issue for presentation to the entire conference. However the text of the standard does appear in the application so the conference may review the clauses of the standard by reviewing the application. The second file that is attached is a background paper that describes the issue in further detail. Finally the third file is a letter from the American National Standards Institute attesting to the comparability of the two standards.

Public Health Significance:

The safety of food in the United States is dependent upon Food Managers who understand and implement basic food safety concepts. The Conference has established a standard and an accreditation process against that standard to ensure that Food Manager Certification Programs attesting to the knowledge and skills of Food Managers are valid, reliable and legally defensible. Over time, this standard must be updated and maintained

by experts familiar in standards language and standards development. A volunteer pool of food experts may not have the necessary knowledge to adequately maintain the standard. The United States government (including the Department of Defense, Food and Drug Administration, and Department of Energy) have identified an international standard (ISO/IEC 17024) and accreditation against this standard by the American National Standards Institute (ANSI). They have selected ISO/IEC 17024 standard as the standard of choice for providing evidence that a personnel certification program is valid, reliable and legally defensible. ISO/IEC 17024 is maintained by an international organization, the International Organization for Standardization (ISO) on a regular basis and has world-wide acceptance. By using this standard in lieu of the Conference standard, the public can be assured that Food Manager Certification Programs are recognized against the very best standard by the very best accrediting body.

Recommended Solution: The Conference recommends...:

adoption of "ISO/IEC 17024 Conformity Assessment: General requirements for bodies operating certification of persons" to replace the "Conference for Food Protection Standard for the Accreditation of Food Protection Manager Certification Program" over a multi-year transition period. This adoption simply means a swapping of one standard (the Conference Standard) for another equivalent standard (the ISO Standard).

The Conference also recommends that the Food Protection Manager Certification Committee be tasked with:

- developing a multi-year process to gradually transition to the new ISO standard. The transition should occur in stages allowing sufficient time for all accredited certification bodies to meet the new standard and in guidance with the American National Standards Institute (ANSI).
- revising the Committee governing documents to reflect the transition of the Conference standard to the ISO standard, to reflect any additional requirements above the ISO standards that the conference would want to require for Conference Accreditation, and to reflect the conference maintaining control over the Conference accreditation process.

Submitter Information:

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Attachments:

- "ANSI Application for Accreditation (contains the 17024 standard language)"
- "Background Information for Issue"
- "ANSI Letter Stating Equivalence of ISO standard to CFP standard"

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Application for ANSI Accreditation Under ANSI/ISO/IEC 17024

INTRODUCTION TO ANSI PERSONNEL CERTIFICATION ACCREDITATION PROGRAM

Over the past decade, technology has improved the flow of information and provided the world with a tremendous financial market expansion. While this had led to the growth of a more inclusive global economy, the expansion of our world through data exchange has also provided us with challenges. Some of these challenges include the security of information over the Internet, government trade agreements being changed to accommodate the electronic transfer of knowledge, and a world wide industry skill shortage due to lack people trained in this new world of work.

These factors have forced the growth of a rapid transfer of knowledge through education and training. It is important for the consumer to know whether they are receiving a quality knowledge product. To that end, products are regulated and standardized for the protection of the public. Organizations such as ANSI, the International Organization for Standardization (ISO), and the International Electrotechnical Commission (IEC) develop standards, which protect the integrity of a product or service. Organizations apply for and obtain a stamp of approval only after going through a rigorous quality review of not only their product or service, but also their organization as a whole based on globally accepted standards.

Over the past two years, ISO/IEC committees made up of over 22 countries have been developing a standard, ISO/IEC/FDIS 17024, which addresses the general requirements for bodies operating certification schemes for persons. This standard shows how the world can exchange quality programs through the standardization of skills and knowledge, which lead to a certification of a person. ISO/IEC/FDIS 17024 requirements set the standard for all countries' personnel certification programs, through rigorous requirements using quality objectives.

Overview of Draft International Standard of ISO/IEC/FDIS 17024 Standard for bodies operating certification of persons

ISO/IEC/FDIS 17024 specifies requirements which ensure that certification bodies operating certification systems for persons operate the certification of persons in a consistent, comparable, and reliable manner. The standard is broken up into fourteen clauses. Each clause has several sub-components. The clauses are as follows:

| | |
|-----------------------------------|-------------------------------|
| Certification body | Organizational structure |
| Development and maintenance | Management system |
| Outsourcing | Records |
| Confidentiality | Personnel requirements |
| Examiners | Application |
| Evaluation | Decision on certification |
| Surveillance and re-certification | Use of certificates and logos |

Since its inception in 1918, ANSI has been creating the benchmark of excellence in U.S. voluntary standardization and conformity assessment systems. ANSI is responsible for the integrity of this audit process. Organizations applying for accreditation understand that throughout the process of compliance they will be treated according to ANSI's cornerstone principles of openness, consensus, due process, and balance.

ANSI is the sole United States representative and dues-paying member of the two major non-treaty international standards organizations, ISO and IEC. ANSI possesses the in-depth knowledge of the global standards arena and is in the unique position of creating the first personnel certification accreditation program for U.S. organizations.

By completing this application, you will have begun the first step to compliance with this international standard. In addition you will receive a quality review, tailored for your organization, using your input.



Application for ANSI Accreditation Under ANSI/ISO/IEC 17024

All application questions must be submitted in writing or via e-mail.

Applications and questions should be directed to:

American National Standards Institute (ANSI)
Attn: Dr. Roy Swift
Senior Director, Personnel Credentialing Accreditation Programs
1899 L Street, NW
11th Floor
Washington, DC 20036
Rswift@ansi.org

All applications will be the sole property of ANSI.

GENERAL INFORMATION FOR SUBMISSION

Process

To facilitate the process of review, please submit one application for each review. One application will be acceptable for a multiple scheme (certification construct/credential) review. Please review each question carefully and when appropriate, respond to questions separately for each individual scheme. Be consistent in your responses, Clause 4.3.2, Item B Scheme 1, Scheme 2 etc. Fill out the application completely. You may attach supporting documentation that further clarifies your answer. Applications must be in 11 or 12-point font size. Submit three copies of the application and supporting documentation.

Application Overview

The application is divided into two sections.

Part 1 is an organizational questionnaire.

Part 2 is a questionnaire based on the ANSI/ISO/IEC 17024 standard. This portion is divided by clauses. Attachments may be added to supplement your answer. Documentation attached may assist in several clause areas. When using an attachment to supplement an answer, note the attachment number on the question. Every attachment must have a cover sheet stating the relevant clause, responding question and where the answer/explanation can be found in the document.

| | | |
|--------|-----------------------------------|--|
| Sample | Attachment A Policy Manual | |
| | Clause 4.2.4 | Question A Reference found on Page 3, paragraphs 5-10 |
| | Clause 4.4.3 | Question C Section (b) Reference Page 20, paragraphs 1-3 |

Multiple Schemes



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Again, when submitting the application for a multiple scheme review, you will need to clarify your relative answers as individual schemes. Be consistent in your responses, Scheme 1, Scheme 2 etc.

Accreditation Assessment

After applications are received, a ten (10) day review period begins. At this time, ANSI will determine whether the material submitted is complete. If necessary, applicants may be asked to provide additional information for clarification. Requested information must be received within ninety (90) days of request. When it is determined that the application is complete, assessors will be assigned to your organization. You will be advised of the assessors' names and given five (5) days to accept or provide information relating to conflict of interest regarding the assessor(s). Assessors will be assigned to your organization from your acceptance of them until the final determination of compliance.

Accepted assessors will review your application and determine an audit plan. The audit plan will be submitted to you for review and comment. Once the plan is agreed upon, an on-site audit will ensue. Your organization will be evaluated using the attached requirements. Please review attachments for all requirements and be ready to supply applicable documentation to the assessors as requested. The length of the audit will depend on the size of the organization and programs being reviewed.

Fees

| | |
|-------------------------------|--|
| Application fee | \$3000.00 |
| On-site audit and preparation | \$1250.00 per day, each assessor, plus expenses. Includes: Review of documentation and preparation, on-site audit, oral report at end of audit, written report with commendations, opportunities for improvement, and non-conformity statements. |
| Corrective actions | <u>All non-conforming items must be corrected before organization is approved for accreditation.</u> Organizations will be given statements describing the rationale for every non-conforming item. You will discuss and determine a timeline with assessors to correct the non-conforming items. Fees associated with reviewing corrective actions are billed at \$1,250 per day or fraction thereafter. |

Annexes

- A Application Milestones
- B Documentation that may assist you in completing application
- C Declaration Statement (this must be returned with application)
- D Definitions of terminology common to ISO/IEC/DIS standards



Application for ANSI Accreditation Under ANSI/ISO/IEC 17024

APPLICATION FOR ANSI ACCREDITATION

Part 1: Applicant Information

Date:

Certification Body:

Address:

City, State, Zip:

Contact Person:

Title:

E-Mail:

Phone:

Fax:

Web Site:

1. What is the legal structure of your organization?

- Corporate Entity (Not Tax Exempt)
- Corporate Entity (Tax Exempt)
- Part of Parent Organization (includes wholly owned subsidiary)
- Other Please specify:

2. How long has your organization been in existence?

3. How long has your organization been offering personnel certification?

4. How many active certificates are in your database?

- | | | |
|-----------------------------------|--------------------------------------|---|
| <input type="checkbox"/> 50-100 | <input type="checkbox"/> 1001-3000 | <input type="checkbox"/> 10,001-50,000 |
| <input type="checkbox"/> 101-500 | <input type="checkbox"/> 3001-5000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 501-1000 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 100,001 and up |

5. How many applications are received each year?

- | | | |
|------------------------------------|--|--|
| <input type="checkbox"/> 0-500 | <input type="checkbox"/> 3001-5000 | <input type="checkbox"/> 20,001 and up |
| <input type="checkbox"/> 501-1000 | <input type="checkbox"/> 5001-10,000 | |
| <input type="checkbox"/> 1001-3000 | <input type="checkbox"/> 10,001-20,000 | |

6. How many applicants are tested each year?



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- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

7. How many tests are administered each year?

- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

8. How many applicants are certified each year?

- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

9. Is your program open to international applicants who are trained/educated outside the United States?

- Yes No

10. If yes, does your organization have any reciprocity agreements in place?

- Yes No

If yes, please explain.

11. Is your certification program necessary for personnel to obtain employment in your industry?

- Yes No

If yes, please explain why.

12. Does your organization outsource components of your personnel certification program?

- Yes No



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If yes, what is outsourced?

Questions related to certification scheme

13. List the certification schemes within the scope for which you are applying for accreditation.
Name(s)

14. How are your candidates assessed? Check all that apply:

- Written paper and pencil examination
- Oral examination
- Combination of written and oral examinations
- Performance based (directly observed)
- Portfolio (representative sample of work)
- Computer based testing
- Computer adaptive testing
- Other Please specify:

15. Where is your assessment given? Check all that apply.

- Industry setting
- Commercial Testing center
- Educational Institution
- Other Please specify:

16. How often is the examination given, if applicable?

- on demand
 - one time per year
 - two times per year
 - three times per year
 - four times per year
 - greater than four times per year
-



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Part 2: Compliance with Requirements of ANSI/ISO/IEC 17024

4 Requirements for certification bodies

4.1 Certification body

4.1.1 The policies and procedures of the certification body and their administration shall be related to the criteria in which certification is sought, shall be fair and equitable among all candidates, and shall comply with all applicable regulations and statutory requirements. The certification body shall not use procedures to impede or inhibit access by applicants and candidates, except as provided for in this International Standard.

Clause 4.1.1

Using your policies and procedures, describe how your certification body ensures fair and equitable treatment of candidates throughout all phases of your certification program.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

List laws and regulations applicable to your certification body in the certification process.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.1.2 The certification body shall define policies and procedures for granting, maintaining, renewing, expanding and reducing the scope of the desired certification, and suspending or withdrawing the certification.

Clause 4.1.2

Describe your certification body's policies and procedures for granting, maintaining, and renewing an individual's certificate.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe your certification body's policies and procedures for suspending or withdrawing an individual's certificate.

Name of supporting Document:
Attachment numbers(s):



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Page/paragraph:

Describe and cite the policies and procedures whereby your organization would expand or reduce the scope of its certification scheme(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.1.3 The certification body shall confine its requirements, evaluation and decision on certification to those matters specifically related to the scope of the desired certification.

Clause 4.1.3

Define the scope and parameters of your certification scheme(s). Provide relevant portions of your published documents.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2 Organizational structure

4.2.1 The certification body shall be structured so as to give confidence to interested parties in its competence, impartiality and integrity. In particular, the certification body:

- a) shall be independent and impartial in relation to its applicants, candidates and certified persons, including their employers and their customers, and shall take all possible steps to assure ethical operations;
- b) shall be responsible for its decisions relating to the granting, maintaining, renewing, expanding and reducing the scope, or suspending and withdrawing the certification;
- c) shall identify the management [group(s) or person(s)] which shall have overall responsibility for
 - 1) evaluation, certification and surveillance as defined in this International Standard, the applicable competence standards and other relevant documents,
 - 2) the formulation of policies relating to the operation of the certification body, with regard to certification of persons
 - 3) decisions on certification,
 - 4) the implementation of its policies and procedures,
 - 5) the finances of the certification body, and
 - 6) the delegation of authority to any committees or individuals to undertake defined activities on its behalf;
- d) shall have documents establishing it as a legal entity or part of a legal entity.



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Clause 4.2.1

Describe and provide documentation of how your certification body is independent and impartial.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe your ethics policy for staff, consultants, and volunteers.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Provide a description or chart of your organization's structure and the responsibilities of each component.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how the components of your organization relate to each other and how decisions are made.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Identify your body's management and describe their qualifications.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe the financial controls in place to ensure the independence of the certification body.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Provide documentation establishing your organization as a legal entity or part of a legal entity.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.2 The certification body shall have a documented structure which safeguards impartiality, including provisions to assure the impartiality of the operations of the certification body. This structure shall enable the participation of all parties significantly concerned in the development of policies and principles regarding the content and functioning of the certification system, without any particular interest predominating.



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Clause 4.2.2

Demonstrate how the structure provides for balancing stakeholder interests without any particular interest predominating.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how changes in the organizational structure are made and approved by the certification body. Cite any policies and procedures used to implement these changes.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.3 The certification body shall appoint a scheme committee, which shall be responsible for the development and maintenance of the certification scheme for each type of certification being considered. The scheme committee shall fairly and equitably represent the interests of all parties significantly concerned with the certification scheme, without any particular interest predominating. Where a certification scheme is developed by organizations other than the certification body, the respective developer of the scheme shall adhere to the same principles.

Clause 4.2.3

- a) Describe the structure and functions of your scheme committee and the qualifications of its members. (Refer to definition of scheme committee in ISO/IEC FDIS 17024)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe the structure and functions of other advisory bodies in relation to the scheme committee.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Describe relationships, functions, and qualifications of any technical support for the scheme committee.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.4 The certification body

- a) shall have the financial resources necessary for the operation of a certification system and to cover associated liabilities,



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b) shall have policies and procedures that distinguish between the certification of persons and any other activities, and
c) shall assure that the activities of bodies related to it do not compromise the confidentiality and impartiality of its certification.

Clause 4.2.4

- a) List and describe the sources of funds used for the operation of your certification system and associated liabilities.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Attach current and the previous three-year audited financial statements. Indicate the level of funding of all activities.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) What activities other than certification services does your certification body conduct? Explain how your certification body distinguishes these activities from certification services.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) Explain how your policies and procedures maintain confidentiality, objectivity, and impartiality of the certification with respect to your relationships with other bodies.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.5 The certification body shall not offer or provide training, or aid others in the preparation of such services, unless it demonstrates how training is independent of the evaluation and certification of persons to ensure that confidentiality and impartiality are not compromised.

Clause 4.2.5

If the certification body provides or aids others in the preparation of training services, demonstrate how training is independent of the evaluation and certification of persons to ensure that confidentiality and impartiality are not compromised.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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Describe the training and how it relates to the certification process.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.6 The certification body shall define policies and procedures (e.g. code of conduct) for the resolution of appeals and complaints received from applicants, candidates, certified persons and their employers, and other parties about the certification process and criteria, as well as policies and procedures for the performance of certified persons. These policies and procedures shall ensure that appeals and complaints are resolved independently, in an unbiased manner.

Clause 4.2.6

Describe the process for appeals and complaints. Using examples of resolved issues over the past three years, describe how the policies and procedures were applied in an unbiased manner.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Provide written policies and procedures for appeals and complaints.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Provide policies and procedures that define the performance of certified persons (e.g. codes of conduct/ethics).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.7 The certification body shall employ or contract enough people with the necessary education, training, technical knowledge and experience to perform certification functions relating to the type, range and volume of work performed, under a responsible management.

Clause 4.2.7

- a) Identify any certification functions for which your organization contracts and document how they are monitored. Show the job responsibilities and qualifications of contractors' personnel.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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- b) Identify personnel with functions related to the certification. Show their job responsibilities, qualifications, and ways of monitoring performance.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Provide justification that the number of people employed and contracted is adequate.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3 Development and maintenance of a certification scheme

4.3.1 The certification body shall define the methods and mechanisms to be used to evaluate the competence of candidates, and shall establish appropriate policies and procedures for the initial development and continued maintenance of these methods and mechanisms.

Clause 4.3.1

- a) Describe methods and mechanisms used to evaluate candidates.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe the policies and procedures for continually evaluating and updating the methods and mechanisms used to evaluate the competence of candidates.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3.2 The certification body shall define a process for the development and maintenance of certification schemes that includes the review and validation of the scheme by the scheme committee.

Clause 4.3.2

- a) Describe the development of the certification process for specific scheme(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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b) How is(are) each scheme(s) reviewed and updated as needed?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3.3 The certification body shall, where applicable, give due notice to representatives of the scheme committee of any changes in its requirements for certification. The certification body shall take into account the views expressed by the scheme committee before deciding on the precise form and effective date of the changes. Following decision on, and publication of, the changed requirements, the certification body shall, where applicable, inform the interested parties and the certified persons appropriately. The certification body shall verify that each certified person complies with the changed requirements within such a period of time as is reasonable for the certification body in consultation with the scheme committee.

Clause 4.3.3

How does the certification body notify the scheme committee of proposed changes in requirements for certification?
How does the certification body take scheme committee views into account?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

What are the policies and procedures for making a change to a scheme?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

How are stakeholders notified of a change in certification requirements?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

How does the certification body ensure compliance with the change?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3.4 The criteria against which the competence of a person is evaluated shall be those defined by the certification body in accordance with this International Standard and other relevant documents. If explanation is required as to the application of these documents to a specific certification scheme, it shall be developed by experts, endorsed by the scheme committee, and published by the certification body.

Clause 4.3.4



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What documents did your certification body use in developing the criteria against which the competency of a person is evaluated?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

How did experts in your field contribute to the development of the criteria for competence? What are the qualifications of the experts?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3.5 Certification shall not be restricted on the grounds of undue financial or other limiting conditions, such as membership of an association or group. Successful completion of an approved training course may be a requirement of a certification scheme, but recognition/approval of training courses by the certification body shall not compromise impartiality, or reduce the demands of the evaluation and certification requirements.

Clause 4.3.5

Describe the rationale upon which certification requirements are based and the data supporting the rationale. Justify fees and requirements.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how any recognition/approval of training programs relates to how certification decisions are made.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.3.6 The certification body shall evaluate the methods for examination of candidates. Examinations shall be fair, valid and reliable. Appropriate methodology and procedures (such as collecting and maintaining statistical data) shall be defined to reaffirm, at least annually, the fairness, validity, reliability and general performance of each examination and all identified deficiencies corrected.

Clause 4.3.6

Describe the procedures to evaluate the examinations. Include content reviews, psychometric analyses, cut score studies and other methodology applied to evaluate the instruments/procedures used to determine certification.

Name of supporting Document:

Attachment numbers(s):



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Describe any validity, reliability, adverse impact or other studies conducted regarding your examination(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Cite the standards that you use to develop the criteria against which you evaluate your examination processes, procedures and instrument(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.4 Management system

4.4.1 The certification body shall operate a management system which is documented and covers all the requirements of this International Standard, and ensures the effective application of these requirements.

Clause 4.4.1

Provide documentation of your management system and indicate how it ensures the effective application of the requirements of ISO/IEC/FDIS 17024. (Cite responses to other sections of this application as needed).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.4.2 The certification body shall ensure that a) a management system is established and maintained in accordance with this International Standard, and b) its management system is understood and implemented at all levels of the organization.

Clause 4.4.2

Describe how your certification body established and how it maintains its management system.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

How does your organization ensure that your management system is understood and implemented on all levels of the organization?

Name of supporting Document:

Attachment numbers(s):



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4.4.3 The certification body shall have document control and internal audit and management review systems in place, including provisions for continual improvement, corrective and preventive actions.

Clause 4.4.3

- a) Provide documentation of your document control procedures.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Provide documentation of your internal audit and management review systems, including continuous improvement processes and procedures for taking corrective and preventive action.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.5 Subcontracting

4.5.1 When a certification body decides to subcontract work related to certification (e.g. examination) to an external body or person, a properly documented agreement covering the arrangement, including confidentiality and prevention of a conflict of interest, shall be drawn up. The decision on certification shall not be subcontracted.

Clause 4.5.1

- a) Show documentation of the agreement and a detailed description of all certification-related work that is contracted to individuals and/or organizations.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Attach samples of your confidentiality and conflict of interest statements and agreements.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Provide documentation that the organization does not contract for decisions on certification.

Name of supporting Document:

Attachment numbers(s):



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4.5.2 The certification body

- a) shall take full responsibility for such subcontracted work and maintain its responsibility for granting, maintaining, renewing, expanding and reducing the scope, and suspending or withdrawing certification;
- b) shall ensure that the subcontractor is competent and complies with the applicable provisions of this International Standard and is not involved, either directly or through their employer, with training or the maintenance of the certification of persons in such a way that confidentiality and impartiality could be compromised, and
- c) shall maintain a list of its subcontractors, and assess and monitor their performance in accordance with documented procedures.

Clause 4.5.2

- a) Describe how your certification body monitors work for which it contracts. Include processes and procedures that ensure that corrective actions are taken when needed.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe how your certification body determines that its contractor(s) is(are) competent to perform their work for the organization.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Describe how your certification body ensures that its contractor(s) are not involved with the training or maintenance of the certification in such a way that confidentiality and impartiality could be compromised.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) Describe your organization assesses and monitors the work of its contractor(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.6 Records

- 4.6.1 The certification body shall maintain a record system appropriate to its particular circumstances and to comply with regulations, including a means to confirm the status of a certified person. The records shall demonstrate that the



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certification process has been effectively fulfilled, particularly with respect to application forms, evaluation reports, surveillance activities and other documents relating to granting, maintaining, renewing, expanding and reducing the scope, and suspending or withdrawing certification.

Clause 4.6.1

- a) Describe in detail your certification record system and demonstrate how it meets the requirement of the standard.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.6.2 The records shall be identified, managed and disposed of in such a way as to ensure the integrity of the process and the confidentiality of the information. The records shall be kept for an appropriate period of time to demonstrate continued confidence for at least one full certification cycle, or as required by recognition arrangements, contractual, legal or other obligations.

Clause 4.6.2

- a) Describe how your organization's certification records are managed and show how these procedures meet the requirements of the standard.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Give the rationale for how long your certification records are maintained.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.7 Confidentiality

The certification body shall, through legally enforceable commitments, keep confidential all information obtained in the process of its activities. These commitments shall cover all individuals working within the body, including committee members, and external bodies or individuals acting on its behalf. Such information shall not be disclosed to an unauthorized party without the written consent of the organization or individual from whom the information was obtained, except where the law requires such information to be disclosed. When the certification body is required by law to release such information, the organization or individual concerned shall be informed beforehand of what information will be provided.

- a) Provide your confidentiality policies and documentation of your procedures for maintaining confidentiality of all information obtained through certification activities. (Refer to responses given in other sections of this application as needed.)



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) If applicable, provide evidence of a denial for a request for information.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.8 Security

All examinations and related items shall be maintained in a secure environment by the certification body, or its subcontractors, to protect the confidentiality of these items throughout their useful life.

- a) Describe in detail the policies and procedures by which you and your contractor(s) protect the security and confidentiality of examinations and related items.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

5 Requirements for certification body personnel

5.1.1 The certification process shall define the competence requirements for employed or contracted persons involved in the certification process.

Clause 5.1.1

- a) List the personnel, including contract personnel directly involved in the certification process. Identify their qualifications for performing their assigned tasks.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) Describe and cite the process for approving the required qualifications of personnel or contractor positions/individuals.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

5.1.2 The certification body shall require its employed or contracted persons to sign a document by which they commit themselves to comply with the rules defined by the certification body, including those relating to confidentiality and those relating to independence from commercial and other interests, and from any prior and/or present link with the persons to be examined that would compromise impartiality.



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Clause 5.1.2

- a) Attach samples of confidentiality forms/agreements/declaration statements used by personnel and volunteers that declare they are committed to the certification bodies' rules. (Refer to other responses to this application as appropriate.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe and cite the policies and procedures associated with these forms.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.1.3 Clearly documented instructions shall be available to the employed or contracted persons describing their duties and responsibilities. These instructions shall be kept up to date. All personnel involved in any aspect of certification activities shall possess appropriate education, experience and technical expertise which satisfies defined competence criteria for the tasks identified. They shall be trained for their specific responsibilities and made aware of the significance of the certification offered.

Clause 5.1.3

- a) Provide descriptions of personnel (employed or contracted) duties and responsibilities. List and describe all training and orientation programs and the personnel who have attended.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.1.4 The certification body shall establish and maintain current documentation on the relevant qualification, training and experience of each individual. The information shall be accessible to the individual(s) concerned and shall include the following:

- name and address;
- organization affiliation and position held;
- education and professional status;
- experience and training in the relevant;
- their specific responsibilities and obligations within the certification body;
- performance appraisals;
- date of most recent updating of records.

Clause 5.1.4

- a) How, where, and by whom are personnel records maintained?

Name of supporting Document:



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- b) What type of information is placed in personnel files? Provide an example of any standard forms utilized for all personnel.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.2 Requirements for examiners

5.2.1 Examiners shall meet the requirements of the certification body based upon applicable competence standards and other relevant documents. The selection process shall ensure that examiners assigned to an examination or part of an examination at least

- a) are familiar with the relevant certification scheme,
- b) have a thorough knowledge of the relevant examination methods and examination documents,
- c) have appropriate competence in the field to be examined,
- d) are fluent both in writing and orally in the language of examination, and
- e) are free from any interest so that they can make impartial and non-discriminatory judgments (assessments).

Clause 5.2.1

- a) Describe and cite the selection criteria, qualifications, and responsibilities of examiners. (This would include scorers for performance/product assessment.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How are examiners selected and trained, and how is their performance monitored, evaluated, and adjusted as needed?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.2.2 If an examiner has a potential conflict of interest in the examination of a candidate, the certification body shall undertake measures to ensure that confidentiality and impartiality of the examination is not compromised (see 4.2.5). These measures shall be recorded.

Clause 5.2.2

If a trainer/instructor is(was) used in the evaluation process, present the the rationale and justification for this practice.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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Provide evidence that objectivity and impartiality is(was) maintained under these circumstances.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6 Certification process

6.1.1 The certification body shall provide on request a current detailed description of the certification process, appropriate to each certification scheme (including fees), and the documents containing the requirements for certification, the applicants' rights, and the duties of a certified person which includes a code of conduct, if applicable (see 6.6.2).

Clause 6.1.1

- a) Provide a sample of the descriptive documentation that is given to candidates.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.1.2 The certification body shall require the completion of an application, signed by the applicant seeking certification, which includes

- a) the scope of the desired certification,
- b) a statement that the person agrees to comply with the requirements for certification and to supply any information needed for the evaluation,
- c) details of relevant qualifications, confirmed and supported by evidence, and
- d) general information on the applicant, for example name, address and other information required to identify the person.

Clause 6.1.2

- a) Describe the application process. Attach a sample application.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Provide a rationale for information requested on the application.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) If an electronic signature is accepted, how is the signature verified?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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- d) What policies and procedures are in place to verify application information?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2 Evaluation

6.2.1 The certification body shall review the application to confirm that

- a) the certification body has the capability to deliver the requested certification,
- b) the certification body is aware of and can, within reason, accommodate any special needs of applicants, such as language and/or disabilities, and
- c) the applicant has the required education, experience and training specified by the scheme.

Clause 6.2.1

- a) Identify what documents are required from candidates, how applications are reviewed, and how documentation submitted and statements made by applicants are verified.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Provide documentation of your policy and procedures for determining and providing accommodations for candidates who indicate that they have special needs.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) How does the certification body address language issues indicated by applicants? (This includes exams given in foreign languages as well as disability-related language issues.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) What are the qualifications of the individuals who review applications? How is the performance of their functions monitored, evaluated, and corrected if needed?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.2 The certification body shall examine competence, based on the requirements of the scheme, by written, oral, practical, observational or other means.



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Clause 6.2.2

- a) Describe how relevant knowledge, skills, and abilities are examined in the certification process.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe studies performed to ensure that all appropriate competence criteria are objectively and systematically evaluated?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.3 Examinations shall be planned and structured in a manner which ensures that all scheme requirements are objectively and systematically verified, with sufficient documented evidence produced to confirm the competence of the candidate.

Clause 6.2.3

- a) What method(s) is(are) used to evaluate specific knowledge, skills, and abilities?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) For each scheme, provide a rationale for specific assessment mechanism(s) used.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.4 The certification body shall adopt reporting procedures that ensure the performance and results of the evaluation are documented in an appropriate and comprehensible manner, including the performance and results of examinations.

Clause 6.2.4

Describe how examination results are recorded.

Name of supporting Document:

Attachment numbers(s):

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Describe how examination results are reported and maintained.



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe any regulations or requirements for reporting results outside your organization, how you comply with them, and how you maintain confidentiality of individual results in accordance with your policies.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

6.3 Decision on certification

6.3.1 The decision on certification of a candidate shall be made solely by the certification body on the basis of the information gathered during the certification process. Those who make the certification decision shall not have participated in the examination or training of the candidate.

Clause 6.3.1

- a) Describe the process by which certification decisions are reached.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) What body makes the decision on certification?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- c) Describe the policies and procedures in place to prevent an error regarding the decision of certification of a candidate.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

6.3.2 The certification body shall provide a certificate to all certified persons. The certification body shall maintain sole ownership of the certificates. The certificate may take the form of a letter, card or other medium, signed or authorized by a responsible officer of the certification body.

Clause 6.3.2 (See Clause 6.3.3 for requirements)



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Provide a model of the certificate, letter, card, or other medium issued to all successful candidates notifying them of their certification.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how your certification body protects the integrity of its certification from unauthorized use.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.3.3 These certificates shall contain, as a minimum, the following information:

- a) the name of the certified person and a unique certification number;
- b) the name of the certification body;
- c) a reference to the competence standard or other relevant documents, including issue, on which the certification is based;
- d) the scope of the certification, including validity conditions and limitations;
- e) the effective date of certification and date of expiry.

Clause 6.3.3 (See 6.3.2)

6.4 Surveillance and recertification procedure

6.4.1 The certification body shall define a pro-active surveillance process to monitor certificants' compliance with relevant provisions of the certification scheme.

Clause 6.4.1

- a) Describe the surveillance methods used to monitor certificate holders.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How is it determined that certificate holders are compliant with current certification requirements?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.4.2 The certification body shall have procedures and conditions for the maintenance of certification in accordance with the certification scheme. These conditions, including the frequency and content of surveillance activities, shall be endorsed



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by the scheme committee. The conditions shall be adequate to ensure that there is impartial evaluation to confirm the continuing competence of the certified person.

Clause 6.4.2

- a) How often does the committee charged with surveillance review their procedures?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) What surveillance techniques are used to ensure impartiality in the evaluation of certified persons?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.5 Recertification

6.5.1 The certification body shall define recertification requirements according to the competence standard and other relevant documents, to ensure that the certified person continues to comply with the current certification requirements.

6.5.2 The certification body shall have procedures and conditions for the maintenance of certification in accordance with the certification scheme. These conditions, including the frequency and content of recertification activities, shall be endorsed by the scheme committee. The conditions shall be adequate to ensure that there is impartial evaluation to confirm the continuing competence of the certified person.

Clauses 6.5.1 and 6.5.2

- a) Describe recertification requirements.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe the recertification program and how it is implemented. Include documentation of how there is impartial evaluation to confirm the continuing competence of the certificant.

Name of supporting Document:

Attachment numbers(s):

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6.6 Use of certificates and logos/marks



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6.6.1 A certification body that provides a certification mark or logo shall document the conditions for use and shall appropriately manage the rights for usage and representation.

Clause 6.6.1

- a) Describe the use of the certification mark. Attach the certification mark and describe its use.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How is the certification mark protected from misuse?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.6.2 The certification body shall require that a certified person sign an agreement

- a) to comply with the relevant provisions of the certification scheme,
b) to make claims regarding certification only with respect to the scope for which certification has been granted,
c) not to use the certification in such a manner as to bring the certification body into disrepute, and not to make any statement regarding the certification which the certification body may consider misleading or unauthorized,
d) to discontinue the use of all claims to certification that contains any reference to the certification body or certification upon suspension or withdrawal of certification, and to return any certificates issued by the certification body, and
e) not to use the certificate in a misleading manner.

Clause 6.6.2

- a) Provide a copy of the agreement that includes all of the elements in clause 6.5.2.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.6.3 Inappropriate references to the certification or misleading use of certificates and marks or logos in publications, catalogues, etc. shall be addressed with corrective measures, such as the suspension or withdrawal of certification, publication of the infraction and, if appropriate, additional legal action.

Clause 6.6.3

Describe how any inappropriate references to certification and its corresponding marks have been addressed.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



Application for ANSI Accreditation Under ANSI/ISO/IEC 17024

Annex A: Personnel Certification Accreditation — Application Milestones

| Application | Date |
|--|-------------|
| <input type="checkbox"/> Received application materials | _____ |
| <input type="checkbox"/> Reviewed materials, if necessary send questions to ANSI | _____ |
| <input type="checkbox"/> Sent in application and fee | _____ |
| <input type="checkbox"/> Received acknowledgement from ANSI | _____ |
| <i>Ten-day review period begins.</i> | |
| <input type="checkbox"/> Received assessor names | _____ |
| <input type="checkbox"/> Sent back response card accepting/declining assessor(s) | _____ |
| <i>Once assessors are approved by organization, they will conduct a paper review of application.</i> | |
| <input type="checkbox"/> Quality evaluations complete | _____ |
| <input type="checkbox"/> Information requested, (90) days to resubmit without further fees | _____ |
| <input type="checkbox"/> 90 day deadline | _____ |
| <input type="checkbox"/> Audit plan determined by assessors, sent to organization for approval and discussion. | _____ |
| <input type="checkbox"/> Audit plan accepted. | _____ |
| On-site Audit | |
| <input type="checkbox"/> Assessors arrive | _____ |
| <input type="checkbox"/> Audit conducted | _____ |
| <input type="checkbox"/> Oral and summary report received | _____ |
| <input type="checkbox"/> Written report received | _____ |
| Non-conforming item(s) | |
| <input type="checkbox"/> Plan drawn up with assessors for correction | _____ |
| <input type="checkbox"/> Corrective actions approved | _____ |
| <input type="checkbox"/> All non-conformities corrective actions approved | _____ |
| <input type="checkbox"/> Corrective actions taken and sent in for review | _____ |
| <input type="checkbox"/> Acknowledgment received | _____ |



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Non-conformities accepted as corrected

OR

Further corrective action required

Accreditation awarded



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Annex B: List of possible documents to assist you in filling out application materials

1. Accommodations Policy & Procedures
2. Annual Report
3. Audits
4. Board Minutes
5. Bylaws
6. Candidate Handbook
7. Certification Handbook
8. Committee Minutes
9. Confidentiality Agreements
10. Contracts
11. Disclaimer Statement
12. Ethics Policy
13. Financial Statements and Audits
14. Insurance
15. Job Descriptions
16. Job/practice Analysis
17. Management Manual
18. Mission Statement
19. Personnel



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Attachment C: Declaration Statement

Applicant agrees to meet the following conditions:

1. Applicant shall provide ANSI with all information requested for the process of assessing competency of a personnel certification body;
2. Applicant agrees to pay all fees charged for assessment of competence; including all subsequent fees once competence is recognized;
3. Applicant is familiar with the requirements for assessment of competency for personnel certification bodies;
4. The certification body can demonstrate it:
 - Is an independent third-party as a certifier of services provided to individuals;
 - Is a legal entity or part of a legal entity; and
 - Has a clearly defined scope of certification.

ANSI requires each applicant to adhere to the following:

- a) make all necessary arrangements for the conduct of assessments, including provisions for examining documentation, and access to records (including internal assessment reports) and personnel for the purpose of surveillance, re-assessment and resolution of complaints;
- b) make claims only regarding activities defined in the scope of the accreditation granted;
- c) not use the accreditation in such a manner as to bring the Personnel Certification Accreditation Program into disrepute and not make any statement regarding the accreditation which Personnel Certification Accreditation Program may consider misleading or unauthorized;
- d) upon withdrawal of the Personnel Certification Accreditation Program accreditation, discontinue use of all advertising material which references the Personnel Certification Accreditation Program accreditation and return all accreditation documents including the certificate to ANSI;
- e) not allow the Personnel Certification Accreditation Program accreditation to imply that a person's competencies are approved by the Personnel Certification Accreditation Program;
- f) ensure that no Personnel Certification Accreditation Program document, logo, or report nor any part thereof is used in a misleading manner; and
- g) comply with Personnel Certification Accreditation Program requirements when referencing the status of Personnel Certification Accreditation Program accreditation in communication media such as documents, brochures, or advertising.

I accept the conditions aforementioned and attach said completed application for accreditation review by the American National Standards Institute.

Please sign below.

Name

Approving Authority Title

Date



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Attachment D: Terms and Definitions

Certification Scheme: Certification scheme (body of knowledge) relating to a specific certification of an occupation, specialty, role, or skill.

Certification System: Management system for carrying out certification process.

Examiner: An individual who actually evaluates a candidate or the candidate's performance or product (not a proctor.)

Internal Audit: An evaluation conducted by an individual within the organization.

Surveillance: Surveillance is a process by which certificants are monitored to determine whether the certification body should initiate any action to suspend or revoke the certification.

Acronyms

ANSI American National Standards Institute

ISO International Organization for Standardization

IEC International Electrotechnical Commission

ANSI/ISO/IEC 17024:2003, General requirements for bodies operating certification of persons. This international standard specifies requirements which ensure that certification bodies operating certification schemes for persons operate in a consistent, comparable, and reliable manner.¹

PCAC Personnel Certification Accreditation Committee

¹ ANSI/ISO/IEC 17024, page v

Attachment A – Issue Background

When the Conference for Food Protection (CFP) adopted the CFP Standards for the Accreditation of Food Protection Manager Certification Programs, there were no suitable existing standards in place. The Conference explored other standards available at the time including the National Commission for Certifying Agencies (NCCAs) Standards for the Accreditation of Certification Programs but found none of them to be acceptable for use by the Conference. Therefore, the Conference developed its own standard.

Once a standard has been developed, it must be maintained on an ongoing basis. This requires a dedicated group of individuals and standards experts who not only understand the history of the standard in question, but also the standards development and maintenance process. The Food Manager Certification Committee has admirably stepped up to maintain the standard but with a limited number of committee participants experienced in standards development and/or a good understanding of the history of the standard, the conference would be better served by the use of a professional and world-wide accepted standard developed and maintained by an international standards organization.

Since the Conference developed its standard, an International Standard developed by the International Organization for Standardization (ISO) has been developed. This standard, ISO/IEC 17024 – Conformity Assessment: General Requirements for Bodies Operating Certification of Persons, has the power of a worldwide accepted standards development organization (ISO) behind it. Additionally, because it is an international standard, it has worldwide acceptance. Organizations such as the Global Food Safety Initiative (GFSI) are referencing this standard as a normative document in the development of their own standards for the competence of auditors.

ISO/IEC 17024 is not only maintained by an international group of standard experts and adopted by governments in countries all over the world, it is even being adopted by U.S. governmental agencies. The Food and Drug Administration (FDA), Office of Regulatory Affairs (ORA), Department of Human Resource Development (DHRD) is currently developing training and professional certification for a range of occupational positions. FDA has contracted for the development of personnel certification programs that will meet or exceed the requirements of ISO/IEC 17024 and that will be accreditable by the American National Standards Institute (ANSI) against ISO/IEC 17024. Additionally, other U.S. Governmental agencies (Department of Defense, Department of Labor, and Department of Energy) have officially recognized ANSI and ISO/IEC 17024 as the one accrediting body and personnel certification standard, by which it judges the quality and validity of all personnel certification programs.

ISO/IEC 17024 is sufficiently similar to the CFP Standards for accreditation of food protection manager programs in content, to substitute one for the other. Organizations meeting the CFP standard would have little difficulty meeting the ISO/IEC 17024 standard. And personnel certification organizations accredited against the ISO/IEC 17024 standard would not only find their programs accepted in the United States, but would potentially find them accepted world-wide. These programs would have the ability to join the Multi-Lateral Agreement (MLA) being developed by the International Accreditation Forum (IAF) for mutual recognition by Accrediting Bodies in all countries party to the MLA. For example, a Food Protection Manager accredited by ANSI against ISO/IEC 17024, could find acceptance in the United Kingdom by the ANSI partner in the United Kingdom, the United Kingdom Accreditation Service (UKAS).

World-wide acceptance is going to become the requirement of the future. U.S. only based accreditation will eventually be phased out as governments work towards the transportability of foods, supplies and people. More and more governments, including the U.S. Government are going to work towards international standards and international accreditation against those standards.

Adoption of ISO/IEC 17024 in lieu of the CFP standard will turn maintenance of the standard over to a professional standards organization and will allow the conference to concentrate on issues within its expertise. It will also move the conference towards a world-accepted standard and the use of a standard that the United States government is already in the process of adopting. End users of manager certification (managers, regulators, employers, the public) can all be confident that the world's best standard for personnel certification programs is being applied and the world's best accrediting body (ANSI) is accrediting those certification programs against that standard.

ANSI serves as the accrediting body for both standards. The transition of accreditation from the CFP standard to the ISO standard could be accomplished very easily due to the fact that ANSI is the accreditor of both standards. The Conference would maintain control by specifying the conditions under which the ISO standard would be accepted in lieu of the CFP standard. The conference would always have the right to revert back to its own standard at some future point should it determine the ISO standard is no longer in the best interest of the food industry.

Because only one of the providers has been accredited by ANSI against both requirements, this submitter is aware that a generous timeline should be adopted to allow all interested organizations to become accredited by ANSI against ISO/IEC 17024. Therefore, the Conference Food Manager Certification Committee should be tasked with developing a transition plan that slowly transitions from the CFP standard to the ISO standard.

One suggestion is to offer a 6 year transition plan similar to what is described below:

Immediately – CFP recognizes ISO/IEC 17024 as equivalent to the CFP Standard for Accreditation of Food Protection Manager Certification Programs. Thus Certification Bodies accredited by ANSI against ISO/IEC 17024 are immediately granted accreditation by ANSI against the CFP standard without undergoing a separate and additional accreditation audit.

Years 1-2 – ANSI continues to accredit Certification Bodies to the CFP standard and the conference continues to maintain the standard. ANSI conducts workshops to interested CFP accredited certification bodies and other interested parties on the similarities of the two standards and any additional requirements that might need to be met to become accredited under ISO/IEC 17024. ANSI begins accrediting Certification Bodies against ISO/IEC 17024. Those Certification Bodies accredited, are immediately deemed to meet CFP and no longer need to submit separate application for CFP accreditation.

Years 2-4 – Food Protection Manager Certification Bodies apply for and achieve accreditation by ANSI against ISO/IEC 17024. ANSI continues to maintain both programs.

Year 5-6 – ANSI phases out accreditation against the CFP standard. Any Certification Body not accredited by ANSI against ISO/IEC 17024 will cease to be accredited by ANSI at the end of the term of their accreditation.



January 24, 2012

To Whom It May Concern:

I have been requested by Dr. Cynthia Woodley to make a statement about the comparability of the Conference for Food Protection: Standards for Accreditation of Food Protection Manager Certification Programs and ANSI/ISO/IEC 17024 Conformity Assessment – General requirements for bodies operating certification of persons.

As the purveyor of accreditation service for both standards, our professional staff believe the Standards are similar and ANSI/ISO/IEC 17024 is equal or higher than the CFP Standards for Accreditation of Food Protection Manager Certification Program.

Lane Hallenbeck
Vice President
Accreditation Services

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 087
Issue: 2012 II-031**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Adoption of ISO/IEC 17024 Standard for Personnel Certification Programs

Issue you would like the Conference to consider:

The Conference should consider adopting ISO/IEC 17024 - Conformity Assessment: General Requirements for Bodies Operating Certification of Persons as a Standard that is equivalent to the Conference for Food Protection Standard for Accreditation of Food Protection Manager Certification Program.

The American National Standard has deemed the two standards to be equivalent. Based on the equivalence of the standards, the Conference should consider accepting Certification Organizations who are accredited to ISO/IEC 17024 by the American National Standards Institute as also meeting the Conference's Standard.

Attached to this issue are three files that should be reviewed in consideration of this issue. The first is the application for accreditation. This file is attached because it contains the language of the ISO/IEC 17024 standard. Because the standard is a copyrighted standard, it is not allowed to be placed in this issue for presentation to the entire conference. However the text of the standard does appear in the application so the conference may review the clauses of the standard by reviewing the application. The second file that is attached is a letter from the American National Standards Institute attesting to the comparability of the two standards. The third file attached is the language from the introduction of ISO/IEC 17024 that describes the purpose of the standard to illustrate that the standard has the same purpose as the Conference's standard (a standard of best practice for certification programs).

Public Health Significance:

The safety of food in the United States is dependent upon Food Managers who understand and implement basic food safety concepts. The Conference has established a standard and an accreditation process against that standard to ensure that Food Manager Certification Programs attesting to the knowledge and skills of Food Managers are valid, reliable and legally defensible. When the Conference standard was developed, no equivalent standard was available for use by the Conference. Since that time, the International Organization for Standardization (ISO) has developed a standard that is not only equivalent, but is of higher quality than the Conference standard. This standard is ISO/IEC 17024 - Conformity Assessment - General Requirements for bodies operating

certification of persons and certification bodies are accredited by the American National Standards Institute (ANSI) against this standard. Certification Organizations seeking accreditation by ANSI against ISO/IEC 17024 must also submit for accreditation by ANSI against the Conference Standard. This results in a duplication of effort. ANSI must send out auditors to audit the same Certification Organization Food Manager program against two similar standards and the Certification Organization must pay twice. This results in an increase cost to the industry. If costs to verify the knowledge of Food Managers increase, the risk to the public is that Food Managers will not seek certification.

Recommended Solution: The Conference recommends...:

adoption of ISO/IEC 17024 "Conformity Assessment: General Requirements for Bodies Operating Certification of Persons" as an equivalent standard to the "Conference for Food Protection Standard for the Accreditation of Food Protection Manager Certification Program" and grant immediate reciprocal accreditation acceptance of a certification organization accredited by the American National Standards Institute (ANSI) against ISO/IEC 17024 as meeting the Conference standard. Thus an organization achieving accreditation by ANSI against ISO/IEC 17024 would also simultaneously receive accreditation against the Conference Standard.

Submitter Information:

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Attachments:

- "ANSI Application for Accreditation (contains 17024 language)"
- "ANSI Letter Stating Equivalence of the ISO Standard to the CFP Standard"
- "Introduction to ISO/IEC 17024 Which describes the Purpose of the Standard"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.



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INTRODUCTION TO ANSI PERSONNEL CERTIFICATION ACCREDITATION PROGRAM

Over the past decade, technology has improved the flow of information and provided the world with a tremendous financial market expansion. While this had led to the growth of a more inclusive global economy, the expansion of our world through data exchange has also provided us with challenges. Some of these challenges include the security of information over the Internet, government trade agreements being changed to accommodate the electronic transfer of knowledge, and a world wide industry skill shortage due to lack people trained in this new world of work.

These factors have forced the growth of a rapid transfer of knowledge through education and training. It is important for the consumer to know whether they are receiving a quality knowledge product. To that end, products are regulated and standardized for the protection of the public. Organizations such as ANSI, the International Organization for Standardization (ISO), and the International Electrotechnical Commission (IEC) develop standards, which protect the integrity of a product or service. Organizations apply for and obtain a stamp of approval only after going through a rigorous quality review of not only their product or service, but also their organization as a whole based on globally accepted standards.

Over the past two years, ISO/IEC committees made up of over 22 countries have been developing a standard, ISO/IEC/FDIS 17024, which addresses the general requirements for bodies operating certification schemes for persons. This standard shows how the world can exchange quality programs through the standardization of skills and knowledge, which lead to a certification of a person. ISO/IEC/FDIS 17024 requirements set the standard for all countries' personnel certification programs, through rigorous requirements using quality objectives.

Overview of Draft International Standard of ISO/IEC/FDIS 17024 Standard for bodies operating certification of persons

ISO/IEC/FDIS 17024 specifies requirements which ensure that certification bodies operating certification systems for persons operate the certification of persons in a consistent, comparable, and reliable manner. The standard is broken up into fourteen clauses. Each clause has several sub-components. The clauses are as follows:

| | |
|-----------------------------------|-------------------------------|
| Certification body | Organizational structure |
| Development and maintenance | Management system |
| Outsourcing | Records |
| Confidentiality | Personnel requirements |
| Examiners | Application |
| Evaluation | Decision on certification |
| Surveillance and re-certification | Use of certificates and logos |

Since its inception in 1918, ANSI has been creating the benchmark of excellence in U.S. voluntary standardization and conformity assessment systems. ANSI is responsible for the integrity of this audit process. Organizations applying for accreditation understand that throughout the process of compliance they will be treated according to ANSI's cornerstone principles of openness, consensus, due process, and balance.

ANSI is the sole United States representative and dues-paying member of the two major non-treaty international standards organizations, ISO and IEC. ANSI possesses the in-depth knowledge of the global standards arena and is in the unique position of creating the first personnel certification accreditation program for U.S. organizations.

By completing this application, you will have begun the first step to compliance with this international standard. In addition you will receive a quality review, tailored for your organization, using your input.



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All application questions must be submitted in writing or via e-mail.

Applications and questions should be directed to:

American National Standards Institute (ANSI)
Attn: Dr. Roy Swift
Senior Director, Personnel Credentialing Accreditation Programs
1899 L Street, NW
11th Floor
Washington, DC 20036
Rswift@ansi.org

All applications will be the sole property of ANSI.

GENERAL INFORMATION FOR SUBMISSION

Process

To facilitate the process of review, please submit one application for each review. One application will be acceptable for a multiple scheme (certification construct/credential) review. Please review each question carefully and when appropriate, respond to questions separately for each individual scheme. Be consistent in your responses, Clause 4.3.2, Item B Scheme 1, Scheme 2 etc. Fill out the application completely. You may attach supporting documentation that further clarifies your answer. Applications must be in 11 or 12-point font size. Submit three copies of the application and supporting documentation.

Application Overview

The application is divided into two sections.

Part 1 is an organizational questionnaire.

Part 2 is a questionnaire based on the ANSI/ISO/IEC 17024 standard. This portion is divided by clauses. Attachments may be added to supplement your answer. Documentation attached may assist in several clause areas. When using an attachment to supplement an answer, note the attachment number on the question. Every attachment must have a cover sheet stating the relevant clause, responding question and where the answer/explanation can be found in the document.

| Sample | Attachment A | Policy Manual | |
|--------|--------------|---------------|---|
| | Clause 4.2.4 | Question A | Reference found on Page 3, paragraphs 5-10 |
| | Clause 4.4.3 | Question C | Section (b) Reference Page 20, paragraphs 1-3 |

Multiple Schemes

Again, when submitting the application for a multiple scheme review, you will need to clarify your relative answers as individual schemes. Be consistent in your responses, Scheme 1, Scheme 2 etc.



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Accreditation Assessment

After applications are received, a ten (10) day review period begins. At this time, ANSI will determine whether the material submitted is complete. If necessary, applicants may be asked to provide additional information for clarification. Requested information must be received within ninety (90) days of request. When it is determined that the application is complete, assessors will be assigned to your organization. You will be advised of the assessors' names and given five (5) days to accept or provide information relating to conflict of interest regarding the assessor(s). Assessors will be assigned to your organization from your acceptance of them until the final determination of compliance.

Accepted assessors will review your application and determine an audit plan. The audit plan will be submitted to you for review and comment. Once the plan is agreed upon, an on-site audit will ensue. Your organization will be evaluated using the attached requirements. Please review attachments for all requirements and be ready to supply applicable documentation to the assessors as requested. The length of the audit will depend on the size of the organization and programs being reviewed.

Fees

| | |
|-------------------------------|--|
| Application fee | \$3000.00 |
| On-site audit and preparation | \$1250.00 per day, each assessor, plus expenses. Includes: Review of documentation and preparation, on-site audit, oral report at end of audit, written report with commendations, opportunities for improvement, and non-conformity statements. |
| Corrective actions | <u>All non-conforming items must be corrected before organization is approved for accreditation.</u> Organizations will be given statements describing the rationale for every non-conforming item. You will discuss and determine a timeline with assessors to correct the non-conforming items. Fees associated with reviewing corrective actions are billed at \$1,250 per day or fraction thereafter. |

Annexes

- A Application Milestones
- B Documentation that may assist you in completing application
- C Declaration Statement (this must be returned with application)
- D Definitions of terminology common to ISO/IEC/DIS standards



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APPLICATION FOR ANSI ACCREDITATION

Part 1: Applicant Information

Date:

Certification Body:

Address:

City, State, Zip:

Contact Person:

Title:

E-Mail:

Phone:

Fax:

Web Site:

1. What is the legal structure of your organization?

- Corporate Entity (Not Tax Exempt)
 Corporate Entity (Tax Exempt)
 Part of Parent Organization (includes wholly owned subsidiary)
 Other Please specify:

2. How long has your organization been in existence?

3. How long has your organization been offering personnel certification?

4. How many active certificates are in your database?

- | | | |
|-----------------------------------|--------------------------------------|---|
| <input type="checkbox"/> 50-100 | <input type="checkbox"/> 1001-3000 | <input type="checkbox"/> 10,001-50,000 |
| <input type="checkbox"/> 101-500 | <input type="checkbox"/> 3001-5000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 501-1000 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 100,001 and up |

5. How many applications are received each year?

- | | | |
|------------------------------------|--|--|
| <input type="checkbox"/> 0-500 | <input type="checkbox"/> 3001-5000 | <input type="checkbox"/> 20,001 and up |
| <input type="checkbox"/> 501-1000 | <input type="checkbox"/> 5001-10,000 | |
| <input type="checkbox"/> 1001-3000 | <input type="checkbox"/> 10,001-20,000 | |

6. How many applicants are tested each year?



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- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

7. How many tests are administered each year?

- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

8. How many applicants are certified each year?

- 0-500
- 501-1000
- 1001-3000
- 3001-5000
- 5001-10,000
- 10,001-20,000
- 20,001 and up

9. Is your program open to international applicants who are trained/educated outside the United States?

- Yes No

10. If yes, does your organization have any reciprocity agreements in place?

- Yes No

If yes, please explain.

11. Is your certification program necessary for personnel to obtain employment in your industry?

- Yes No

If yes, please explain why.

12. Does your organization outsource components of your personnel certification program?

- Yes No

If yes, what is outsourced?



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Questions related to certification scheme

13. List the certification schemes within the scope for which you are applying for accreditation.
Name(s)

14. How are your candidates assessed? Check all that apply:

- Written paper and pencil examination
- Oral examination
- Combination of written and oral examinations
- Performance based (directly observed)
- Portfolio (representative sample of work)
- Computer based testing
- Computer adaptive testing
- Other Please specify:

15. Where is your assessment given? Check all that apply.

- Industry setting
- Commercial Testing center
- Educational Institution
- Other Please specify:

16. How often is the examination given, if applicable?

- on demand
- one time per year
- two times per year
- three times per year
- four times per year
- greater than four times per year



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Part 2: Compliance with Requirements of ANSI/ISO/IEC 17024

4 Requirements for certification bodies

4.1 Certification body

4.1.1 The policies and procedures of the certification body and their administration shall be related to the criteria in which certification is sought, shall be fair and equitable among all candidates, and shall comply with all applicable regulations and statutory requirements. The certification body shall not use procedures to impede or inhibit access by applicants and candidates, except as provided for in this International Standard.

Clause 4.1.1

Using your policies and procedures, describe how your certification body ensures fair and equitable treatment of candidates throughout all phases of your certification program.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

List laws and regulations applicable to your certification body in the certification process.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.1.2 The certification body shall define policies and procedures for granting, maintaining, renewing, expanding and reducing the scope of the desired certification, and suspending or withdrawing the certification.

Clause 4.1.2

Describe your certification body's policies and procedures for granting, maintaining, and renewing an individual's certificate.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe your certification body's policies and procedures for suspending or withdrawing an individual's certificate.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:



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Describe and cite the policies and procedures whereby your organization would expand or reduce the scope of its certification scheme(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.1.3 The certification body shall confine its requirements, evaluation and decision on certification to those matters specifically related to the scope of the desired certification.

Clause 4.1.3

Define the scope and parameters of your certification scheme(s). Provide relevant portions of your published documents.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2 Organizational structure

4.2.1 The certification body shall be structured so as to give confidence to interested parties in its competence, impartiality and integrity. In particular, the certification body:

a) shall be independent and impartial in relation to its applicants, candidates and certified persons, including their employers and their customers, and shall take all possible steps to assure ethical operations;

b) shall be responsible for its decisions relating to the granting, maintaining, renewing, expanding and reducing the scope, or suspending and withdrawing the certification;

c) shall identify the management [group(s) or person(s)] which shall have overall responsibility for

1) evaluation, certification and surveillance as defined in this International Standard, the applicable competence standards and other relevant documents,

2) the formulation of policies relating to the operation of the certification body, with regard to certification of persons

3) decisions on certification,

4) the implementation of its policies and procedures,

5) the finances of the certification body, and

6) the delegation of authority to any committees or individuals to undertake defined activities on its behalf;

d) shall have documents establishing it as a legal entity or part of a legal entity.

Clause 4.2.1

Describe and provide documentation of how your certification body is independent and impartial.



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe your ethics policy for staff, consultants, and volunteers.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Provide a description or chart of your organization's structure and the responsibilities of each component.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe how the components of your organization relate to each other and how decisions are made.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Identify your body's management and describe their qualifications.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe the financial controls in place to ensure the independence of the certification body.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Provide documentation establishing your organization as a legal entity or part of a legal entity.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.2.2 The certification body shall have a documented structure which safeguards impartiality, including provisions to assure the impartiality of the operations of the certification body. This structure shall enable the participation of all parties significantly concerned in the development of policies and principles regarding the content and functioning of the certification system, without any particular interest predominating.

Clause 4.2.2



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Demonstrate how the structure provides for balancing stakeholder interests without any particular interest predominating.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how changes in the organizational structure are made and approved by the certification body. Cite any policies and procedures used to implement these changes.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.3 The certification body shall appoint a scheme committee, which shall be responsible for the development and maintenance of the certification scheme for each type of certification being considered. The scheme committee shall fairly and equitably represent the interests of all parties significantly concerned with the certification scheme, without any particular interest predominating. Where a certification scheme is developed by organizations other than the certification body, the respective developer of the scheme shall adhere to the same principles.

Clause 4.2.3

- a) Describe the structure and functions of your scheme committee and the qualifications of its members. (Refer to definition of scheme committee in ISO/IEC FDIS 17024)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe the structure and functions of other advisory bodies in relation to the scheme committee.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Describe relationships, functions, and qualifications of any technical support for the scheme committee.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.4 The certification body

- a) shall have the financial resources necessary for the operation of a certification system and to cover associated liabilities, b) shall have policies and procedures that distinguish between the certification of persons and any other activities, and c) shall assure that the activities of bodies related to it do not compromise the confidentiality and impartiality of its certification.



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Clause 4.2.4

- a) List and describe the sources of funds used for the operation of your certification system and associated liabilities.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Attach current and the previous three-year audited financial statements. Indicate the level of funding of all activities.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) What activities other than certification services does your certification body conduct? Explain how your certification body distinguishes these activities from certification services.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) Explain how your policies and procedures maintain confidentiality, objectivity, and impartiality of the certification with respect to your relationships with other bodies.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.5 The certification body shall not offer or provide training, or aid others in the preparation of such services, unless it demonstrates how training is independent of the evaluation and certification of persons to ensure that confidentiality and impartiality are not compromised.

Clause 4.2.5

If the certification body provides or aids others in the preparation of training services, demonstrate how training is independent of the evaluation and certification of persons to ensure that confidentiality and impartiality are not compromised.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe the training and how it relates to the certification process.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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4.2.6 The certification body shall define policies and procedures (e.g. code of conduct) for the resolution of appeals and complaints received from applicants, candidates, certified persons and their employers, and other parties about the certification process and criteria, as well as policies and procedures for the performance of certified persons. These policies and procedures shall ensure that appeals and complaints are resolved independently, in an unbiased manner.

Clause 4.2.6

Describe the process for appeals and complaints. Using examples of resolved issues over the past three years, describe how the policies and procedures were applied in an unbiased manner.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Provide written policies and procedures for appeals and complaints.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Provide policies and procedures that define the performance of certified persons (e.g. codes of conduct/ethics).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.2.7 The certification body shall employ or contract enough people with the necessary education, training, technical knowledge and experience to perform certification functions relating to the type, range and volume of work performed, under a responsible management.

Clause 4.2.7

- a) Identify any certification functions for which your organization contracts and document how they are monitored. Show the job responsibilities and qualifications of contractors' personnel.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Identify personnel with functions related to the certification. Show their job responsibilities, qualifications, and ways of monitoring performance.

Name of supporting Document:

Attachment numbers(s):

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- c) Provide justification that the number of people employed and contracted is adequate.



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3 Development and maintenance of a certification scheme

4.3.1 The certification body shall define the methods and mechanisms to be used to evaluate the competence of candidates, and shall establish appropriate policies and procedures for the initial development and continued maintenance of these methods and mechanisms.

Clause 4.3.1

- a) Describe methods and mechanisms used to evaluate candidates.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) Describe the policies and procedures for continually evaluating and updating the methods and mechanisms used to evaluate the competence of candidates.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3.2 The certification body shall define a process for the development and maintenance of certification schemes that includes the review and validation of the scheme by the scheme committee.

Clause 4.3.2

- a) Describe the development of the certification process for specific scheme(s).

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) How is(are) each scheme(s) reviewed and updated as needed?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3.3 The certification body shall, where applicable, give due notice to representatives of the scheme committee of any changes in its requirements for certification. The certification body shall take into account the views expressed by the scheme committee before deciding on the precise form and effective date of the changes. Following decision on, and



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publication of, the changed requirements, the certification body shall, where applicable, inform the interested parties and the certified persons appropriately. The certification body shall verify that each certified person complies with the changed requirements within such a period of time as is reasonable for the certification body in consultation with the scheme committee.

Clause 4.3.3

How does the certification body notify the scheme committee of proposed changes in requirements for certification?
How does the certification body take scheme committee views into account?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

What are the policies and procedures for making a change to a scheme?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

How are stakeholders notified of a change in certification requirements?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

How does the certification body ensure compliance with the change?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3.4 The criteria against which the competence of a person is evaluated shall be those defined by the certification body in accordance with this International Standard and other relevant documents. If explanation is required as to the application of these documents to a specific certification scheme, it shall be developed by experts, endorsed by the scheme committee, and published by the certification body.

Clause 4.3.4

What documents did your certification body use in developing the criteria against which the competency of a person is evaluated?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

How did experts in your field contribute to the development of the criteria for competence? What are the qualifications of the experts?



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3.5 Certification shall not be restricted on the grounds of undue financial or other limiting conditions, such as membership of an association or group. Successful completion of an approved training course may be a requirement of a certification scheme, but recognition/approval of training courses by the certification body shall not compromise impartiality, or reduce the demands of the evaluation and certification requirements.

Clause 4.3.5

Describe the rationale upon which certification requirements are based and the data supporting the rationale. Justify fees and requirements.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe how any recognition/approval of training programs relates to how certification decisions are made.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.3.6 The certification body shall evaluate the methods for examination of candidates. Examinations shall be fair, valid and reliable. Appropriate methodology and procedures (such as collecting and maintaining statistical data) shall be defined to reaffirm, at least annually, the fairness, validity, reliability and general performance of each examination and all identified deficiencies corrected.

Clause 4.3.6

Describe the procedures to evaluate the examinations. Include content reviews, psychometric analyses, cut score studies and other methodology applied to evaluate the instruments/procedures used to determine certification.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe any validity, reliability, adverse impact or other studies conducted regarding your examination(s).

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Cite the standards that you use to develop the criteria against which you evaluate your examination processes, procedures and instrument(s).



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.4 Management system

4.4.1 The certification body shall operate a management system which is documented and covers all the requirements of this International Standard, and ensures the effective application of these requirements.

Clause 4.4.1

Provide documentation of your management system and indicate how it ensures the effective application of the requirements of ISO/IEC/FDIS 17024. (Cite responses to other sections of this application as needed).

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.4.2 The certification body shall ensure that a) a management system is established and maintained in accordance with this International Standard, and b) its management system is understood and implemented at all levels of the organization.

Clause 4.4.2

Describe how your certification body established and how it maintains its management system.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

How does your organization ensure that your management system is understood and implemented on all levels of the organization?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

4.4.3 The certification body shall have document control and internal audit and management review systems in place, including provisions for continual improvement, corrective and preventive actions.

Clause 4.4.3

a) Provide documentation of your document control procedures.

Name of supporting Document:
Attachment numbers(s):



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Page/paragraph:

- b) Provide documentation of your internal audit and management review systems, including continuous improvement processes and procedures for taking corrective and preventive action.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.5 Subcontracting

4.5.1 When a certification body decides to subcontract work related to certification (e.g. examination) to an external body or person, a properly documented agreement covering the arrangement, including confidentiality and prevention of a conflict of interest, shall be drawn up. The decision on certification shall not be subcontracted.

Clause 4.5.1

- a) Show documentation of the agreement and a detailed description of all certification-related work that is contracted to individuals and/or organizations.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Attach samples of your confidentiality and conflict of interest statements and agreements.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Provide documentation that the organization does not contract for decisions on certification.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.5.2 The certification body

- a) shall take full responsibility for such subcontracted work and maintain its responsibility for granting, maintaining, renewing, expanding and reducing the scope, and suspending or withdrawing certification;
- b) shall ensure that the subcontractor is competent and complies with the applicable provisions of this International Standard and is not involved, either directly or through their employer, with training or the maintenance of the certification of persons in such a way that confidentiality and impartiality could be compromised, and
- c) shall maintain a list of its subcontractors, and assess and monitor their performance in accordance with documented procedures.

Clause 4.5.2



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- a) Describe how your certification body monitors work for which it contracts. Include processes and procedures that ensure that corrective actions are taken when needed.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe how your certification body determines that its contractor(s) is(are) competent to perform their work for the organization.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) Describe how your certification body ensures that its contractor(s) are not involved with the training or maintenance of the certification in such a way that confidentiality and impartiality could be compromised.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) Describe your organization assesses and monitors the work of its contractor(s).

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.6 Records

4.6.1 The certification body shall maintain a record system appropriate to its particular circumstances and to comply with regulations, including a means to confirm the status of a certified person. The records shall demonstrate that the certification process has been effectively fulfilled, particularly with respect to application forms, evaluation reports, surveillance activities and other documents relating to granting, maintaining, renewing, expanding and reducing the scope, and suspending or withdrawing certification.

Clause 4.6.1

- a) Describe in detail your certification record system and demonstrate how it meets the requirement of the standard.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.6.2 The records shall be identified, managed and disposed of in such a way as to ensure the integrity of the process and the confidentiality of the information. The records shall be kept for an appropriate period of time to demonstrate continued confidence for at least one full certification cycle, or as required by recognition arrangements, contractual, legal or other obligations.



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Clause 4.6.2

- a) Describe how your organization's certification records are managed and show how these procedures meet the requirements of the standard.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Give the rationale for how long your certification records are maintained.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.7 Confidentiality

The certification body shall, through legally enforceable commitments, keep confidential all information obtained in the process of its activities. These commitments shall cover all individuals working within the body, including committee members, and external bodies or individuals acting on its behalf. Such information shall not be disclosed to an unauthorized party without the written consent of the organization or individual from whom the information was obtained, except where the law requires such information to be disclosed. When the certification body is required by law to release such information, the organization or individual concerned shall be informed beforehand of what information will be provided.

- a) Provide your confidentiality policies and documentation of your procedures for maintaining confidentiality of all information obtained through certification activities. (Refer to responses given in other sections of this application as needed.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) If applicable, provide evidence of a denial for a request for information.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

4.8 Security

All examinations and related items shall be maintained in a secure environment by the certification body, or its subcontractors, to protect the confidentiality of these items throughout their useful life.

- a) Describe in detail the policies and procedures by which you and your contractor(s) protect the security and confidentiality of examinations and related items.



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Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

5 Requirements for certification body personnel

5.1.1 The certification process shall define the competence requirements for employed or contracted persons involved in the certification process.

Clause 5.1.1

- a) List the personnel, including contract personnel directly involved in the certification process. Identify their qualifications for performing their assigned tasks.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) Describe and cite the process for approving the required qualifications of personnel or contractor positions/individuals.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

5.1.2 The certification body shall require its employed or contracted persons to sign a document by which they commit themselves to comply with the rules defined by the certification body, including those relating to confidentiality and those relating to independence from commercial and other interests, and from any prior and/or present link with the persons to be examined that would compromise impartiality.

Clause 5.1.2

- a) Attach samples of confidentiality forms/agreements/declaration statements used by personnel and volunteers that declare they are committed to the certification bodies' rules. (Refer to other responses to this application as appropriate.)

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) Describe and cite the policies and procedures associated with these forms.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:



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5.1.3 Clearly documented instructions shall be available to the employed or contracted persons describing their duties and responsibilities. These instructions shall be kept up to date. All personnel involved in any aspect of certification activities shall possess appropriate education, experience and technical expertise which satisfies defined competence criteria for the tasks identified. They shall be trained for their specific responsibilities and made aware of the significance of the certification offered.

Clause 5.1.3

- a) Provide descriptions of personnel (employed or contracted) duties and responsibilities. List and describe all training and orientation programs and the personnel who have attended.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.1.4 The certification body shall establish and maintain current documentation on the relevant qualification, training and experience of each individual. The information shall be accessible to the individual(s) concerned and shall include the following:

- a) name and address;
- b) organization affiliation and position held;
- c) education and professional status;
- d) experience and training in the relevant;
- e) their specific responsibilities and obligations within the certification body;
- f) performance appraisals;
- g) date of most recent updating of records.

Clause 5.1.4

- a) How, where, and by whom are personnel records maintained?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) What type of information is placed in personnel files? Provide an example of any standard forms utilized for all personnel.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.2 Requirements for examiners

5.2.1 Examiners shall meet the requirements of the certification body based upon applicable competence standards and other relevant documents. The selection process shall ensure that examiners assigned to an examination or part of an examination at least

- a) are familiar with the relevant certification scheme,
- b) have a thorough knowledge of the relevant examination methods and examination documents,



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- c) have appropriate competence in the field to be examined,
- d) are fluent both in writing and orally in the language of examination, and
- e) are free from any interest so that they can make impartial and non-discriminatory judgments (assessments).

Clause 5.2.1

- a) Describe and cite the selection criteria, qualifications, and responsibilities of examiners. (This would include scorers for performance/product assessment.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How are examiners selected and trained, and how is their performance monitored, evaluated, and adjusted as needed?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

5.2.2 If an examiner has a potential conflict of interest in the examination of a candidate, the certification body shall undertake measures to ensure that confidentiality and impartiality of the examination is not compromised (see 4.2.5). These measures shall be recorded.

Clause 5.2.2

If a trainer/instructor is(was) used in the evaluation process, present the the rationale and justification for this practice.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Provide evidence that objectivity and impartiality is(was) maintained under these circumstances.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6 Certification process

6.1.1 The certification body shall provide on request a current detailed description of the certification process, appropriate to each certification scheme (including fees), and the documents containing the requirements for certification, the applicants' rights, and the duties of a certified person which includes a code of conduct, if applicable (see 6.6.2).

Clause 6.1.1

- a) Provide a sample of the descriptive documentation that is given to candidates.

Name of supporting Document:



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Attachment numbers(s):

Page/paragraph:

6.1.2 The certification body shall require the completion of an application, signed by the applicant seeking certification, which includes

- a) the scope of the desired certification,
- b) a statement that the person agrees to comply with the requirements for certification and to supply any information needed for the evaluation,
- c) details of relevant qualifications, confirmed and supported by evidence, and
- d) general information on the applicant, for example name, address and other information required to identify the person.

Clause 6.1.2

- a) Describe the application process. Attach a sample application.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Provide a rationale for information requested on the application.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) If an electronic signature is accepted, how is the signature verified?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) What policies and procedures are in place to verify application information?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2 Evaluation

6.2.1 The certification body shall review the application to confirm that

- a) the certification body has the capability to deliver the requested certification,
- b) the certification body is aware of and can, within reason, accommodate any special needs of applicants, such as language and/or disabilities, and
- c) the applicant has the required education, experience and training specified by the scheme.

Clause 6.2.1



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- a) Identify what documents are required from candidates, how applications are reviewed, and how documentation submitted and statements made by applicants are verified.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Provide documentation of your policy and procedures for determining and providing accommodations for candidates who indicate that they have special needs.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- c) How does the certification body address language issues indicated by applicants? (This includes exams given in foreign languages as well as disability-related language issues.)

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- d) What are the qualifications of the individuals who review applications? How is the performance of their functions monitored, evaluated, and corrected if needed?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.2 The certification body shall examine competence, based on the requirements of the scheme, by written, oral, practical, observational or other means.

Clause 6.2.2

- a) Describe how relevant knowledge, skills, and abilities are examined in the certification process.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe studies performed to ensure that all appropriate competence criteria are objectively and systematically evaluated?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.3 Examinations shall be planned and structured in a manner which ensures that all scheme requirements are objectively and systematically verified, with sufficient documented evidence produced to confirm the competence of the candidate.



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Clause 6.2.3

- a) What method(s) is(are) used to evaluate specific knowledge, skills, and abilities?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) For each scheme, provide a rationale for specific assessment mechanism(s) used.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.2.4 The certification body shall adopt reporting procedures that ensure the performance and results of the evaluation are documented in an appropriate and comprehensible manner, including the performance and results of examinations.

Clause 6.2.4

Describe how examination results are recorded.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe how examination results are reported and maintained.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

Describe any regulations or requirements for reporting results outside your organization, how you comply with them, and how you maintain confidentiality of individual results in accordance with your policies.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.3 Decision on certification

6.3.1 The decision on certification of a candidate shall be made solely by the certification body on the basis of the information gathered during the certification process. Those who make the certification decision shall not have participated in the examination or training of the candidate.

Clause 6.3.1



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- a) Describe the process by which certification decisions are reached.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- b) What body makes the decision on certification?

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

- c) Describe the policies and procedures in place to prevent an error regarding the decision of certification of a candidate.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

6.3.2 The certification body shall provide a certificate to all certified persons. The certification body shall maintain sole ownership of the certificates. The certificate may take the form of a letter, card or other medium, signed or authorized by a responsible officer of the certification body.

Clause 6.3.2 (See Clause 6.3.3 for requirements)

Provide a model of the certificate, letter, card, or other medium issued to all successful candidates notifying them of their certification.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

Describe how your certification body protects the integrity of its certification from unauthorized use.

Name of supporting Document:
Attachment numbers(s):
Page/paragraph:

6.3.3 These certificates shall contain, as a minimum, the following information:

- a) the name of the certified person and a unique certification number;
- b) the name of the certification body;
- c) a reference to the competence standard or other relevant documents, including issue, on which the certification is based;
- d) the scope of the certification, including validity conditions and limitations;
- e) the effective date of certification and date of expiry.

Clause 6.3.3 (See 6.3.2)



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6.4 Surveillance and recertification procedure

6.4.1 The certification body shall define a pro-active surveillance process to monitor certificants' compliance with relevant provisions of the certification scheme.

Clause 6.4.1

- a) Describe the surveillance methods used to monitor certificate holders.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How is it determined that certificate holders are compliant with current certification requirements?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.4.2 The certification body shall have procedures and conditions for the maintenance of certification in accordance with the certification scheme. These conditions, including the frequency and content of surveillance activities, shall be endorsed by the scheme committee. The conditions shall be adequate to ensure that there is impartial evaluation to confirm the continuing competence of the certified person.

Clause 6.4.2

- a) How often does the committee charged with surveillance review their procedures?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) What surveillance techniques are used to ensure impartiality in the evaluation of certified persons?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.5 Recertification

6.5.1 The certification body shall define recertification requirements according to the competence standard and other relevant documents, to ensure that the certified person continues to comply with the current certification requirements.



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6.5.2 The certification body shall have procedures and conditions for the maintenance of certification in accordance with the certification scheme. These conditions, including the frequency and content of recertification activities, shall be endorsed by the scheme committee. The conditions shall be adequate to ensure that there is impartial evaluation to confirm the continuing competence of the certified person.

Clauses 6.5.1 and 6.5.2

- a) Describe recertification requirements.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) Describe the recertification program and how it is implemented. Include documentation of how there is impartial evaluation to confirm the continuing competence of the certificant.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.6 Use of certificates and logos/marks

6.6.1 A certification body that provides a certification mark or logo shall document the conditions for use and shall appropriately manage the rights for usage and representation.

Clause 6.6.1

- a) Describe the use of the certification mark. Attach the certification mark and describe its use.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

- b) How is the certification mark protected from misuse?

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.6.2 The certification body shall require that a certified person sign an agreement

- to comply with the relevant provisions of the certification scheme,
- to make claims regarding certification only with respect to the scope for which certification has been granted,
- not to use the certification in such a manner as to bring the certification body into disrepute, and not to make any statement regarding the certification which the certification body may consider misleading or unauthorized,
- to discontinue the use of all claims to certification that contains any reference to the certification body or certification upon suspension or withdrawal of certification, and to return any certificates issued by the certification body, and
- not to use the certificate in a misleading manner.



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Clause 6.6.2

- a) Provide a copy of the agreement that includes all of the elements in clause 6.5.2.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:

6.6.3 Inappropriate references to the certification or misleading use of certificates and marks or logos in publications, catalogues, etc. shall be addressed with corrective measures, such as the suspension or withdrawal of certification, publication of the infraction and, if appropriate, additional legal action.

Clause 6.6.3

Describe how any inappropriate references to certification and its corresponding marks have been addressed.

Name of supporting Document:

Attachment numbers(s):

Page/paragraph:



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Application for ANSI Accreditation Under ANSI/ISO/IEC 17024

Annex A: Personnel Certification Accreditation — Application Milestones

| Application | Date |
|--|-------------|
| <input type="checkbox"/> Received application materials | _____ |
| <input type="checkbox"/> Reviewed materials, if necessary send questions to ANSI | _____ |
| <input type="checkbox"/> Sent in application and fee | _____ |
| <input type="checkbox"/> Received acknowledgement from ANSI | _____ |
| <i>Ten-day review period begins.</i> | |
| <input type="checkbox"/> Received assessor names | _____ |
| <input type="checkbox"/> Sent back response card accepting/declining assessor(s) | _____ |
| <i>Once assessors are approved by organization, they will conduct a paper review of application.</i> | |
| <input type="checkbox"/> Quality evaluations complete | _____ |
| <input type="checkbox"/> Information requested, (90) days to resubmit without further fees | _____ |
| <input type="checkbox"/> 90 day deadline | _____ |
| <input type="checkbox"/> Audit plan determined by assessors, sent to organization for approval and discussion. | _____ |
| <input type="checkbox"/> Audit plan accepted. | _____ |
| On-site Audit | |
| <input type="checkbox"/> Assessors arrive | _____ |
| <input type="checkbox"/> Audit conducted | _____ |
| <input type="checkbox"/> Oral and summary report received | _____ |
| <input type="checkbox"/> Written report received | _____ |
| Non-conforming item(s) | |
| <input type="checkbox"/> Plan drawn up with assessors for correction | _____ |
| <input type="checkbox"/> Corrective actions approved | _____ |
| <input type="checkbox"/> All non-conformities corrective actions approved | _____ |
| <input type="checkbox"/> Corrective actions taken and sent in for review | _____ |
| <input type="checkbox"/> Acknowledgment received | _____ |
| <input type="checkbox"/> Non-conformities accepted as corrected | _____ |



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OR

Further corrective action required

Accreditation awarded



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Annex B: List of possible documents to assist you in filling out application materials

1. Accommodations Policy & Procedures
2. Annual Report
3. Audits
4. Board Minutes
5. Bylaws
6. Candidate Handbook
7. Certification Handbook
8. Committee Minutes
9. Confidentiality Agreements
10. Contracts
11. Disclaimer Statement
12. Ethics Policy
13. Financial Statements and Audits
14. Insurance
15. Job Descriptions
16. Job/practice Analysis
17. Management Manual
18. Mission Statement
19. Personnel



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Attachment C: Declaration Statement

Applicant agrees to meet the following conditions:

1. Applicant shall provide ANSI with all information requested for the process of assessing competency of a personnel certification body;
2. Applicant agrees to pay all fees charged for assessment of competence; including all subsequent fees once competence is recognized;
3. Applicant is familiar with the requirements for assessment of competency for personnel certification bodies;
4. The certification body can demonstrate it:
 - Is an independent third-party as a certifier of services provided to individuals;
 - Is a legal entity or part of a legal entity; and
 - Has a clearly defined scope of certification.

ANSI requires each applicant to adhere to the following:

- a) make all necessary arrangements for the conduct of assessments, including provisions for examining documentation, and access to records (including internal assessment reports) and personnel for the purpose of surveillance, re-assessment and resolution of complaints;
- b) make claims only regarding activities defined in the scope of the accreditation granted;
- c) not use the accreditation in such a manner as to bring the Personnel Certification Accreditation Program into disrepute and not make any statement regarding the accreditation which Personnel Certification Accreditation Program may consider misleading or unauthorized;
- d) upon withdrawal of the Personnel Certification Accreditation Program accreditation, discontinue use of all advertising material which references the Personnel Certification Accreditation Program accreditation and return all accreditation documents including the certificate to ANSI;
- e) not allow the Personnel Certification Accreditation Program accreditation to imply that a person's competencies are approved by the Personnel Certification Accreditation Program;
- f) ensure that no Personnel Certification Accreditation Program document, logo, or report nor any part thereof is used in a misleading manner; and
- g) comply with Personnel Certification Accreditation Program requirements when referencing the status of Personnel Certification Accreditation Program accreditation in communication media such as documents, brochures, or advertising.

I accept the conditions aforementioned and attach said completed application for accreditation review by the American National Standards Institute.

Please sign below.

Name

Approving Authority Title

Date



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Attachment D: Terms and Definitions

Certification Scheme: Certification scheme (body of knowledge) relating to a specific certification of an occupation, specialty, role, or skill.

Certification System: Management system for carrying out certification process.

Examiner: An individual who actually evaluates a candidate or the candidate's performance or product (not a proctor.)

Internal Audit: An evaluation conducted by an individual within the organization.

Surveillance: Surveillance is a process by which certificants are monitored to determine whether the certification body should initiate any action to suspend or revoke the certification.

Acronyms

ANSI American National Standards Institute

ISO International Organization for Standardization

IEC International Electrotechnical Commission

ANSI/ISO/IEC 17024:2003, General requirements for bodies operating certification of persons. This international standard specifies requirements which ensure that certification bodies operating certification schemes for persons operate in a consistent, comparable, and reliable manner.¹

PCAC Personnel Certification Accreditation Committee

¹ ANSI/ISO/IEC 17024, page v



January 24, 2012

To Whom It May Concern:

I have been requested by Dr. Cynthia Woodley to make a statement about the comparability of the Conference for Food Protection: Standards for Accreditation of Food Protection Manager Certification Programs and ANSI/ISO/IEC 17024 Conformity Assessment – General requirements for bodies operating certification of persons.

As the purveyor of accreditation service for both standards, our professional staff believe the Standards are similar and ANSI/ISO/IEC 17024 is equal or higher than the CFP Standards for Accreditation of Food Protection Manager Certification Program.

Lane Hallenbeck
Vice President
Accreditation Services

Introduction

ISO/IEC 17024 has been drawn up with the objective of achieving and promoting a globally accepted benchmark for organizations operating certification of persons. Certification of persons is one means of providing assurance that the certified person meets the requirements of the certification scheme. Confidence in the respective certification schemes is achieved by means of a globally accepted process of assessment, subsequent surveillance and periodic re-assessments of the competence of certified persons.

However, it is necessary to distinguish between situations where certification schemes for persons are justified and situations where other forms of qualification are more appropriate. The development of new certification schemes for persons, in response to the ever increasing velocity of technological innovation and growing specialization of personnel, may compensate for variations in education and training and thus facilitate the global job market. Alternatives to certification may still be necessary in positions where public services, official or governmental operations are concerned.

In contrast to other types of conformity assessment bodies, such as management system certification/ registration bodies, one of the characteristic functions of the personnel certification body is to conduct an examination, which uses objective criteria for competence and scoring. While it is recognized that such an examination, if well planned and structured by the certification body, can substantially serve to ensure impartiality of operations and reduce the risk of a conflict of interest, alternative requirements have been included in ISO/IEC 17024.

In either case, ISO/IEC should be the basis for the recognition of the certification bodies and their certification schemes, in order to facilitate their acceptance at the national and international levels. Only the harmonization of the system for developing and maintaining certification schemes for persons can establish the environment for mutual recognition and the global exchange of personnel.

ISO/IEC 17024 specifies requirements which ensure that certification bodies operating certification schemes for persons operate in a consistent, comparable and reliable manner. The requirements in this International Standard are to be considered as general requirements for bodies operating certification schemes for persons and therefore may have to be supplemented in response to additional demonstrated market need/desire (i.e. improvement of the profession) or specific government requirements (i.e. protection of the public).

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 022
Issue: 2012 II-032**

| | | | |
|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Inspection Form Scoring Committee

Issue you would like the Conference to consider:

This Issue is submitted on behalf of the Conference so that Council II may deliberate and recommend what action(s) to take with respect to the Inspection Form Scoring Committee. The Committee submitted a draft committee report (see attached) to the Council II Chair but did not submit a final report or Issues for the 2012 Biennial Meeting.

Public Health Significance:

The Inspection Form Scoring Committee has worked for several years to develop a uniform system for the evaluation of food establishments with respect to food safety. Such a system would be of benefit to the retail food industry, regulators, and consumers for risk communication and risk management.

Recommended Solution: The Conference recommends...:

that the attached Inspection Form Scoring Committee report be acknowledged and the Committee members be thanked for their work.

The Conference also recommends that the Council II debate the future of the Inspection Form Scoring Committee and determine whether this committee is to be:

- a) disbanded (as recommended in the attached report), or
- b) re-created for the next biennium with specified new charges or with continuation charges from the 2010 Biennial Meeting, and with a requirement to report back to the 2014 CFP Biennial Meeting.

Respectfully, a "no action" or "accept as submitted" recommendation are not valid options for this Issue.

Submitter Information:

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Attachments:

- "Inspection Form Scoring Committee Final Report"
- "Content Attachment #1"
- "Supporting Attachment 1"
- "Inspection Form Scoring Committee Roster final"

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Conference for Food Protection Committee FINAL Report

COMMITTEE NAME: Inspection Form Scoring Committee

COUNCIL (I, II, or III): II

DATE OF REPORT: 12/15/2011

SUBMITTED BY: Bill Flynn, Margaret Binkley

COMMITTEE CHARGE(s):

The CFP recommends that a committee be formed and charged with the following:

- Conduct academic research to:
 - Investigate and determine the most effective Foodservice Establishment scoring system that is based on the current identified risk factors and interventions identified in the FDA Food Code for use with the current FDA Food Establishment Inspection Form.
 - Determine the most effective way to communicate the Food Establishment Inspection scores to the public so they have access to the information in advance of choosing where to dine and purchase food items.
- Work with academic researchers to identify funding sources to conduct their research and provide a letter of support for funding identified.
- Report the committee's finding back to the conference at the 2012 Biennial Meeting.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

Initial interest in the 2010-2012 Inspection Form Scoring Committee was relatively high, with 30+ people volunteering to participate in the committee processes. An initial questionnaire was sent to all participants to gather answers to various assumptions developed from past Committees that related to the Charge. Comments were requested as well as other information that was felt the Committee should pursue. Initial questions/concerns formed by the Committee were:

- Is our objective as the Committee to reduce foodborne illness? Increase restaurant compliance? Or getting the word out to the public?
- Can the knowledge of scores allow for the public to make better decisions about restaurant selection or reduce food-borne illness? Or both?

Survey results included an over-whelming majority who agreed that a form that is intuitive to both the public and inspector is the most important charge of the committee.

There were six assumptions given where the Committee was asked to rate the need to address this assumption. These assumptions were:

- 1) "The health jurisdictions program includes inspector and industry training"-There was an overwhelming support of this assumption with 88% agreeing this was needed. Comments were: "Standardization is critical to the success of any inspection/grading

program” and “Standardization for health jurisdictions-the inspection staff must be trained on CDC risk factors so grades will be consistent, accurate, and meaningful.

2) “The scoring system is easy for the health inspector, the public and industry to understand”- there was a 100% support that this assumption was needed. Comments included: “There should be standardization of scoring/grading systems. Few of the systems are “apples to apples” so this is hard for industry and the general public to understand the differences” and “Must be risk-based and supported by science”.

3) “The inspector’s performance is standardized on an ongoing basis”-Again, 88% felt this was needed. Comments included “Standardization of the program and scoring would go a long way in standardizing an inspector’s performance”.

4) “The jurisdiction is using a risk-based food code that requires effective control of CDC risk factors”-Over 80% of the committee felt this was needed. Comments were “YES!” and “Systems that result in low scores because floors, walls, and ceilings aren’t clean don’t provide the best help to citizens looking for a safe place to dine”.

5) “The health department regularly evaluates their inspection program results using a consistent and effective methodology”-Here 75% felt that this assumption was somewhat needed. Comments included “Not unimportant, but not as critical once a good system is in place. It is more critical to ensure consistency among staff at that point”.

6) “The public receives the sanitation scores in a way that allows them to make informed decisions about where they would like to eat”-75% felt this was needed. Comments included “Public education on what a grade/score represents is an important component of a successful program” and “Message must emphasize and include that some minimum level/score of food establishment means it’s safe for consumers”.

It was felt that to be able to address the charge, it would be valuable to divide the group into three teams and assign specific duties to each. The teams decided on were:

1. Information Gatherers

- Gather form and scoring examples from local health department jurisdictions.
- Identify commonalities to keep the number of systems measured minimal.
- Obtain local jurisdictions/state surveys and gather information from the public to clarify the understanding of the system.

2. Practitioner

- Conduct health department-like, non-regulatory inspections using different forms to determine if it works for inspectors.
- Determine if inspectors find this easy to use in real life inspection scenarios.

3. Results Team

- Academia will take information; provide its meaningfulness and conclusions.
- Provide adequate scientific literature regarding public and inspector sentiment and understanding of current scoring methods.

Charge 1

Although information was gathered from 500 health inspection reports from 75 jurisdictions across the country, the data was not able to be analyzed prior to the processing of this report. If the committee is to continue, the data can be used for processing at that time. In the process of gathering the data, it was found that many health departments were against any type of scoring method. Some of the auditors that participated in the study asked to no longer participate because their departments don't believe in scoring. They believe the message of food safety and training is most impactful when scores are not involved.

A number of studies have been conducted relating to the posting of health inspection scores by a variety of methods and the public's perception of these scores. (See Supporting Attachment #1.)

Although there have been many studies completed on health inspection scores from various angles, there is still more research that could be conducted to answer the charge of this Committee. Some of the problems with present research is the fact that there are many different scoring methods used by city/county/state inspectors including: a percentage out of 100; a letter grade of A,B,C; pass/fail; or a color-coded sign posted in the window of a restaurant. Until some type of standardization can be developed to make comparisons between all of the scoring systems, no concise results can be reported. It has been found by the Committee that problems also lie in the fact that retail establishments (grocery stores) unlike restaurants tend to have many separate departments that receive multiple scores and can score poorly in some areas which would not represent the "true" score of the grocery store. It was also found that many health departments were against any type of scoring method. Other comments were:

1. Believe the inspection form speaks for itself. Grading systems of any kind are going to result in an over simplification of a complex set of data.
2. The best way to judge a location is review the full inspection report.
3. Grades in most areas turn into a self-enforcement tool, which is fine if this is what is wanted.

Charge 2

In 2010 our original researcher from Loma Linda University withdrew their committed resources due to a downturn in the economy. Subsequent interviews with potential researchers from University of Minnesota School of Public Health, Kansas State University, and North Carolina State University determined that the committee charge was broad enough that it would be advantageous for multiple researchers to work together.

The original goal of developing a grant application for the National Institute of Food and Agriculture (NIFA) Integrated Research, Education, and Extension Competitive Grants Program – National Integrated Food Safety Initiative was abandoned due to researcher turnover in 2011. Instead of the grant the committee sourced volunteer research from Dr. Barbara Almanza from Purdue, Dr. Margaret Binkley from Ohio State University, and private industry consultants. The outcomes have been promising. (See Content Attachment #1.)

REQUESTED ACTION:

The Inspection Form Scoring Committee believes that the continuation of this Committee may not be to the benefit of the Conference for Food Protection.

The Inspection Form Scoring committee recommends the conference:

- Issue 1 – Acknowledge the work by members of the committees and thank the members for their time trying to meet the committee charge.
- Issue 2 – Disband the committee - the charge was determined to be too broad; there is no effective way to show that a Foodservice Establishment scoring system can assist the public in making an informed decision on where to eat without adequate funding.

CONTENT ATTACHMENT #1

Draft CFP Scoring Committee Study Plan

- I. Scoring Committee Working Assumptions: Scoring can have a positive impact on public health by reducing the risk factors associated with foodborne disease if:
 - The committee can raise approximately \$75,000 in resources to modify a web-based database.
 - The health jurisdictions program includes inspector and industry training.
 - The scoring system is easy for the health inspector, the public and regulated industry to understand.
 - The inspector's performance is standardized on an ongoing basis.
 - The jurisdiction is using a risk based food code that required effective control of CDC risk factors.
 - The health department regularly evaluates their inspection program results using a consistent and effective methodology.
 - The public receives the health inspection report scores in a way that allows them to make an informed decision about where they would like to eat.
 - Restaurants, grocery stores, institutional kitchens, etc. need to be evaluated differently.

- II. Information Gatherers Objectives:
 - Collect inspection reports of jurisdictions that score inspection reports from random health jurisdictions using public disclosure systems or freedom of information act.
 - Organize a list of conveniently accessed health jurisdiction reports.
 - Organize health department scoring systems based on the size of a jurisdiction.
 - Source a web-based database to house health inspection data and scoring normalization.

- III. Practitioners Objectives:
 - Utilizing actual health jurisdiction forms, conduct standardized inspections using the five most common health jurisdiction scoring formats.
 - Using the latest version of CFP inspection report form, conduct standardized inspections using a normalized scoring technique based on percent of 100.

- IV. Researcher Objectives:
 - Conduct literature review/ research to identify communication techniques that consumers, regulators, and the industry can mutually understand.
 - Develop consumer and industry survey instruments and work with CSPI and NRA on conducting surveys to targeted populations.
 - Analyze the results of the survey instrument and write a research paper with findings, recommendations, and conclusions.

- V. Scoring Committee Accomplishments:
 - A web-based database has been created to gather, report, and analyze the committee's information. The cost was absorbed through private donations, fundraisers, and volunteer programmers from graduate students.
 - 75 unique health jurisdiction forms have been gathered for analysis.
 - A list of conveniently accessed health jurisdiction reports has been organized on the database.

- The list of health department scoring systems organized by the size of a jurisdiction is 75% complete.
- The database has been program to normalize scores on percent of 100 as test. Once researchers determine the most successful method of reporting scores, that system will be utilized to normalize health jurisdiction scores.
- Approximately 100 standardized inspections have been gathered ready to compare the scoring results of 5 different health jurisdiction inspections forms.

VI. Scoring Committee Challenges:

- Creating and programming the database consumed many hours and most of the committee resources.
- Information gathering, in a non-web based environment, allowed for inefficiencies when gathering the results from random locations across the country.
- Gathering the information while maintaining anonymity for the subject restaurants, could compromise the ability to report results.

SUPPORTING ATTACHMENT #1

References of studies that have been conducted relating to the posting of health inspection scores by a variety of methods and the public's perception of these scores.

- Worsford (2005). This study examined the public's perceptions of hygiene standards in eating places and their interest in having consumer information on the premises. They found that people who eat out regularly claimed that the standard of food hygiene of food premises was important to them when deciding where to dine. Consumers believed they have the right to know the results of a hygiene inspection and most would some type of reliable system so they may better judge hygiene standards of restaurants. About half of the respondents felt it was somewhat difficult for them to find needed information on inspection standards.
Respondents preferred the use of "stars" so they could better judge hygiene standards
- Simon et al (2005). This study examined the impact on grading cards on foodborne illness hospitalizations in Los Angeles County. The grading system was introduced in January 1998. After data were adjusted, it was found that restaurant hygiene grading program was associated with a 13.1 percent decrease in the number of foodborne-disease hospitalizations in Los Angeles County and was sustained over the next two years (1999–2000). It was felt that the posting of these hygiene grading cards was an effective intervention for reducing the number of foodborne diseases.
- Almanza et al (2002). This study examined the debate concerning the fact if publishing the results of health inspections in the media would influence the public's decision to dine out in specific restaurants. Health inspection scores were examined and analyzed both before and after the publication of restaurants scores. The results showed that overall, inspection scores increased and the number of consumer complaints decreased.
- Choi et al (2011). This study examined the impact of inspection score information on consumer behavior by asking consumers to decide on the selection of restaurants based on health inspection scores. The study found that the more violations a restaurant had, the more likely the consumer decided to select another restaurant to dine.
- Henson et al (2006). This paper explores the ways in which consumers assess the safety of food in restaurants. The study examined how consumers base their assessment of food safety in restaurants using a range of visible. Restaurant health inspection reports were one of the assessments that were used and found to vary among the group of consumers.
- Boehnke (2000). This study used a worldwide survey, that the US was the only country that had a disclosure systems or posted letter grade systems to make public the inspection status of the restaurant. They found the systems of disclosure and letter grading varied greatly and included the use of websites to make public restaurant inspection information.
They also found that the information and purposes of the websites ranged widely from being disciplinary to being supportive with both the industry and the public as users.
- Thompson (2005). This study examined, among other items, the levels of standardization in the inspection activities in the city of Toronto as well as information. What was found was that inspections are being conducted in a more consistent manner across the city and the owners feel that the inspectors tend to be fair and impartial. They also feel that disclosure of inspection results have the opportunity to offer an incentive to the operators to comply better with the regulations.
- Dundes (2001). This study examined how college students and health professionals interpreted health inspection scores. The sample was asked how they interpreted either a score (a percentage

was used) or a sign (a letter grade) that represented the results of a health inspection. It was found that the public does not have a clear understanding of the meaning of posted health inspection scores.

- Jones et al (2008). This study specifically examined the public knowledge and attitudes regarding public health inspections of restaurants. Respondents were asked how many times a year restaurants were inspected and more than half felt it should be 12 times. The study found there were many areas of misunderstanding by the public in regards to restaurant inspections.

Committee Name:

Committee Name:

| Last Name | First Name | Position (Chair/M | Constituency | Employer | City | State | Telephone | Email |
|-----------|------------|---------------------|--------------|------------------------------|----------------|-------|----------------|--------------------------------------|
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Committee Name:



JV

Committee Name:

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 044
Issue: 2012 II-033**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Electronic Reporting for Health Inspections

Issue you would like the Conference to consider:

The issue of electronic reporting for health inspections has been a topic at several meetings of the Conference for Food Protection. It is clear that the increased availability and visibility to health inspection results helps foodservice establishment management and regulators work together to ensure food safety. We urge that substantive progress be made toward this objective.

In 2010, the CFP Electronic Reporting Committee (Issue 2010 II-007) submitted the following statement that was adopted by the Conference:

"The Conference recommends that the Conference Chair write a letter to the Food and Drug Administration (FDA) requesting that they develop a database management tool that will enable the analysis of future baseline survey data collected by regulatory agencies to assess and enhance the effectiveness of food safety programs and report back to the Conference for Food Protection."

We urge that FDA develop a database management tool that will enable the entry and analysis of inspection results, and allow access by establishment owners and operators in order to enhance the effectiveness of food safety programs.

Public Health Significance:

It is important that there be visibility to the results of food safety efforts at retail food establishments. The ability to access health inspection information will support clarity in application of health code regulations and in compliance activities. The result is improved food safety performance for the consumer and better protection of the public health.

Recommended Solution: The Conference recommends...:

a letter be sent to FDA requesting that FDA develop a database management tool that will enable the entry and analysis of inspection results, and allow access by establishment owners and operators in order to enhance the effectiveness of food safety programs.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 094
Issue: 2012 II-034**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Harmonized Food Code and Electronic Reporting for Health Inspections

Issue you would like the Conference to consider:

The National Council of Chain Restaurants includes 32 chain restaurant companies with representation throughout the United States. Current health inspections use a variety of formats, scoring methods, and electronic or paper recording of inspection reports, depending on jurisdiction. This variety leads to inconsistency in inspections making comparison of restaurant performance problematic across national chains. Harmonization and electronic reporting in a single report format would create searchable and downloadable databases for use in improving restaurant performance and enhancing the effectiveness of food-safety programs.

Universal adoption of the FDA Food Code in its entirety by state and local health departments would greatly facilitate the harmonization of uniform inspection tools and compliance reporting throughout the United States. Varying Food Code regulations hamper chain restaurants from developing consistent training materials, performance metrics, and corrective actions to health report violations. This makes regulatory compliance for national chains complex, time-consuming, and resource intensive. It also results in varying programs of food-safety protection. We acknowledge that a stated goal of FDA's Retail Food Safety Initiative is the universal adoption of the Food Code and we support FDA, state and local health authorities in achieving this goal.

Public Health Significance:

A harmonized approach to Health Inspection data collection, warehousing and availability would do the following:

- Allow uniformity on the application and reporting of health-code regulations and compliance activities across the US.
- Facilitate corporate/business owner awareness of inspection results, engaging restaurant leadership in the remediation of critical violations, inspection failures, and any other urgent inspection outcomes.
- Allow industry to perform ongoing analytics of violation trends across federal, state and local jurisdictions so that resources can be better allocated to reduce targeted violations, improve public health, and manage poor-performing restaurants.

- Facilitate cross agency/jurisdictional data sharing for state and national benchmarking studies and become a data resource for academia, industry, consumers, and the media.

Recommended Solution: The Conference recommends...:

That a letter be sent to FDA recommending:

- The FDA develop an electronic database for state and local health inspection reports that uses consistent violation categories/types and scoring methodology for health inspection reporting.
- That this database should be accessible by corporate/business owners, consumers, reporters, and academia for the purpose of better compliance reporting and data analysis to improve public health protection and better manage restaurant performance.

Submitter Information:

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 088
Issue: 2012 II-035**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Standardized Data Collection and Electronic Reporting of Inspections

Issue you would like the Conference to consider:

Current health department food establishment inspection forms use a variety of formats, scoring approaches and records that can be stored electronically or on paper. Food establishment inspection data would be most effective if collected and stored in a standardized format that is readable and searchable across multiple technology platforms. Standardized data collection formats could help reduce a significant barrier to sharing of inspection data.

Public Health Significance:

A standardized approach to Inspection data collection, warehousing, and access could:

- Facilitate cross agency/jurisdictional data sharing for state and national Baseline (Risk Factor) Studies, and be a data resource for academia and industry partners.
- Allow the development of third party web and mobile applications which can provide controlled access of inspection results to consumers, regulators, industry and media.
- Allow corporate/business owner awareness of inspection results and trends, engaging food establishment management in the remediation of critical violations, repeat violations, inspection failure, and any other urgent inspection outcomes.
- Allow industry to perform ongoing analytics of inspection findings so that resources can be optimally allocated to reduce violations, better manage poor performing food establishments, and improve public health.
- Reduce time and resources needed by regulatory agencies to comply with inspection data requests from media, consumers and others.

Recommended Solution: The Conference recommends...:

that a committee be created to study how health department inspection data can be collected more uniformly through the use of standardized formats to enhance public health. Utilizing Food Code Annex 7, Form 3-A (Food Establishment Inspection Form) and Guide 3-B (Instructions for Marking the Food Establishment Inspection Report, Including Food Code References for Risk Factors/Interventions and Good Retail Practices) as the starting point, the committee is charged to consider:

- Uniform violation categories / types, by utilizing the FDA inspection form,

- Consistent scoring methodology, and
- Development of a centralized electronic database with controlled access.

The committee will report on its findings, along with implementation recommendations at the 2014 CFP Biennial Meeting.

These activities should be undertaken with the intent of eventually creating a national database to warehouse inspection data from contributing states, local jurisdictions and other sources.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 003
Issue: 2012 II-036**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

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Title:

Risk-Based Inspection Form-Marking

Issue you would like the Conference to consider:

REMOVE THE RESTRICTION FROM THE AUDIT MANUAL THAT THE FORM NOT BE PRE-POPULATED WITH ITEMS MARKED "IN"

Public Health Significance:

THE RECOMMENDED RISK-BASED INSPECTION FORM CONTAINS "IN/ OUT / NA / AND NO" CATEGORIES FOR 54 GROUPS OF VIOLATIONS. USE OF THIS FORM IS NECESSARY TO MEET AT LEAST 3 SEPARATE Retail Food Regulatory Program STANDARDS. REQUIRING EACH OF THE 54 GROUPS TO EACH BE MARKED EVERY INSPECTION IS REQUIRED TO ELIMINATE ALLEGED POTENTIAL BIAS THAT MAY BE PRESENT IF THE FORM IS PRE-POPULATED WITH ITEMS MARKED "IN".

REASONS THIS REQUIREMENT SHOULD BE ELIMINATED INCLUDE:

- THERE IS NO STATISTICALLY VALID RESEARCH THAT SHOWS SUCH BIAS WOULD OCCUR. FORCING INDIVIDUALS TO ROUTINELY MARK 50+ ITEMS ON A FORM EACH INSPECTION WOULD JUST AS LIKELY PROMOTE "DRY LAB" BEHAVIOR TO JUST GET THROUGH THE FORM AND INCREASE GENERAL HUMAN ERROR. LETTING PROFESSIONALS JUST MARK THE ITEMS THAT HAVE MEANING FOR THAT INSPECTION (OUT,NA/NO) WOULD BE FAR MORE MEANINGFUL.
- THE CONSISTENT APPROACH OF CFP HAS BEEN TO STATE OUTCOMES, NOT TO PRESCRIBE SPECIFIC SOLUTIONS. THIS ALLOWS INDUSTRY TO USE AN IMPLEMENTATION SYSTEM THAT MEETS THEIR NEEDS AND FLEX THAT SYSTEM TO UTILIZE CURRENT TECHNOLOGY AND TRAINING METHODS. THAT SAME PHILOSOPHY SHOULD BE USED FOR THE REGULATORY AGENCIES. QUALITY CONTROL SYSTEM SPECIFICS OVER THE INSPECTION WRITING PROCESS SHOULD BE DETERMINED BY EACH AGENCY. FOR EXAMPLE, WITH THE INSPECTION FORM, QUALITY CONTROL CAN BE MAINTAINED THROUGH INITIAL AND ONGOING TRAINING WITH A STANDARDIZED TRAINER, SUPERVISORY REVIEW, REPORTS OF MARKING PATTERNS USED BY STAFF IF THE FORM IS MAINTAINED IN AN ELECTRONIC DATABASE, ETC.

- RESOURCE STRAPPED STATE AND LOCAL AGENCIES CANNOT AFFORD THE EXTRA TIME NEEDED TO ROUTINELY MARK "IN" ON A FORM OVER 50 TIMES PER INSPECTION. FOR EXAMPLE AT AN EXTRA 5 MINUTES PER INSPECTION TO MARK EACH OF THE ITEMS "IN", USE OF THIS FORM STATEWIDE IN MICHIGAN WOULD CAUSE A 5.4 FTE STAFF REDUCTION IN TIME (101,682 INSPECTIONS X 5 MINUTES= 508,410 MINUTES/60=8474 HOURS/1550 HOURS/FTE=5.4 FTE'S). THIS REPRESENTS A 2.2% REDUCTION IN STAFFING STATEWIDE.
- INFLEXIBLE, COMMAND AND CONTROL REQUIREMENTS SUCH AS THIS WILL BE A DETERRENT TO AGENCIES ENROLLING AND OR WORKING TO PROGRESS TO MEET THE STANDARDS.

Recommended Solution: The Conference recommends...:

that a letter be sent to the FDA requesting removal of the Audit Manual restriction that the risk-based retail inspections form fields not be pre-populated as "in."

Submitter Information:

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Attachments:

- "Michigan's form-fillable retail risk-based form"

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Michigan Food Establishment Evaluation Report

| | | | | |
|---------------------------|----------------|------------------------|------------------|----------------------|
| Agency Name | | Agency Address | | |
| Establishment Name | Address | City | License # | |
| Person in Charge | | Inspection Type | | Risk Category |

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Check (✓) designated compliance status (IN, OUT, NO, NA) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN=in compliance **OUT**=not in compliance **NO**=not observed **NA**=not applicable

COS=corrected on-site during inspection **R**=repeat violation

| Compliance Status | | | | | COS | | R | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|--|--|--|--|--|--|---|--|--|---|--|---|--|--|---|--|--|--|--|---|--|--|--|--|--|--|--|--|--|
| IN OUT | | | | | Compliance Status | | | | | COS | | R | | | | | | | | | | | | | | | | | |
| Demonstration of Knowledge | | | | | IN OUT NA NO | | | | | Potentially Hazardous Food Time/Temperature | | | | | | | | | | | | | | | | | | | |
| 1 | | | | | Person in charge present, demonstrates knowledge, and performs duties | | | | | 16 | | | | | Proper cooking time & temperatures | | | | | | | | | | | | | | |
| Employee Health | | | | | 2 | | | | | Management awareness; policy present | | | | | 17 | | | | | Proper reheating procedures for hot holding | | | | | | | | | |
| 3 | | | | | Proper use of reporting, restriction & exclusion | | | | | Good Hygienic Practices | | | | | 18 | | | | | Proper cooling time & temperatures | | | | | | | | | |
| Good Hygienic Practices | | | | | 4 | | | | | Proper eating, tasting, drinking, or tobacco use | | | | | 19 | | | | | Proper hot holding temperatures | | | | | | | | | |
| 5 | | | | | No discharge from eyes, nose, and mouth | | | | | Preventing Contamination by Hands | | | | | 20 | | | | | Proper cold holding temperatures | | | | | | | | | |
| Preventing Contamination by Hands | | | | | 6 | | | | | Hands clean & properly washed | | | | | 21 | | | | | Proper date marking & disposition | | | | | | | | | |
| 7 | | | | | No bare hand contact with RTE foods or approved alternate method properly followed | | | | | Approved Source | | | | | 22 | | | | | Time as a public health control: procedures & record | | | | | | | | | |
| 8 | | | | | Adequate handwashing facilities supplied & accessible | | | | | Protection from Contamination | | | | | Consumer Advisory | | | | | | | | | | | | | | |
| Approved Source | | | | | 9 | | | | | Food obtained from approved source | | | | | 23 | | | | | Consumer advisory provided for raw or undercooked foods | | | | | | | | | |
| 10 | | | | | Food received at proper temperature | | | | | Highly Susceptible Populations | | | | | Chemical | | | | | | | | | | | | | | |
| 11 | | | | | Food in good condition, safe, & unadulterated | | | | | 12 | | | | | Required records available: shellstock tags, parasite destruction | | | | | 24 | | | | | Pasteurized foods used; prohibited foods not offered | | | | |
| Protection from Contamination | | | | | 13 | | | | | Food separated & protected | | | | | Conformance with Approved Procedures | | | | | | | | | | | | | | |
| 14 | | | | | Food-contact surfaces: cleaned & sanitized | | | | | 25 | | | | | Food additives: approved & properly used | | | | | 26 | | | | | Toxic substances properly identified, stored, & used | | | | |
| 15 | | | | | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | | | Risk factors are improper practices or procedures identified as the most common contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury. | | | | | 27 | | | | | Compliance with variance, specialized process, & HACCP plan | | | | | | | | | |

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

| Compliance Status | | | | | COS | | R | | | | | | | | | | | | |
|----------------------------------|--|--|--|--|---|--|---|--|--|---------------------------------|--|---|--|--|---|--|--|--|--|
| IN OUT NA NO | | | | | Compliance Status | | | | | COS | | R | | | | | | | |
| Safe Food and Water | | | | | IN OUT NA NO | | | | | Proper Use of Utensils | | | | | | | | | |
| 28 | | | | | Pasteurized eggs used where required | | | | | 41 | | | | | In-use utensils properly stored | | | | |
| 29 | | | | | Water & ice from approved source | | | | | 42 | | | | | Utensils, equip. & linens: stored, dried, handled | | | | |
| 30 | | | | | Variance obtained for specialized processing method | | | | | 43 | | | | | Single-use & single-serve articles: stored & used | | | | |
| Food Temperature Control | | | | | 31 | | | | | 44 | | | | | Gloves properly used | | | | |
| 32 | | | | | Proper cooling methods used | | | | | Utensils, Equipment and Vending | | | | | | | | | |
| 33 | | | | | Adequate equipment for temperature control | | | | | 45 | | | | | Food & non-food contact surfaces cleanable, properly designed, constructed & used | | | | |
| 34 | | | | | Plant food properly cooked for hot holding | | | | | 46 | | | | | Warewashing- installed, maintained & used; test strips | | | | |
| Food Identification | | | | | 35 | | | | | 47 | | | | | Non-food contact surfaces clean | | | | |
| 36 | | | | | Food properly labeled; original container | | | | | Physical Facilities | | | | | | | | | |
| Prevention of Food Contamination | | | | | 37 | | | | | 48 | | | | | Hot & cold water available, adequate pressure | | | | |
| 38 | | | | | Insects, rodents, animals absent | | | | | 49 | | | | | Plumbing installed; proper backflow devices | | | | |
| 39 | | | | | Contam. prevented during food prep., storage, display | | | | | 50 | | | | | Sewage & waste water properly disposed | | | | |
| 40 | | | | | Personal cleanliness | | | | | 51 | | | | | Toilet facilities: constructed, supplied, clean | | | | |
| | | | | | Wiping cloths: properly used & stored | | | | | 52 | | | | | Garbage/refuse properly disposed; fac. maintained | | | | |
| | | | | | Washing fruits & vegetables | | | | | 53 | | | | | Physical facilities installed, maintained & clean | | | | |
| | | | | | | | | | | 54 | | | | | Adeq. ventilation & lighting; designated areas used | | | | |

| | | |
|-------------------------------------|------------------------------|-------------|
| Person in Charge (Signature) | Inspector (Signature) | Date |
|-------------------------------------|------------------------------|-------------|

**Conference for Food Protection
2012 Issue Form**

**Internal Number: 005
Issue: 2012 II-037**

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|--------------------------------|-----------------------------|---------------------------|-----------------|
| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

HACCP Training

Issue you would like the Conference to consider:

The 2009 FDA Food Code allows establishments to obtain variances to the Code and under certain circumstances requires those establishments to submit Hazard Analysis Critical Control Point (HACCP) plans to the regulatory authority.

The preface to the 2009 Code states "Retail processors may be given the same opportunity as federally-regulated establishments to use innovative techniques in the production of safe foods. Retail establishments may apply to the regulatory authority for a variance to use a specific federal food safety performance standard for a product or a process in lieu of compliance with otherwise applicable specifications in the Food Code. However, to show compliance with the federal performance standard, the retail processor must, like a federally inspected establishment, show that processing controls are in place to ensure that the standard is being met. Thus, a request for a variance based on a federal performance standard must be supported by a validated HACCP plan with record-keeping and documented verification being made available to the regulatory authority."

However, in establishments that operate under federally mandated HACCP plans, the regulations that require the HACCP plan also require TRAINING. Retail establishments, operating under the food code, may attempt to submit a HACCP plan as part of a variance application; however, the Food Code contains no specific HACCP training requirement.

The current language in Section 2-102.11 of the Food Code, dealing with the Person in Charge (PIC) being able to demonstrate application of the HACCP principles, simply is not sufficient to prepare an individual to perform a hazard analysis, prepare a HACCP plan, or successfully implement a HACCP program.

Public Health Significance:

The Food Code allows regulatory authorities to grant variances to the Code and then requires the establishment to operate in a HACCP environment. The production of safe food cannot be assured if the operator does not understand the program.

The fact that a variance has been required shows that the process being used has more risk (because it would not be allowed without the special permission of a variance). When the HACCP plan is improperly followed, unsafe food may be the result.

Taking the logical step of requiring the operator to be trained in the food safety system that is being used at the establishment will help mitigate the risk of foodborne illness due to system failure.

Recommended Solution: The Conference recommends...:

that a letter be sent to the FDA requesting the agency to:

- Establish a HACCP Curriculum based on the 7 principles of Hazard Analysis and Critical Control Point principles developed by the National Advisory Committee on Microbiological Criteria for Foods. *or*
- Designate a national organization to establish the above curriculum, and
- amend the 2009 Food Code (as modified by the Supplement issued in 2011) as follows (new language shown with underline):

Section 2-102.30 Persons engaged in HACCP Plan Development and Application

A person responsible for developing a hazard analysis and HACCP plan and reviewing the HACCP records, must have successfully completed training in the application of HACCP principles.

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**Conference for Food Protection
2012 Issue Form**

**Internal Number: 070
Issue: 2012 II-038**

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| Council Recommendation: | Accepted as Submitted _____ | Accepted as Amended _____ | No Action _____ |
| Delegate Action: | Accepted _____ | Rejected _____ | |

All information above the line is for conference use only.

Title:

Support and Funding for Consumer Participation at the CFP

Issue you would like the Conference to consider:

The Conference for Food Protection plays an integral role in the development of the FDA Food Code. The cooperation and input of various stakeholders - including consumer, industry, and regulatory representatives - is crucial to the development of the Food Code, an important public health guidance document. Currently, consumer participation in the Conference is anemic, in part because of the financial cost of attending the Biennial Meeting. Consumer advocates represent customers at Food Code-regulated establishments and victims of foodborne illness, all of whom have an important stake in the decisions that are made at the Biennial Meeting. It is well-recognized that the input of these stakeholders is crucial to the development of sound public health policy, yet the current makeup of the Biennial Meeting does not reflect that contribution. Financial barriers to consumer participation must be recognized and mitigated. Without adequate consumer participation, both the credibility and the substance of the Food Code suffer.

Public Health Significance:

Consumer organizations can provide critical insight into consumer attitudes, beliefs, and interests, and are active participants in public policy and regulatory matters before federal, state, and local governments, and have made a significant impact in improving food safety.

Recommended Solution: The Conference recommends...:

That the Executive Board of the Conference for Food Protection, consider, approve, and manage a program to provide double-blind participant scholarships (created from industry and regulatory sources) to provide funding for consumer participants at CFP. A subcommittee of the Executive Board should be created to administer scholarships, with an organizing document that places paramount importance on increasing consumer representation to CFP. A minimum number of scholarships should be created for the next Biennial Meeting, with a goal toward increasing consumer participation each cycle. Scholarships should be adequate to cover the cost of transportation to and from the meeting, conference registration fees, lodging, and meals. Consumer representatives should be required to submit relevant 501-C3 status documentation, a statement of the

primary sources of organizational funding, and a mission statement to be eligible for a scholarship.

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