Conference for Food Protection
2010 Issue Form

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

All information above the line is for conference use only.

Title:
Report - NVEAIS Committee

Issue you would like the Conference to consider:
The CFP National Voluntary Environmental Assessment Information System (NVEAIS) Committee seeks Council II's acknowledgement of its committee report and requests that the committee members be thanked for their services and completed work.

Public Health Significance:
The public health significance of a NVEAIS would be to identify factors that can be routinely monitored by food safety programs to prevent or reduce the risk of foodborne outbreaks associated with food service establishments through the systematic collection, analysis, interpretation and dissemination of environmental data from foodborne disease outbreak investigations. In addition to its summary report, the NVEAIS Committee will submit an issue for consideration at the 2010 meeting of the Conference for Food Protection. The issue recommends that the OUTCOME statement of Standard 5 be amended to encourage regulatory programs to participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS).

Recommended Solution: The Conference recommends...:
acknowledgement of the National Voluntary Environmental Assessment Information System (NVEAIS) Committee Report, thanking the Committee members for completed work, and dissolving the committee.

Submitter Information:
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Committee
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Attachments:
- "NVEAIS Committee Final Report"
- "NVEAIS Committee Roster"
- "NVEAIS Survey Results Charge 1"
- "CDC NVEAIS Background Paper"
- "NVEAIS and CFP Support_Charge2"

*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: Report - National Voluntary Environmental Assessment Information System  
Council II  

DATE OF REPORT:  December 2, 2009

SUBMITTED BY: Ric Mathis, Committee Chair

COMMITTEE CHARGE(s):

Charge 1: Review the concept of a National Voluntary Environmental Assessment Information System (NVEAIS) as proposed in the attached CDC NVEAIS Background Paper  
Charge 2: Determine how a NVEAIS could be best supported by the Conference for Food Protection.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

Charge 1) Review the concept of a NVEAIS as proposed in the attached CDC NVEAIS Background Paper

The committee reviewed the concept of NVEAIS via teleconference, a web-based live meeting, and a face to face meeting. The following is the results of these meeting:

(a) a brief description of a NVEAIS was developed as follows:
The NVEAIS is a detailed environmental assessment database that seeks to identify factors that can be routinely monitored by food safety programs to prevent or reduce the risk for foodborne outbreaks associated with food service establishments.

This system recognizes that although much has been done to focus inspection activities within a hazard surveillance framework, many food control authorities do not have the information necessary from foodborne outbreak investigations to understand the context of reported contributing factors or the food vehicles involved. This process elicits the critical thinking skills necessary to describe exposure events by focusing on the food flow and the performance of an environmental assessment, which integrates contributing factors (what happened) with environmental antecedents (why it happened). The NVEAIS will:

• provide a detailed characterization of food vehicles and monitor food vehicle trends;
• identify and monitor contributing factors and their environmental antecedents;
• establish the basis for hypothesis generation regarding factors that may support foodborne outbreak events; and
• guide the planning, implementation and evaluation of food safety programs.

Once fully developed, the data gathered into the system seeks to provide local jurisdictions with the ability to monitor the effectiveness of control and intervention measures and allow state regulatory jurisdictions the ability to demonstrate the need for food safety programs and resources and the allocation of those resources.
(b) a survey was developed to determine usefulness of a NVEAIS to food safety programs, the feasibility of reporting environmental assessment data to CDC by food safety programs, and the acceptability of a NVEAIS by food safety program managers. The results of the survey are contained in the Attachment 1 titled NVEAIS Survey Results Charge 1

The survey results, which are based on the responses of seven of the nine State EHS-Net Food Coordinators and other deliberations, allowed the NVEAIS committee to conclude that:

1. NVEAIS is useful to food safety programs.
2. NVEAIS is a feasible mechanism for reporting environmental assessment data to CDC.
3. NVEAIS is an acceptable tool for investigating foodborne disease outbreaks on the state level and has the potential to be a valuable resource in foodborne outbreak investigation training for local health departments.

**Charge 2)** determine how a NVEAIS could be best supported by the Conference for Food Protection

In addressing this charge, the committee explored:

(a) the appropriateness of an amendment to Standard 5, Foodborne Illness and Food security Preparedness and Response and,

(b) the development of a recommendation and/or issue for the 2010 CFP Biennial Meeting

The committee concluded that instead of incorporating into the Program Standards (FDA Voluntary Retail Food Regulatory Program Standards) criteria, an issue will be submitted that proposes adding the following additional language (indicated in underline format) be included in the Standard 5 OUTCOME Section:

A food regulatory program has a systematic approach for the detection, investigation, response, documentation, and analysis of alleged food-related incidents that involve illness, injury, unintentional, or deliberate food contamination.

Regulatory programs are encouraged to also participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). NVEAIS is designed to provide a more comprehensive approach to foodborne disease outbreak investigation and response and will provide a data source to measure the impact of food safety programs to further research and understand foodborne illness causes and prevention. (The following link provides additional information regarding NVEAIS: http://www.cdc.gov/nceh/ehs/.)

See Attachment 2 titled: NVEAIS and CFP Support Charge 2

**REQUESTED ACTION:** The NVEAIS committee will submit two (2) issues at the 2010 Conference based on the recommendations of the committee. The issues are:

1. Report - Acknowledgement of the National Voluntary Environmental Assessment Information System (NVEAIS) Committee
2. Amend OUTCOME Section of Program Standards #5

**Attachment:**
ATTACHMENT #1 NVEAIS Survey Results Charge 1
ATTACHMENT #2 NVEAIS and CFP Support Charge 2
CDC NVEAIS Background Paper
NVEAIS Committee Roster
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<th>Constituency</th>
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<td>Achilles</td>
<td>Tesann</td>
<td>Member</td>
<td>local repres</td>
<td>Maricopa County Env. Services Dept</td>
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<td>Phoenix</td>
<td>AZ</td>
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1/7/2010
As a result of the April 2009 Conference for Food Protection (CFP) National Voluntary Environmental Assessment Information System (NVEAIS) Committee meeting in Atlanta, GA, a subcommittee was formed to survey the EHS-Net Food Coordinators regarding their thoughts on the EHS-Net Outbreak Study tool. EHS-Net is a collaborative forum of environmental health specialists whose mission is to improve environmental health. These specialists collaborate with epidemiologists and laboratorians to identify and prevent environmental factors contributing to foodborne and waterborne illness and disease outbreaks. EHS-Net assists State Health Departments in their efforts to improve the practice of environmental health service programs. This is accomplished by identifying environmental antecedents (underlying factors) to illness and disease outbreaks, translating findings into improved prevention efforts using a systems-based approach, offering training opportunities to current and future environmental health specialists and by strengthening the relations among epidemiology, laboratory, and environmental health programs.

The NVEAIS is being proposed as a voluntary program to augment the EHS-Net Outbreak Study which is part of the current Foodborne Disease Outbreak Surveillance System maintained by the Centers for Disease Control and Prevention (CDC) to strengthen the role of food safety authorities in foodborne disease outbreak surveillance and in turn, CDC’s ability to support their foodborne disease prevention and control efforts. The purpose of a NVEAIS would be to identify factors that can be routinely monitored by food safety programs to prevent or reduce the risk of foodborne outbreaks associated with foodservice establishments through the systematic collection, analysis, interpretation and dissemination of environmental data from foodborne disease outbreak investigations.

The purpose of the subcommittee was to determine the opinion of the EHS-Net Food Coordinators regarding their view of the Outbreak Study and if it is useful, feasible and acceptable. This very select group was chosen as our study experience for several reasons. EHS-Net Food Coordinators across nine States have been coordinating the collection of environmental data for foodborne outbreaks within their State for several years. They have multiple years of experience with collecting environmental data both prior to and during the existence of the Outbreak Study, and therefore would have the best opinion on whether or not the Outbreak Study is useful, feasible and acceptable. Other States were not solicited with this survey since they do not have experience using the Outbreak Study.

Seven of the nine EHS-Net Food Coordinators responded to our survey giving us a 78% response rate. Below each survey question is a summary of the responses received by the EHS-Net Food Coordinators.

Results:

1. Who conducts the EHS-Net Outbreak Study in your State?

   EHS-Net Food Coordinator 6/7 = 86%
   State Health Department Staff 4/7 = 57%
   Local Health Department Staff 3/7 = 43%
2. Is the EHS-Net Outbreak Study accepted as an addition to foodborne outbreak investigations by your Food Safety Program Manager(s)?

Yes 4/7 = 57%
No 1/7 = 14%
I Don’t Know 2/7 = 29%

For the States which replied ‘No’ and ‘I don’t know’, one has very limited experience with the Outbreak Study and did not feel they could sufficiently answer the question. The other States felt the Outbreak Study adds an extra burden of work for the Local Health Department; and in one State, the State Food Program has no involvement with foodborne outbreak investigations. However, these concerns were not expressed by the majority of the States who responded. The majority found this study as an accepted addition to their Food Safety Program. Therefore, the NVEAIS committee would recommend this as acceptable to Food Safety Program Managers.

3. Is the EHS-Net Outbreak Study a useful or worthwhile undertaking?

Yes 6/7 = 86%
No 1/7 = 14%

One State replied ‘No’ and stated the EHS-Net data collected does not show anything. In their opinion, the data collected doesn’t seem to add any more valuable information on top of what is collected by electronic Foodborne Outbreak Reporting System (eFORS)/National Outbreak Reporting System (NORS). The outbreak study tool would be more useful if tailored to specific suspected outbreak etiologies and it appears torn between functioning as a research data collection instrument and as a tool to be used during outbreak investigations, without doing either one very well. However, these concerns were not expressed by any of the other States which responded. 86% felt the Outbreak Study is a very useful and worthwhile undertaking. A review of the Outbreak Study and the NORS form by the NVEAIS committee identified many significant differences between the data collected for the Outbreak Study and the NORS form. Given these results, the NVEAIS committee would recommend this is a useful tool for food safety programs to identify and report other environmental antecedents to foodborne outbreaks which are not reported to CDC via NORS or other reporting systems. The majority of the States stated the Outbreak Study is worth the time it takes to conduct because the data collected illustrates the factors leading up to a foodborne disease outbreak.

4. Has your State experienced any significant roadblocks in conducting the EHS-Net Outbreak Study?

Yes 2/7 = 29%
No 5/7 = 71%

The two States which reported experiencing roadblocks both described miscommunication issues and needs for improving communication amongst Epidemiology and Environmental Health staff and between Local and State offices. These issues are seen throughout the Nation, whether or not the Outbreak Study is used, and are routine issues which are part of the nature of investigating outbreaks. The majority of the States interviewed (71%) did not experience any roadblocks; therefore the NVEAIS committee would recommend this as being both a feasible and useful tool.
5. Has your State experienced any significant roadblocks entering data or working with the EHS-Net Information System in reporting data to CDC?

Yes 0/7 = 0%
No 7/7 = 100%

No States reported any significant roadblocks in entering the data or working with the EHS-Net Information System in reporting data to CDC. Therefore, the NVEAIS committee would recommend that it is feasible for food safety programs to report environmental assessment data to CDC.

6. If EHS-Net Outbreak Studies are conducted by Local Health Department staff, is the Local Health Department compensated for conducting the studies?

Some sort of Compensation 3/3 = 100%
Monetary Compensation 2/3 = 67%
Provided with field supplies 2/3 = 67%

The three States which use Local Health Department staff to conduct EHS-Net outbreak studies provide the Local Health Departments with some sort of compensation. Further discussion with these three States emphasized that the compensation is minimal. Based on their responses, and overall that NVEAIS will be a voluntary system, the NVEAIS committee recommends this as being feasible as a reporting system.

7. If Local Health Departments are compensated for conducting EHS-Net Outbreak Studies in your State, do you think conducting the studies would be possible without compensation?

Yes 2/3 = 67%
No 1/3 = 33%

For the three States which do provide the Local Health Department's with some sort of compensation to conduct the EHS-Net Outbreak Study, two of them feel that the Local Health Department can conduct it without any additional compensation and one State felt this was not possible. Since the majority of the States who provide compensation feel this study can be conducted by Local Health Department offices without any additional compensation, the NVEAIS committee recommends that it is feasible for food safety programs to collect and report environmental assessment data to CDC without receiving any additional compensation.

8. Were there any hurdles you had to overcome initially before using the new form for Foodborne Outbreak Investigations?

No 6/7 = 86%
Required additional Environmental Health and Epidemiology Training 1/7 = 14%

Only one State reported a hurdle to overcome before using the Outbreak Study tool; however this hurdle was a benefit to their program. According this EHS-Net Food Safety Coordinator, the Outbreak Study allowed them to cross train both Epidemiology and Environmental Health staff to better investigate foodborne disease outbreaks. The majority of other States stated the Outbreak Study did not provide them with any hurdles to overcome, therefore the NVEAIS committee recommends this study is acceptable, feasible and useful for food safety programs to use as part of their routine foodborne disease outbreak investigations.
9. Do you think other States would be able to conduct the EHS-Net Outbreak Study without receiving any additional compensation?

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<td>No</td>
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The majority (57%) of respondents believe the EHS-Net Outbreak Study can be completed by other states without additional compensation. The majority of these respondents stated that the information collected for the EHS-Net Outbreak Study is virtually the same as what would be collected as part of the outbreak investigation itself, and so the only additional work is that of filling out the Study form which, in and of itself, should not require additional compensation. One ‘yes’ respondent also stated that the Outbreak Study improved outbreak investigation techniques, and is therefore providing a service to the states, rather than acting as a burden. The one respondent who answered ‘No’ stated that because many states are already lacking sufficient state and Local Health Department staff, it would be difficult to expect what personnel resources they currently have to take on the task of conducting the EHS-Net Outbreak Study. Of the two respondents who answered ‘Don’t Know,’ one stated that without additional compensation, there wasn’t much incentive to conduct the Study. The other ‘Don’t Know,’ respondent stated that their state was fairly well-funded, so for them funding wasn’t a big issue, but they were concerned that in a state lacking sufficient funding, the Outbreak Study might be too much of a burden to complete. Based on these responses, the NVEAIS committee recommends this study is acceptable, feasible and useful for food safety managers to incorporate into their programs without receiving any additional compensation.

10. Do you think other States would require additional training for personnel conducting the EHS-Net Outbreak Study?

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Respondents overwhelmingly answered that they believe additional training is needed for personnel conducting the EHS-Net Outbreak Study. Specific areas of training that were suggested include:

- Basics of foodborne disease outbreak investigation
- Communication and cooperative work skills
- Intent of, purpose of, interpretation of, and data entry for the Outbreak Study itself
- Illustrations of the benefit of using the Outbreak Study instrument in an outbreak investigation, and for the long-term data findings
- Identification of contributing factors

Since this training will be made available by CDC to all State and Local Health Department Officials free of charge if they participate in NVEAIS, the NVEAIS committee recommends this study is acceptable, feasible and useful for food safety managers to incorporate into their programs.
11. Do you think additional personnel, other than the inspector of the facility, will be required to complete the EHS-Net Outbreak Study?

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<td>Yes</td>
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<td>No</td>
<td>3/7 = 43%</td>
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This question was answered approximately 50/50, with a majority (57%) answering ‘Yes,’ and 43% answering ‘No.’ One of the respondents, who answered ‘No,’ stated that the data collection in the field could be completed without additional personnel, but that the data entry and analysis would require the help of additional personnel. Of those that answered ‘Yes,’ the tasks suggested for additional personnel to perform include limiting the personnel to Environmental Health personnel only to minimize inconsistency, as well as having additional personnel whose sole responsibility is data entry and analysis, leaving the data collection to a separate person/group of people. Additionally, one respondent who indicated additional personnel would be required stated that epidemiologists working together with environmental health specialists were the best way to conduct the EHS-Net Outbreak Study, as different components of the Study would be best filled out by the specialists in their respective fields. The NVEAIS committee sees the team approach between Epidemiology, Environmental Health and the Laboratory as the best approach to conduct foodborne disease outbreak investigations. Based on the responses, the NVEAIS committee recommends this study to be acceptable, feasible and useful.

12. Is it feasible for the inspector of the facility who conducts the EHS-Net Outbreak Study to also perform data entry for the Study?

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The majority (72%) of respondents answered that it was feasible in their state for the inspector who conducts the EHS-Net Outbreak Study to also perform data entry for the Study. One person who answered ‘Yes,’ also added that while it is feasible, they did not believe the inspector was the best person to data enter as they believe the instrument collects information beyond the data collected in the establishment by the inspector. One respondent answered ‘No,’ to this question, stating that they believed the workload associated with inspecting an establishment after an outbreak, as well as collecting and reporting the data for the Outbreak Study is too much of a burden. One respondent answered ‘Don’t Know,’ to this question, stating that their experience showed that the best person to conduct the EHS-Net Outbreak Study is someone who is part of EHS-Net, not necessarily the inspector of the facility. Since the goal of the NVEAIS committee is to expand the use of the Outbreak Study outside of EHS-Net and provide free training to the staff who will be using this tool, the NVEAIS committee recommends this study to be feasible for Local Health Departments to conduct and report the data to CDC in the best method which would be even more feasible for them.

Based on the responses of seven of the nine State EHS-Net Food Coordinators, the NVEAIS committee has concluded that:

1. NVEAIS is useful to food safety programs.
2. NVEAIS is a feasible mechanism for reporting environmental assessment data to CDC
3. NVEAIS is an acceptable tool for investigating foodborne disease outbreaks on the state level and has the potential to be a valuable resource in foodborne outbreak investigation training for Local Health Departments.
Draft National Voluntary Environmental Assessment Information System: Strengthening the Role of Food-Safety Programs in Foodborne Disease Surveillance

Abstract

This document proposes and describes a national information system of environmental factors to foodborne outbreaks for review and comment by technical experts. Many information systems used to support public health surveillance activities were developed for other purposes. Food-control authorities who manage retail foodservice regulatory programs are uniquely positioned to develop and use an information system of environmental factors to foodborne outbreaks that can identify environmental factors that can be monitored by food-control authorities to prevent or reduce the risk for foodborne illness outbreaks. Such a system can also support the existing foodborne disease outbreak surveillance system in the United States. If designed using the framework of public health surveillance systems as a model, such an information system could provide a more holistic view of foodborne disease outbreaks and provide a critical data source needed to begin to measure the impact of food-safety programs.
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Introduction

Background
With an estimated 76 million illnesses, 325,000 hospitalizations, and 5,000 deaths in the United States each year, foodborne illness is a significant public health issue (Mead et al. 1999). In addition to the number of illnesses, hospitalizations, and deaths caused by foodborne disease, the annual cost for six foodborne bacterial pathogens has been estimated as $6.7 billion (Buzby et al. 1996).

A review of foodborne outbreaks occurring in 1998 and 1999 in the seven states participating in active foodborne disease surveillance through the Foodborne Disease Active Surveillance Network (FoodNet) revealed that 66% (222 of 336 outbreaks) were associated with restaurants and an additional 9% (30 outbreaks) were associated with catered events (Jones et al. 2004a). A number of case control studies involving sporadic foodborne disease cases have found that people with foodborne illness were more likely to have eaten outside the home, specifically in restaurants or other commercial foodservice establishments, than were non-ill controls (Friedman et al. 2004;(Hennessy T 1998); Kassenborg et al. 1998, 2004; Kimura et al. 2004). Reviews of foodborne outbreaks reveal that factors identified as contributing to those outbreaks include factors found in commercial foodservice establishments (e.g., poor personal hygiene, time/temperature abuse of foods) (Bryan 1978, 1988).

According to the 2008 National Restaurant Association (NRA) industry overview, 945,000 restaurant locations will have more than 70 billion meal and snack occasions (National
In the United States, 44% of adults eat at a restaurant on a typical day (Jones et al. 2004). Although foodborne disease can be linked to many other points of final service—for example, the home—food handling policies and practices in restaurants and other commercial foodservice establishments provide the greatest opportunity to affect a larger number of people. Given the potential impact of poor policies or practices in commercial foodservice establishments and the findings from the studies described previously, commercial foodservice establishments play an important role in the epidemiology of foodborne disease.

**Food-Safety Programs for Commercial Foodservice**

Approximately 75 state and territorial agencies and approximately 3,000 local agencies assume the primary responsibility for preventing foodborne illness and licensing and inspecting retail foodservice establishments (Food and Drug Administration [FDA] 2005a). These establishments include restaurants, delicatessens, quick-service establishments, institutional food service (e.g., schools, daycare centers, hospitals), and temporary foodservice establishments (e.g., fairs, festivals). These food-safety programs collect data through their inspection programs; most aspects and uses of those data, such as frequency of collection, collection methods, and any regulatory action taken, are mandated by local or state statutes. These statutes or food codes are often based on a federal recommended model developed by the U.S. Food and Drug Administration (FDA) called Food Code (FC). The FC is developed using a collaborative process involving all stakeholders (local, state, tribal, territorial, federal, industry, consumer groups) through the Conference for Food Protection (CFP). Through the CFP, representatives from all stakeholder groups meet once every other year to consider and develop recommendations to the FDA with regard to FC content. Local, state, territorial, tribal, and federal agencies recognize the FC as the standard for regulatory requirements and although food-
safety programs may not adopt the FC in its entirety, much of it is adopted or incorporated into food-safety programs in one form or another across the United States.

FDA and CFP members use many sources to develop the FC. Various epidemiologic data sources including foodborne outbreak investigations provide the basis for recommendations found in the FC. For instance, because foodborne outbreak investigations have repeatedly identified five major factors related to employee behavior and preparation practices in retail establishments, FDA developed control measures for the FC to address each of these factors (Food and Drug Administration [FDA] 2005a):

- improper holding temperatures,
- inadequate or undercooking,
- contaminated equipment,
- food from unsafe sources,
- poor personal hygiene

In addition to these control measures, FDA developed five key public health interventions to protect consumer health (Food and Drug Administration [FDA] 2005a):

- demonstration of knowledge,
- employee health controls,
- controlling hands as a vehicle of contamination,
- time and temperature parameters for controlling pathogens, and
- consumer advisory (for hygiene).
Food-control authorities who focus inspections on implementation of these control measures and public health interventions refer to their inspections as Hazard Analysis Critical Control Point (HACCP) inspections. Using factors that contribute to foodborne outbreaks to develop control and intervention measures and then targeting inspection focus toward implementation of these measures is the basis for one type of foodborne disease surveillance called hazard surveillance (Guzewich et al. 1997). During 2001, more than 2.5 million inspections of food establishments were conducted by state food safety programs (Smoak 2005). These inspections are based, at least to some degree, on FC control measures and intervention strategies.

Food-control authorities have a regulatory and public health mandate to prevent diseases that can be transmitted through food. This task is enormous because more than 200 known diseases are transmitted through food—causes include viruses, bacteria, parasites, toxins, metals, and prions—and the health impacts range from a mild inconvenience to death (Mead et al. 1999). The 2007 FDA Food Protection Plan outlines the increasing complexities associated with the food supply; although the plan outlines FDA’s challenges in assuring the safety of the food supply, the same challenges are reflected at the local and state levels (Food and Drug Administration [FDA] 2007). Challenges for food-control authorities’ at all governmental levels include

- an aging population that is more susceptible to foodborne illness,
- increased production and consumption of convenience foods,
- a shift from eating locally grown foods to eating foods grown across the globe, and
- additions to an ever-increasing list of diseases known to be transmitted by food.
Like all environmental public health service programs, food-safety programs exist within a public health framework that is often referred to as fragmented. For food-safety programs, this fragmentation begins with the organizational structure for food safety in this country. Food-safety responsibilities do not reside with a single agency at any government level but are scattered across a variety of federal, state, and local regulatory agencies that are often criticized for not adequately assuring the safety of the nation’s food supply. From the public health perspective, the most troubling challenge for food-control authorities is the fact that “public health surveillance and outbreak investigation programs have evolved independently from food safety programs, and current human health statistics address the questions of communicable disease control officials better than the questions of food control authorities” (International Commission on Microbiological Specifications for Foods [ICMSF] 2006).

Surveillance is the critical first step in the cycle of public health prevention (Allos et al. 2004).

**Foodborne Disease Surveillance**

In a four-part series of articles on foodborne disease surveillance, Guzewich, Bryan, and Todd (Bryan et al. 1997a, 1997b; Guzewich et al. 1997; Todd et al. 1997)

- describe the purpose and types of surveillance systems and networks
- summarize and present descriptive data and epidemiologic patterns,
- summarize and present data on vehicles and contributory factors, and
- describe dissemination and uses of surveillance data.
Medical and scientific literature provides little information or guidance on developing foodborne disease surveillance systems, improving presentation of tabular data, or using the data to improve food-safety programs (Guzewich et al. 1997). This series of articles on surveillance helped fill that void with an emphasis on the data to collect, its review and inclusion in a surveillance dataset, its presentation, and how it can be used to improve food-safety programs.

In the first article of the series, Guzewich et al. (1997) describes at least four types of foodborne disease surveillance—reports of incidents (includes outbreaks), laboratory isolation of pathogens from human beings, sentinel community studies, and hazard surveillance—all of which are currently under way in the United States in some form (Figure 1).

The Centers for Disease Control and Prevention (CDC) conducts surveillance of food-related diseases through 20 systems. Three of those systems are the key pillars of foodborne disease surveillance in the United States:

- **Foodborne Disease Outbreak Surveillance System (FDOSS)**: Data from foodborne disease outbreaks (FBDOs; defined as the occurrence of two or more cases of a similar illness resulting from the ingestion of a food in common) are reported through FDOSS to CDC by state, local, and territorial health departments (Lynch et al. 2006).
• FoodNet: FoodNet conducts active surveillance for seven bacterial and two parasitic diseases to determine more precisely the frequency and severity of foodborne diseases in the United States, monitor trends in specific foodborne diseases, and determine the proportion of foodborne disease attributable to specific foods (Allos et al. 2004). FoodNet is a collaborative effort by CDC’s Emerging Infections Program, U.S. Department of Agriculture’s (USDA’s) Food Safety Inspection Service, FDA, and nine state health departments.

• PulseNet: PulseNet is a network of laboratories that are able to identify and electronically share genetic DNA fingerprints of specific pathogens, enhancing the ability to detect, investigate, and control geographically distant yet related foodborne outbreaks (MMWR 1999). PulseNet supports the activities of both FoodNet and FDOSS.

Independently as well as collectively, these surveillance systems have provided guidance to food safety programs in their foodborne disease prevention efforts. For instance, these surveillance systems have played a role in identifying healthy food animals as reservoirs of foodborne pathogens, linking apparently unrelated illnesses with specific food vehicles, and identifying food vehicles previously unassociated with foodborne illness (MMWR 1999). These systems also represent three of the four types of foodborne disease surveillance systems as described by Guzewich et al (1997): reports of incidence (outbreaks), laboratory isolation of pathogens from human beings, and sentinel community studies.

The fourth type of foodborne disease surveillance, hazard surveillance, is the assessment of the occurrence of, distribution of, and secular trends in the prevalence of hazards (e.g., toxic
chemical agents, physical agents, biomechanical stressors, and biologic agents) responsible for disease and injury (Guzewich et al. 1997). Although the authors stated that hazard surveillance is not commonly practiced for foodborne disease concerns, they concluded that it is suited for that purpose. At about the same time the four-part series of articles was written in 1997 (Bryan et al. 1997a, 1997b; Guzewich et al. 1997; Todd et al. 1997), food-safety control authorities had been in the midst of a shift from inspections based on general sanitation (a focus on cleanliness of floors, walls, and ceilings) to a focus on factors that have been previously associated with foodborne outbreaks, such as time/temperature abuse of foods and employee health. These factors are referred to collectively as contributing factors.

Today, as a result of FDA’s leadership through the CFP, the FC, the National Voluntary Retail Food Regulatory Program Standards, FDA’s periodic reports on the occurrence of foodborne illness risk factors, and the individual independent initiative of food- control authorities, the inspection focus of many food-safety programs has moved from basic sanitation to contributing factor-based inspections of foodservice establishments. Although this shift to contributing factor-based inspections is not by any means uniform across all food-safety programs, it does represent a significant step toward laying the ground work for a national hazard surveillance system of factors linked to foodborne outbreaks. In fact, a CFP committee was formed to explore electronic data capture and sharing of data from state and local inspection programs. The committee’s 2007 report to the CFP Executive Board revealed that approximately 74% of those responding to a survey of potential participants expressed some level of willingness to participate in sharing inspection data (Cannon and Lancaster 2007). If a data sharing arrangement evolves from this committee’s work, it could be a precursor to a national hazard surveillance system that could be
used along with other epidemiologic data sources to measure the impact of food-safety programs on foodborne disease (International Commission on Microbiological Specifications for Foods [ICMSF] 2006).

**Foodborne Disease Outbreak Surveillance**

In 2006, the International Commission on Microbiological Specifications for Foods (ICMSF) published a position paper to describe epidemiologic data that are useful for evaluating the public health impact of food safety control programs and to identify how epidemiologic data can be used in the evaluative process (International Commission on Microbiological Specifications for Foods [ICMSF] 2006). The position paper states that the collection, synthesis, and analysis of data from a variety of sources are required to evaluate food-safety control programs. Foodborne outbreak investigations are one of those sources. One of the key elements of foodborne outbreak investigations is to identify the suspect food and factors that contribute to foodborne transmission of specific pathogens. According to the position paper, these data elements are infrequently determined by human disease surveillance systems, and they are critical for food-safety program evaluation.

Since 1973, CDC has maintained FDOSS for collection and periodic reporting of data on the occurrence and causes of FBDOs in the United States (Lynch et al. 2006). This surveillance system represents an important source for information on foodborne outbreak investigations in the United States and it includes information on identified food vehicles and contributing factors. Data from this public health surveillance system influenced FDA’s development of control measures and intervention strategies for the FC. Until 1999, contributing factor data reported to CDC were reported in the five categories described earlier (improper holding temperatures,
inadequate or undercooking, contaminated equipment, food from unsafe sources, and poor personal hygiene; an ‘other’ category was also included). In October 1999, CDC revised the outbreak reporting form, expanding the range of food items, places, and contributing factors that could be reported (Lynch et al. 2006). There have been other efforts to improve FDOSS; for instance, beginning in 2001, foodborne outbreak reports could be submitted to CDC electronically (Lynch et al. 2006). The surveillance summary for 1998-2002 noted a substantial increase in the average annual number of outbreaks reported during that time period (Lynch et al. 2006). Although the majority (67%) of reports did not note an etiology, the proportion of outbreaks for which an etiology was determined increased during the reporting period from 28% in 1998 to 37% in 2002 (Lynch et al. 2006). Even with these improvements, in many of the FBDOs reported, the factors most important to food-safety programs, such as the implicated food vehicle or the factors that may have contributed to the outbreak, are missing or incomplete (Lynch et al. 2006).

Food-control officials are faced with a challenging mission, as are state and federal officials involved with foodborne outbreak surveillance. Two basic challenges for CDC are the fact that not all foodborne outbreaks are reported to CDC and balancing between the needs of FDOSS data users and the practical aspects of reporting.

The contributing factor category of data reported to FDOSS is a good example of the difficult balance among user needs, identification of data to include, willingness of officials to report, and accuracy of officials’ reports. Before October 1999, contributing factor data was reported and summarized into five categories. Although the information was used by food-control authorities,
the broad categories did not fully meet their needs. The 1997 articles by Bryan et al., Guzewich et al., and Todd et al. (Bryan et al. 1997a, 1997b; Guzewich et al. 1997; Todd et al. 1997) framed foodborne disease surveillance systems in terms of the key end user—those charged with foodborne disease prevention. One article was devoted to data on vehicles and contributory factors and described the value and limitation of these data as well as how they can be summarized and presented (Bryan et al. 1997b). The article included a recommended list of specific contributing factors to be reported. CDC incorporated these contributing factors into the new FDOSS reporting form in October 1999. An additional factor, glove-handed contact by handler/worker/preparer, was added. Clearly this was an effort by FDOSS staff to try to meet the needs of data users.

With rare exception, communicable disease control officials or foodborne outbreak surveillance officials from state and local health departments report data into the FDOSS. They gather information on contributing factors in outbreaks from the environmental assessments conducted by food-control officials, from their own environmental assessments, or through some combination of the two. Although it may seem that the new contributing factors require little explanation, they are a sophisticated listing of factors based on the known microbiologic characteristics of and symptoms produced by specific pathogens, toxins, chemicals, etc., and historical associations between known pathogens, etc, and specific food vehicles. These factors, whether they are reported based on etiology identification or vehicle identification—or both—cannot be identified via a food-safety program inspection as conducted on a day-to-day basis by food-control authorities. The process of identifying contributing factors has to be driven by first describing what and how events likely unfolded, rather than by identifying regulation violations.
Failures to implement regulatory requirements will come to light over the course of this process. Unfortunately, many food-control authorities fail to adjust their day-to-day regulatory inspection process to adequately conduct an environmental assessment in the course of a foodborne outbreak investigation; therefore, contributing factors are not adequately assessed and reported.

Although CDC adjusted the FDOSS reporting form to address the needs of system users with regard to contributing factor data, the change is not without controversy among those who report and use this information. There are questions about whether food-control authorities have the expertise to accurately identify the most likely contributing factors from among the now complicated list of factors. Some believe the contributing factor list is too complex for a surveillance system and should be removed in its entirety or returned to the pre-1999 abbreviated list.

A brief review of the contributing factors reported in the 1998-2002 foodborne outbreak surveillance summary by Lynch et al. (2006) provides a glimpse of the concerns regarding contributing factor data. According to this summary, 657 norovirus outbreaks were identified and reported to CDC from 1998 to 2002. When contributing factors were reported, contamination factors were identified in 312 outbreaks, proliferation factors were reported in 28 outbreaks, and survival factors were reported in 319 outbreaks. People are the only known reservoir for Norwalk virus (norovirus) (Benenson 1995). Its mode of transmission is fecal-oral; the most likely factors contributing to norovirus outbreaks are infected persons touching ready-to-eat foods; shellfish harvested from sewage polluted waters; inadequate sewage disposal; and use of

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1 More than one contributing factor can be reported in any one outbreak. Contamination factors introduce or otherwise permit contamination. Proliferation factors allow proliferation of etiologic agents. Survival factors can allow survival of contaminants.
contaminated water (International Association for Food Protection [IAFP] 1999). Norovirus can be best prevented by using hygienic measures applicable to diseases transmitted via fecal-oral route and cooking foods that might be contaminated (e.g., raw shellfish harvested from contaminated water) (Benenson 1995). Contamination factors should be the most likely category of contributing factors to be noted in a norovirus outbreak; survival factors are possible contributing factors in some instances. Proliferation factors are not a contributing factor in a norovirus outbreak, yet proliferation factors were reported in 28 outbreaks. In addition, it is curious that more survival factors are reported than contamination factors for these norovirus outbreaks. This raises significant questions about the validity of the contributing factor data reported through FDOSS.

In addition to the challenge of balancing needs of users with reporting, FBDOs recognized and investigated by state and local food-control authorities are not all reflected in FDOSS. A 2002 survey conducted by the Association of Food and Drug Officials (AFDO) revealed that during 2001, state food-safety programs performed more than 3,000 foodborne illness investigations and investigated 46,000 consumer complaints (Smoak 2005). The AFDO report does not define foodborne illness investigations as foodborne outbreaks; however, only 1,243 foodborne outbreaks were reported to CDC for this time period (Lynch et al. 2006). A December 2006 report on food safety by the Center for Science in the Public Interest notes that 9% of outbreaks included in its report came from sources other than CDC (De Waal et al. 2006). Higgins reported that the state of Colorado did not report any cases of foodborne disease in 1986 and 1987, yet a review of records from six county health departments in Colorado revealed 52 possible foodborne outbreaks in 1986 and 67 in 1987 (Higgins 1994). Some of the local reports of these
possible outbreaks included information such as laboratory confirmation of pathogens and fairly complete epidemiologic information. Higgins found that local food-safety programs only reported possible foodborne outbreak events to state public health agencies when the events seemed ‘significant.’ Although this review took place in the early 1990s using data that is now 20 years old, it is not unlikely that the same scenario is playing out nationally in some form even today.

**Hazard Surveillance**

In addition to foodborne disease outbreak surveillance, hazard surveillance is considered part of the overall foodborne disease surveillance system. Current hazard surveillance activities conducted by food-control authorities in the form of HACCP inspections are often frustrating because violations and repeat violations frequently occur in the same establishments. For example, the 2004 FDA report (Food and Drug Administration [FDA] 2004) on the occurrence of foodborne illness risk factors identified poor personal hygiene in 31% of the agency’s personal hygiene observations in fast food restaurants and almost 42% of its observations in full-service restaurants. Improper holding and time/temperature abuse was noted in almost 64% of observations of these events in full-service restaurants and almost 42% in fast food restaurants. In a review of 4,044 restaurant inspection records from 31 counties in Oklahoma, Phillips reported that repeat violations of the food-safety regulations accounted for about half of all violations recorded (Phillips et al. 2006).

The self-reported food-handling practices of foodservice workers also indicates that lapses in safe food handling practices are not infrequent events. In one study (Green et al. 2005), 60% of workers reported not wearing gloves when handling ready to eat foods. They also reported not
always washing their hands (23%), not always changing their gloves between handling raw meat and ready to eat food (33%), not using thermometers to check food temperatures (53%), and working while sick with vomiting or diarrhea (5%).

Although unsafe food-handling practices are frequent occurrences acknowledged by foodservice workers and food-control authorities identify and record them repeatedly, little if any context for these practices exists in inspection reports. Higgins states that food-safety violations or lapses exist within the very complex system a restaurant or other foodservice establishment represents. He suggests violations must be understood within the context of the system before sustainable changes in the implementation of basic prevention measures can be achieved (Higgins and Hartfield 2004).

In Buchholz’s effort to identify restaurant characteristics that may be more likely to be associated with foodborne incident reporting in Los Angeles County, California, one study limitation included lack of information concerning the restaurant (e.g., number of meals served per day, menu complexity, preparation of meals for multiday use, egg-pooling practices, type of ownership, ethnicity of cuisine, and presence of a certified food handler on the shift) (Buchholz, Run et al. 2002). Thus, although inspection programs may focus on contributing factors, they must also record some context of their occurrence. The same is true of the environmental assessment conducted during foodborne outbreak investigations. Identification of one or two contributing factors, their occurrence lifted out of context, helps form a cycle of prevention activities that may or may not hit the foodborne disease prevention mark.

Problem
Foodborne disease surveillance is an essential component of a food safety program (Todd et al. 1997). Surveillance information is used to determine the need for food-safety actions, which involves planning and implementing programs and assessing the effectiveness of the actions taken (Todd et al. 1997). Hazard surveillance and foodborne outbreak investigations are two components of the foodborne disease surveillance system where food safety programs have a significant role. Although much has been done to focus their inspection activities within a hazard surveillance framework, food control authorities do not have the information necessary from foodborne outbreak investigations to understand the context of reported contributing factors or the food vehicles involved.

CDC’s FDOSS is an excellent source of information on foodborne disease outbreaks, but it can only capture a small portion of the information on outbreaks that is required by food-control authorities to formulate food-safety actions. The entire burden of meeting the needs of food-control authorities for environmental data from foodborne outbreaks cannot rest on state and federal communicable disease control or foodborne outbreak investigation authorities alone. Food-control authorities responsible for food safety in foodservice establishments often do not take active roles in foodborne outbreak investigations; when they do; they focus on agent and vehicle identification over identification of contributing factors and their antecedents. Many think in terms of the five contributing factors to foodborne outbreaks and are not aware of the complex list of contributing factors now available for reporting purposes. Additionally, many have not received training on identifying contributing factors from outbreak environmental assessments. Even if they are trained and active in the environmental assessment of foodborne outbreak investigations, many food-control authorities have no way to capture information from
these investigations that will enable them to formulate food-safety action or measure food-safety program impact. If a system for capturing the data existed, most food-safety programs do not have the epidemiologic capacity to analyze, interpret, and present data collected and incorporate the information into the foodborne disease surveillance system that could support food-safety action or measurement of food-safety program impact.

According to a survey of CFP members, the number of food establishments a food safety program is responsible for ranges from 7 to 50,000, with a median of 600 (Cannon and Lancaster 2007). Foodborne outbreaks may not be recognized and investigated very often in any one food-safety program’s jurisdiction. Even if food-control authorities were trained and active in environmental assessments of foodborne outbreak investigations and had the necessary epidemiologic capacity, foodborne outbreak events for most programs do not happen often. Thus, the quantity of data needed for meaningful analysis and use at the local level is inadequate.

**Solution**

To address the need for detailed environmental assessment data from foodborne disease outbreaks, a national voluntary environmental assessment information system (NVEAIS) is proposed to operate in conjunction with the existing CDC Foodborne Disease Surveillance System. Two articles will be used as models to justify the addition of this information system to the public health arena and to describe its proposed operation and attributes: one article describes a national public health surveillance system and its specifications (Meriwether 1995) and the other describes the evaluation of public health surveillance systems (MMWR 2001).
The purpose of an NVEAIS would be to identify factors that can be routinely monitored by food-safety programs to prevent or reduce the risk for foodborne outbreaks associated with foodservice establishments. Proposed objectives of the NVEAIS are to

- establish a detailed characterization of food vehicles and monitor food vehicle trends;
- identify and monitor contributing factors and their environmental antecedents;
- establish the basis for hypothesis generation regarding factors that may support foodborne outbreak events; and
- guide the planning, implementation, and evaluation of food-safety programs.

**Stakeholders**

Stakeholder involvement in the design and establishment of an NVEAIS must be broad. It must include food-safety program officials at all levels of government, officials responsible for communicable disease control and/or foodborne outbreak investigation, industry groups, and consumers. Stakeholder involvement can be facilitated through five avenues:

- Conference for Food Protection (CFP)
- Association of Food and Drug Officials (AFDO)
- Council to Improve Foodborne Outbreak Response (CIFOR)
- CDC’s National Center for Environmental Health (NCEH)
- CDC’s National Center for Zoonotic, Vector and Enteric Diseases (NCZVED).

**Conference for Food Protection**

CFP is a nonprofit organization established in 1971. The goal of the Conference is to identify problems, formulate recommendations and develop practices that promote food safety and consumer protection. It provides a unique opportunity for the balanced consideration of Issues in a deliberative forum. Issues may be submitted by anyone with a food safety or food protection
concern. Once issues are accepted they are assigned to one of three Councils for deliberation. The resulting Council recommendations are then sent to the Assembly of State Delegates, the official voting body of the Conference. Approved Conference recommendations may be incorporated into the FDA FC and offered for adoption by regulatory agencies to help establish nationwide uniformity. A Conference is convened every two years with work being carried on by committees and the Executive Board between the biennial meetings. (CFP 2008)

In addition to developing recommendations to FDA regarding its FC, CFP plays an important role in the development of recommendations to FDA regarding FDA’s Draft Voluntary National Retail Food Regulatory Program Standards (program standards). There are nine program standards that range from regulatory foundation to program assessment. Standard 5, Foodborne Illness and Food Security Preparedness and Response, applies to the surveillance, investigation, response, and subsequent review of alleged food-related incidents and emergencies, either unintentional or deliberate, which result in illness, injury, and outbreaks (Food and Drug Administration [FDA] 2005b). This standard provides a natural framework within which stakeholder involvement can be focused and decisions can be reached about the establishment and operation of an NVEAIS.

As a deliberative forum for those concerned with food safety issues and its process for consideration of issues, CFP provides the best avenue for stakeholder involvement in a discussion of the establishment an NVEAIS.

**Association of Food and Drug Officials**
AFDO successfully fosters uniformity in the adoption and enforcement of science-based laws, rules, and regulations regarding food, drug, medical devices, cosmetics, and product safety (Smoak 2005). It has a 100-year history as a major voice for food and drug officials in the United States and Canada. Some food-control officials participating in AFDO often are involved in CFP as well, others are not; thus, AFDO is a key stakeholder group representing food-control authorities. An avenue of engagement with AFDO regarding the NVEAIS could be through its committee on food.

**Council to Improve Foodborne Outbreak Response**

CIFOR is a collaborative forum composed of epidemiologists, environmental health specialists, and laboratory scientists from local, state, and federal agencies. CIFOR is co-chaired by the Council of State and Territorial Epidemiologists (CSTE) and the National Association of County and City Health Officials (NACCHO). Members include representatives from CSTE, NACCHO, CDC, Association of State and Territorial Health Officials (ASTHO), National Environmental Health Association, Association of Public Health Laboratories (APHL), FDA, and USDA.

"CIFOR was created to help develop model programs and processes that will facilitate the investigation and control of foodborne disease outbreaks. The agenda includes improving the performance and coordination of relevant local, state, and federal public health agencies involved in epidemiology, environmental health, laboratory sciences, and regulatory affairs” (National Association of County and City Health Officials [NACCHO] 2007).

This group will provide an avenue of engagement with not only food safety program leaders but communicable disease control and foodborne outbreak investigation authorities as well.
Centers for Disease Control and Prevention

CDC’s NCZVED and NCEH are also stakeholders. FDOSS is managed within NZVED and involvement and support by staff representatives of that surveillance system will be important in NVEAIS development and integration with FDOSS.

The prototype for NVEAIS emerged from the activities of the Environmental Health Specialists Network (EHS-Net) program in NCEH. EHS-Net was formed to conduct research on the environmental causes of foodborne illness and improve the practice of environmental health in relationship to foodborne illness prevention. EHS-Net is a network of environmental health specialists and epidemiologists at NCEH, FDA, USDA, and nine state health departments (California, Colorado [2000–2004], Connecticut, Georgia, Iowa, Minnesota, New York, Oregon, Rhode Island, and Tennessee). (http://www.cdc.gov/nceh/ehs/EHSNet/default.htm)

The genesis for NVEAIS was sparked by EHS-Net’s Foodborne Illness Outbreak Study (unpublished). The study objective was to identify contributing factors to foodborne illness outbreaks in food-service facilities and to describe the characteristics, policies, and practices of those facilities. Much has been learned from this study that can be used in the development of NVEAIS. Because EHS-Net has played a significant role in the genesis of the proposal for an NVEAIS, it is expected to provide continued recommendations and guidance to CDC as the collaborative process with all stakeholders unfolds.

System Specifications

Justification
The systematic collection, analysis, interpretation, and dissemination of environmental data from foodborne disease outbreak investigations will support the overall foodborne disease surveillance system in the United States, strengthening the ability of food-control authorities at all levels of government to formulate food safety action and assess the effectiveness of those actions.

Potential justifications for an NVEIS include

- informing the need for regulatory or other appropriate actions to assure the safety of the food supply,
- better understanding food vehicles,
- developing, and/or modifying program policies and/or regulations,
- informing training programs for environmental health specialists regarding contributing factors to outbreaks, and
- measuring the impact of food safety programs.

**Resources**

A number of existing resources developed through EHS-Net can be used to support an NVEAIS, including the experience of this group in its focus on environmental assessment during foodborne outbreak investigations. For instance, EHS-Net has developed a systematic approach to the environmental assessment in an outbreak investigation, gained experience on what data should be collected, and gained experience determining what data can be collected with the least burden on food-control authorities and still be meaningful. Other experience and resources include the following.

- The Foodborne Illness Outbreak Study provides a model for a protocol and data collection instrument with specific data collection instructions.
CDC is developing training materials for EHS-Net participants on how to conduct the environmental assessment during foodborne outbreak investigations and how to report data to CDC to support the outbreak study. This material could be a resource for those participating in an NVEAIS and serve as one means to ensure high-quality data.

CDC has developed a Web-based application to support EHS-Net’s data collection activities (http://www.cdc.gov/nceh/ehs/EHSNet/ehsnis.htm). This system has the capacity to support an NVEAIS.

NCEH resources can support the analysis and dissemination of the data collected from environmental assessments and can support analytic studies triggered by the NVEAIS data.

CDC staff will see that all federal requirements such as Office of Management and Budget requirements are met.

These are a few resources that are available through CDC to support an NVEAIS. State and local food-control agencies from California, Florida, New York, Washington and others with experience collecting and using the type of data to be captured through an NVEAIS represent a wealth of experience that could inform the development of an NVEAIS. A dialogue on NVEAIS could reveal other resources.

**System Goals**

With the size of the foodservice establishment inventory for any one food-safety program ranging from 7 to 50,000, it may be difficult to articulate a generic goal for an NVEAIS at the local level. Generally, the primary goal of NVEAIS at the local level would be to monitor the effectiveness of control and intervention measures. In addition to this goal for the local level, the
state level goals would be to demonstrate the need for food-safety programs and resources and to allocate resources. At the national level, NVEIAS’ primary goals would be to judge the effectiveness of control and intervention measures from a national perspective and to develop hypotheses that can lead to analytic studies about environmental risk factors for foodborne outbreaks.

**Case Definition**

There is no case definition for NVAIS because it does not relate to ill people but rather foodservice establishments involved in outbreaks. The definition of a foodborne outbreak will be the same as that used by FDOSS: the occurrence of two or more cases of a similar illness resulting from the ingestion of a food in common (Lynch et al. 2006). Foodborne outbreaks can be identified in a number of ways via the federal, state, or local level, but generally the environmental assessment is conducted at the local level. Reporting will likely be dependent primarily on local food-control authorities. The data collected will be primarily from the environmental assessment of the foodborne outbreak investigation. Initially, NVEAIS would be considered a temporary system with an evaluation of the system planned after a 5-year period. Evaluation results could inform a decision as to whether it should become permanent.

**System Operation**

Foodborne outbreak events range from local events that are detected and investigated at the local level by a single agency to large multistate events involving local, state, and federal levels and a number of agencies (Figure 2). Food-control authorities involved may reside in an agriculture department or a public health agency or both.
An outbreak investigation does not occur in a linear fashion. Initially most of the energy of the investigation is focused on the epidemiologic aspects of establishing person, time, and place (Hedberg 2007). Place identification, efforts to identify the mode of transmission and food vehicle initiates involvement of food-control authorities (Hedberg 2007). Determining contributing factors, conducting regulatory tracebacks, and implementing control measures are aspects of the environmental assessment and are led by food-control authorities (Hedberg 2007). Although data from clinical samples may help identify an outbreak event, once the investigation begins, information from laboratory analysis of clinical and environmental samples may support both the epidemiologic and environmental aspects of the investigation (Figure 3).

The steps in the environmental assessment information system begin with engagement of food-control authorities in a foodborne outbreak investigation, followed by the environmental assessment, the reporting of assessment data into NVEAIS, and, finally, feedback to stakeholders (Figure 4).
The process does not impact on the food control authorities’ involvement on the larger foodborne outbreak investigation team or on the reporting of outbreaks to CDC’s FDOSS by communicable disease control authorities. Generally, environmental assessments occur at the local level; thus, in the majority of events, local food-control authorities report environmental assessment data to the state food-control authorities. State food-control authorities review the assessments and work with local authorities where clarification is needed and communicate with disease control authorities as appropriate regarding epidemiologic data needed for the NVEAIS report. In the process, state food-control authorities assure that state communicable disease authorities are aware of outbreak events if the foodborne outbreak was locally contained, with the entire foodborne outbreak investigation conducted by local food-control authorities. At this point, the report will be included in the NVEAIS dataset where data can be analyzed, linked to CDC FDOSS as appropriate, and disseminated (Figure 5).
Data flow for the entire NVEAIS process occurs via the CDC Web application developed for EHS-Net data collection activities. The application complies with CDC and U.S. Department of Health and Human Services system security policies. No individual personal information is reported to NVEAIS. No information is reported regarding the identity of an outbreak establishment, but a code is assigned by the Web application to the environmental assessment record submitted by the state. CDC NVEAIS data are subject to the Freedom of Information Act and record codes are releasable. States may receive subsequent requests for outbreak establishment identity, but release of identifying establishment information regarding specific establishments involved in outbreaks is subject to the laws of the reporting state.

The Web application is maintained and administered by CDC NCEH staff (Figure 6). A standardized data collection instrument is posted on the Web. State food-control agencies apply to use the application. Approval is based on completion of an orientation on the Web application and training regarding environmental assessments and the data collection instrument. Once training is complete, the state food-control authority is given a group account with all administrative rights for that group. A group administrator can add and/or delete users and assign access rights as may be appropriate for the user.
For example, read-only status may be appropriate for some users (e.g., the communicable disease control authority), whereas a read and write (data entry) status may be appropriate for other users (e.g., the local food control authority). Only the state food-control authority (group administrator) can close an environmental assessment record. As system administrator, CDC staff can only see that the group administrator has a record in process. Data from that record does not become a part of the dataset at CDC until the group administrator closes the record.

The state food control authority assigns user status and level of use for the local food and/or communicable disease control authorities. Input of environmental assessment data at the local level makes the entire reporting system a paperless process. With data entry taking place at the level where the actual environmental assessment was conducted, the clearest picture of circumstances for a specific assessment is more likely to be preserved. This arrangement may also reduce data entry errors. Ultimately, state food-control authorities are responsible for data quality of the environmental assessment records they close.

As group administrators, food-control authorities have full access to the data entered in the Web application by their assigned users. Data can be downloaded and analyzed by the group administrator to monitor and/or assess trends at the state level. In addition, the group administrator can monitor data quality provided by individual users, which may help identify general foodborne outbreak investigation training needs; specifically, training gaps in the environmental assessment of an outbreak investigation.
Although the Web application is designed with the group administrator level located at the state, it does not preclude local food-control authorities from applying for group administrator level rights for their jurisdictions. Some local food-control authorities oversee food-safety programs encompassing very large citizen and food establishment populations. An application to CDC for group administrator status for a local food-control authority must be made based on agreement by the state food-control authority.

**System Attributes**

NVEAIS is not a health surveillance system; however, it does represent the ongoing, systematic collection, analysis, interpretation, and dissemination of data regarding a health-related event for use in public health action as described in CDC’s Updated Guidelines for Evaluating Public Health Surveillance Systems (MMWR 2001).

Even though public health surveillance is characterized primarily in a clinical or disease context in these guidelines, a public health service program context, which is more relevant for food-safety programs, is not excluded.

Public health surveillance systems are evaluated in part on usefulness and a number of potential system attributes such as simplicity, flexibility, data quality, acceptability, sensitivity, predictive value positive, representativeness, timeliness, and stability (MMWR 2001). Usefulness and system attributes are viewed in the context of the purpose and objectives of the surveillance system (Figure 7). Consideration of the evaluation process at the inception of an NVEAIS can guide its development and help assure accomplishment of purpose.
Usefulness

The CDC guidelines describe a system as useful ‘…if it contributes to the prevention and control of adverse health-events, including an improved understanding of the public health implications of such an event…’ Demonstrating a direct relationship between actions taken by food-safety programs based on information from NVEAIS and the actual prevention of foodborne disease is beyond the scope of this or any one aspect of the foodborne disease surveillance system. This might be possible if data sources such as hazard surveillance, foodborne outbreak surveillance including data from the NVEAIS, and sentinel foodborne disease surveillance such as that carried out by CDC’s FoodNet program are integrated along with other data sources and evaluated. Evaluation of NVEAIS usefulness must be framed in the context of the system objectives. The specific attributes of NVEAIS will play some role in overall system usefulness (Figure 8).

Questions an evaluator might ask to judge usefulness of the system include whether the system

- identified and characterized vehicles in enough detail to support monitoring of trends.
- identified contributing factors and environmental antecedents.
- generated information that led to improved environmental public health practice.
- stimulated research into new control or intervention measures.
- guided planning, implementation, and/or evaluation of food safety programs.
Simplicity

According to the CDC guidelines, public health surveillance systems that are simple, flexible, acceptable and stable will likely be more complete and useful for public health action. A number of features make NVEAIS simple:

- It is designed as an information system integrated into an existing disease surveillance program.
- The data collection method is integrated into the existing foodborne outbreak investigation process involving food-control authorities.
- System simplicity is reflected in the single Web application where data is entered once, accessed, and used at all levels of data management.
- The small amount of time anticipated for data entry and transfer will simplify system use.

Possible barriers to simplicity of the system may relate to staff training needs; the level of detail captured by the system; the amount of time required to review, approve, and close a record; and the time spent on integrating data between two systems, its analysis, and dissemination.

Flexibility

The CDC guidelines describe a flexible public health surveillance system as adaptable to changing information needs or operating conditions with little additional time, personnel, or allocated funds. NVEAIS uses a standard reporting format. It will allow the comparison of information across user groups and allow integration with FDOSS. Although the format can be changed, whether it is considered a flexible format probably will require a retrospective review. The Web application can support a state-specific form with additional questions; however, a standard reporting format may be a barrier to flexibility, at least to some extent.
Acceptability

Acceptability is described by the CDC guidelines as reflecting the willingness of persons and organizations to participate in the surveillance system. Food-safety programs, like all public health agencies, are challenged with substantial mandates and given limited resources to achieve those mandates. New program endeavors like an NVEAIS will be accepted by food-control authorities based in part on a combination of a general willingness and ability to try new programs. Acceptability must be judged in retrospect, but if the CFP survey of food-control authorities regarding inspection data sharing is an indicator, a significant number of officials may be willing to consider participation in an NVEAIS. Anticipated presentations on the type and uses of information gained from EHS-Net’s Foodborne Illness Outbreak Study (unpublished) may demonstrate the value in reporting environmental assessment data and provide an incentive for food-control authorities to participate in an NVEAIS. Concern over the time involved, however, may represent a barrier to participation.

Stability

A stable surveillance system refers to the reliability (the ability to collect, manage, and provide data properly without failure) and availability (the ability to be operational when needed) of the system (MMWR 2001). Stability is largely a resource-dependent attribute and includes resources at the federal, state, and local level. For NVEAIS, the larger outlay of resources in terms of the Web application that will support the system has already been made and experience with its use by nine states provides a history that indicates a relative stable infrastructure from an operational aspect. CDC’s NCEH is committed to maintaining this infrastructure in the near term and will base long-term decisions regarding its maintenance on NVEAIS use. Beyond the Web application infrastructure, considerable resources will be required to analyze data and
disseminate results. Of course, an investment of resources will be required by users as well.

Timeliness of data entry for environmental evaluations as well as record review and closure by group administrators will have a significant impact on the stability of the system; analysis of data cannot begin before records are closed.

Questions an evaluator might ask regarding the stability of the system might include the amount of time taken for records to be closed after data has been entered into the system, the amount of time taken to analyze and disseminate information from the system, and the number of unscheduled downtimes for the system.

**Data Quality**

Although data quality was not included in the attributes used to describe a complete and useful surveillance system for public health action, it is an attribute that must be mentioned specifically for NVEAIS (Figure 9). Data quality as a system attribute is described in the CDC guidelines as reflecting the completeness and validity of the data recorded in the surveillance system. There may be a number of perspectives regarding the questions to ask and the data to collect; they must be balanced with the likelihood that the reporting form will be completed and the information reported actually reflecting the environmental factors of the outbreak. EHS-Net has gained a great deal of experience in the development of a standard environmental assessment report form for its Foodborne Illness Outbreak Study. Part of the difficulty in developing this reporting form involved completeness and validity issues. The
current form reflects the experience of actual collection of environmental assessment data in foodborne outbreaks and its subsequent analysis. Acceptance of NVEAIS will depend in large part on users’ beliefs that the data are of high quality and the system accurately represents the environmental circumstances of foodborne outbreaks; thus, the EHS-Net Foodborne Illness Outbreak Study’s data collection form will be recommended for the NVEAIS.

**Integration with CDC’s Foodborne Disease Outbreak Surveillance System**

The basis for integration between NVEAIS and FDOSS began with previous EHS-Net studies, including the Foodborne Illness Outbreak Study. Integration between the two systems requires duplication of key data elements. The expectation is that environmental assessments from outbreaks will have a matching report in FDOSS, but this may not always be the case. Some epidemiologic data from foodborne outbreak investigations will be needed to characterize environmental assessments and allow the consistent reporting of information from NVEAIS. As experience is gained with NVEAIS and integration with FDOSS improves, duplication of data elements will be refined. A strengthening in communication between food-control authorities and communicable disease control authorities may eventually eliminate the need for duplication of any epidemiologic data elements.

**Starting the Dialogue**

The dialogue regarding the establishment of an NVEAIS begins with submission of an Issue to the CFP (Attachment A). If accepted, CFP’s collaborative process will provide a variety of subject-matter experts, industry, academia, and consumer groups to provide recommendations and guidance in the establishment of an NVEAIS. CDC has planned other opportunities to
engage with stakeholders through other forums during 2008. The stage is set to begin the process of exploring the establishment of an NVEAIS.

References


FoodNet sites (California, Connecticut, Georgia, Minnesota, and Oregon). 1st International Conference on Emerging Infectious Diseases, Atlanta, GA, March 1998.


Attachment A

Conference for Food Protection
2008 Issue Pre-submission Form

Title: National Voluntary Environmental Assessment Information System (NVEAIS)

Issue you would like the Conference to consider:

BACKGROUND

In 2006 the International Commission on Microbiological Specifications for Foods (ICMSF) published a position paper to describe epidemiologic data that are useful for evaluating the public health impact of food safety control programs, and to identify how epidemiologic data can be used in the evaluative process. According to this report the collection, synthesis and analysis of data from a variety of sources is required to evaluate food safety control programs. Foodborne outbreak investigations are one of those sources. The report states that one of the key elements of foodborne outbreak investigations is identifying the suspect food and factors that contribute to foodborne transmission of specific pathogens. These data elements are infrequently determined by human disease surveillance systems, and they are critical for food safety program evaluation. (ICMSF 2006)

Since 1973 the CDC has maintained a collaborative surveillance program for collection and periodic reporting of data on the occurrence and causes of foodborne disease outbreaks (FBDOs) in the United States. Much has been done to improve reporting of FBDOs to CDC, yet all FBOs recognized and investigated by local and state food safety authorities are not reported to CDC (Higgins 1994) and in many of the outbreaks that are reported, the factors most important to food safety authorities, such as implicated food vehicles, or the factors that may have contributed to the outbreak, are missing or incomplete (Lynch, Painter et al. 2006)

According to the ICMSF position paper, public health surveillance and outbreak investigation programs have evolved independently from food safety programs, and current human health statistics address the questions of communicable disease control officials better than questions of food control authorities and this is noted as one challenge in evaluating food control programs (ICMSF 2006). Thus, food safety programs must become more engaged in FBDO investigations and take responsibility for the collection, analysis and interpretation of data relevant to the environmental factors that cause FBDOs. To assist food safety programs CDC is currently considering the establishment of a national voluntary environmental assessment information system (NVEAIS) based on experience from the Environmental Health Specialists Network (EHS-Net) program.

ISSUE

This issue relates to establishing a NVEAIS for foodborne outbreak investigations. This voluntary program will augment the current Foodborne Disease Outbreak Surveillance System maintained by the Centers for Disease Control and Prevention (CDC) to strengthen the role of food safety authorities in foodborne disease outbreak surveillance and in turn, CDC’s ability to support their foodborne disease prevention and control efforts.

The purpose of a NVEAIS would be to identify factors that can be routinely monitored by food safety programs to prevent or reduce the risk of foodborne outbreaks associated with foodservice establishments. Proposed objectives of the NVEAIS are to:

- establish a detailed characterization of food vehicles and monitor food vehicle trends,
- identify and monitor contributing factors and their environmental antecedents,
establish the basis for hypothesis generation regarding factors that may support foodborne outbreak events and,
guide the planning, implementation and evaluation of food safety programs.

Public Health Significance:

Through the systematic collection, analysis, interpretation and dissemination of environmental data from foodborne disease outbreak investigations food safety authorities will have the information needed to take food safety action, assess its effectiveness, support program evaluation, develop and/or modify program policies and/or regulations based on sound epidemiologic data, train environmental health specialists regarding environmental factors related to foodborne outbreaks as well as how to conduct the environmental assessment in a foodborne outbreak investigation, and to justify program budgets.

Recommended Solution:

The Conference recommends the formation of a committee composed of interested stakeholders to consult with CDC regarding the establishment of a National Voluntary Environmental Assessment Information System (NVEAIS).

The recommended Committee charge:

1) review the concept of a NVEAIS as proposed in the attached background paper,
2) prepare a report on the NVEAIS concept for the fall 2009 Executive Board meeting to cover but not be limited to:
   o a brief description of a NVEAIS
   o a detailed description of the anticipated usefulness of a NVEAIS to food safety programs,
   o the feasibility of reporting environmental assessment data to CDC by food safety programs,
   o the acceptability of a NVEAIS by food safety program managers and the willingness to participate, and,
   o if appropriate, based on committee deliberations, a recommendation to continue the committee’s work; if not appropriate based on committee deliberations, report the committee’s work complete and recommend the committee be dissolved
3) determine how a NVEAIS could be best supported by the Conference for Food Protection
   o explore the appropriateness of an amendment to Standard 5, Foodborne Illness and Food Security Preparedness and Response, and,
   o as may be appropriate, develop a recommendation and/or issue for the 2010 Conference.

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Please enter name, email and phone of a possible second contact if we are unable to reach you.

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ATTACHMENT 2
NVEAIS and CFP Support

Charge 3 from the 2008 CFP Biennial Meeting was to determine how NVEAIS could be best supported by the Conference for Food Protection by exploring the appropriateness of an amendment to Standard 5, Foodborne Illness and Food Security Preparedness and Response.

Findings:
Standard 5 of the “FDA Voluntary Retail Food Regulatory Program Standards” is designed to establish best practices related to FBI response and establishes criteria for the surveillance, investigation, response and review of food related incidents.

The CDC NVEAIS tool has a related but different focus. The CDC NVEAIS tool is designed to collect foodborne illness outbreak environmental assessment data and report that data to CDC. As a result, CDC can provide better information to programs on the causes of foodborne outbreaks. This information can be used to identify and monitor contributing factors and their environmental antecedents thus providing information needed to prevent or reduce the risk of foodborne outbreaks associated with food service.

Both the Program Standards and the NVEAIS reporting tool are important aspects for any regulatory program however we have determined that it would not be appropriate to attempt to incorporate use/participation in NVEAIS as a requirement of Program Standard # 5 for the following reasons:

- Difference in focus as stated above
- Lack of annual reports as required currently in Standard 5

Instead of incorporating NVEAIS into the Program Standards criteria, the committee is proposing that the following statement be included in the Standard 5 OUTCOME Section of the “FDA Voluntary Retail Food Regulatory Program Standards.” The current (existing) paragraph is as follows:

OUTCOME
A food regulatory program has a systematic approach for the detection, investigation, response, documentation, and analysis of alleged food-related incidents that involve illness, injury, unintentional, or deliberate food contamination.

New language to be added (indicated in underline):
Regulatory programs are encouraged to also participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). NVEAIS is designed to provide a more comprehensive approach to foodborne disease outbreak investigation and response and will provide a data source to measure the impact of food safety programs to further research and understand foodborne illness causes and prevention. (The following link provides additional information regarding NVEAIS: http://www.cdc.gov/nceh/ehs/.

Currently the Program Standards do not contain any such endorsements to other documents; however we are hopeful that by avoiding changing the criteria of the Standard itself, and because of the recognition of the importance of the NVEAIS work, that this subtle change will be accepted.

- June 22, 2009 - Draft language submitted to NVEAIS Committee Members
- July 15, 2009 - Presented to FDA Clearinghouse Workgroup - Accepted
- July 23, 2009 - Presented to CFP Program Standards Committee - Accepted
- August 7, 2009- Presented to CFP NVEAIS Committee Members - Accepted

NVEAIS Recommendation and CFP Support
Title:

Amend "Outcome" section of Program Standard No. 5

Issue you would like the Conference to consider:

One of the charges of the CFP National Voluntary Environmental Assessment Information System (NVEAIS) Committee was to "Determine how a NVEAIS could be best supported by the Conference for Food Protection. In addressing this, the committee explored the appropriateness of an amendment to Standard 5, FBI and Food Security Preparedness and Response. In this regard, the committee seeks the Conference's approval to incorporate the following statement in the "Outcome" section of Standard No. 5:

"Regulatory programs are encouraged to also participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). NVEAIS is designed to provide a more comprehensive approach to foodborne disease outbreak investigation and response and will provide a data source to measure the impact of food safety programs to further research and understand foodborne illness causes and prevention."

For full text of Standard 5 including recommended addition, see attachment titled: Attachment: Voluntary National Retail Food Regulatory Program Standards, Standard 5 - April 2009

Public Health Significance:

In 1998 the Food and Drug Administration (FDA) developed the Voluntary National Retail Food Regulatory Program Standards (hereafter called the Standards), which consist of nine standards. Standard 5 is designed to establish best practices related to FBI response and establishes criteria for the surveillance, investigation, response and review of food related incidents. The CDC NVEAIS tool is designed to collect foodborne illness outbreak environmental assessment data and report that data to CDC. As a result, CDC can provide better information to programs on the causes of foodborne outbreaks. This information can be used to identify and monitor contributing factors and their environmental antecedents
thus providing information needed to prevent or reduce the risk of foodborne outbreaks associated with food service. This amended language has also been endorsed by the CFP Program Standards Committee and the FDA Clearinghouse Work Group.

**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 **OUTCOME Section** of FDA's *Voluntary National Retail Food Regulatory Program Standards, Standard 5 - April 2009*:

A food regulatory program has a systematic approach for the detection, investigation, response, documentation, and analysis of alleged food-related incidents that involve illness, injury, unintentional, or deliberate food contamination.

Regulatory programs are encouraged to also participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). NVEAIS is designed to provide a more comprehensive approach to foodborne disease outbreak investigation and response and will provide a data source to measure the impact of food safety programs to further research and understand foodborne illness causes and prevention. (The following link provides additional information regarding NVEAIS: [http://www.cdc.gov/nceh/ehs/](http://www.cdc.gov/nceh/ehs/))

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**Attachments:**

- "Voluntary National Retail Food Regulatory Program Standards, Standard 5 - A"

*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.*
STANDARD 5 FOODBORNE ILLNESS AND FOOD DEFENSE PREPAREDNESS AND RESPONSE

This standard applies to the surveillance, investigation, response, and subsequent review of alleged food-related incidents and emergencies, either unintentional or deliberate, which results in foodborne illness, food-related injury*, and outbreaks.

REQUIREMENT SUMMARY

The program has an established system to detect, collect, investigate and respond to complaints and emergencies that involve foodborne illness, food-related injury*, and intentional and unintentional food contamination.

DESCRIPTION OF REQUIREMENT

1. Investigative Procedures

   a. The program has written operating procedures for responding to and/or conducting investigations of foodborne illness and food-related injury*. The procedures clearly identify the roles, duties and responsibilities of program staff and how the program interacts with other relevant departments and agencies. The procedures may be contained in a single source document or in multiple documents.

   b. The program maintains contact lists for individuals, departments, and agencies that may be involved in the investigation of foodborne illness, food-related injury* or contamination of food.

   c. The program maintains a written operating procedure or a Memorandum of Understanding (MOU) with the appropriate epidemiological investigation program/department to conduct foodborne illness investigations and to report findings. The operating procedure or MOU clearly identifies the roles, duties and responsibilities of each party.

   d. The program maintains logs or databases for all complaints or referral reports from other sources alleging food-related illness, food-related injury* or intentional food contamination. The final disposition for each complaint is recorded in the log or database and is filed in or linked to the establishment record for retrieval purposes.

   e. Program procedures describe the disposition, action or follow-up and reporting required for each type of complaint or referral report.

   f. Program procedures require disposition, action or follow-up on each complaint or referral report alleging food-related illness or food-related injury* within 24 hours.

   g. The program has established procedures and guidance for collecting information on the suspect food’s preparation, storage or handling during on-site investigations of food-related illness, food-related injury*, or outbreak investigations.

   h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected.

   i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a product that originated outside the agency’s jurisdiction or has been shipped interstate.
2. Reporting Procedures

a. Possible contributing factors to the food-related illness, food-related injury* or intentional food contamination are identified in each on-site investigation report.

b. The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreak*s with CDC.

3. Laboratory Support Documentation

a. The program has a letter of understanding, written procedures, contract or MOU acknowledging, that a laboratory(s) is willing and able to provide analytical support to the jurisdiction’s food program. The documentation describes the type of biological, chemical, radiological contaminants or other food adulterants that can be identified by the laboratory. The laboratory support available includes the ability to conduct environmental sample analysis, food sample analysis and clinical sample analysis.

b. The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food-related emergency exceeds the capability of the primary support lab(s) listed in paragraph 3.a. This list should also identify potential sources of laboratory support such as FDA, USDA, CDC, or environmental laboratories for specific analysis that cannot be performed by the jurisdiction’s primary laboratory(s).

4. Trace-back Procedures

a. Program management has an established procedure to address the trace-back of foods implicated in an illness, outbreak or intentional food contamination. The trace-back procedure provides for the coordinated involvement of all appropriate agencies and identifies a coordinator to guide the investigation. Trace-back reports are shared with all agencies involved and with CDC.

5. Recalls

a. Program management has an established procedure to address the recall of foods implicated in an illness, outbreak or intentional food contamination.

b. When the jurisdiction has the responsibility to request or monitor a product recall, written procedures equivalent to 21 CFR, Part 7 are followed.

c. Written policies and procedures exist for verifying the effectiveness of recall actions by firms (effectiveness checks) when requested by another agency.

6. Media Management

a. The program has a written policy or procedure that defines a protocol for providing information to the public regarding a foodborne illness outbreak or food safety emergency. The policy/procedure should address coordination and cooperation with other agencies involved in the investigation. A media person is designated in the protocol.

7. Data Review and Analysis
a. At least once per year, the program conducts a review of the data in the complaint log or database and the foodborne illness and food-related injury* investigations to identify trends and possible contributing factors that are most likely to cause foodborne illness or food-related injury*. These periodic reviews of foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention.

b. The review is conducted with prevention in mind and focuses on, but is not limited to, the following:

1) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* in a single establishment;
2) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Disease Outbreaks* in the same establishment type;
3) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* implicating the same food;
4) Foodborne Disease outbreaks*, Suspect Foodborne Disease outbreaks* and Confirmed Foodborne Disease outbreaks* associated with similar food preparation processes;
5) Number of confirmed foodborne disease outbreaks*;
6) Number of foodborne disease outbreaks* and suspect foodborne disease outbreaks*;
7) Contributing factors most often identified;
8) Number of complaints involving real and alleged threats of intentional food contamination; and
9) Number of complaints involving the same agent and any complaints involving unusual agents when agents are identified.

c. In the event that there have been no food-related illness or food-related injury* outbreak investigations conducted during the twelve months prior to the data review and analysis, program management will plan and conduct a mock foodborne illness investigation to test program readiness. The mock investigation should simulate response to an actual confirmed foodborne disease outbreak* and include on-site inspection, sample collection, and analysis. A mock investigation must be completed at least once per year when no foodborne disease outbreak* investigations occur.

**Outcome**

A food regulatory program has a systematic approach for the detection, investigation, response, documentation, and analysis of alleged food-related incidents that involve illness, injury, unintentional, or deliberate food contamination.

“Regulatory programs are encouraged to also participate in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). NVEAIS is designed to provide a more comprehensive approach to foodborne disease outbreak investigation and response and will provide a data source to measure the impact of food safety programs to further research and understand foodborne illness causes and prevention (The following link provides additional information regarding NVEAIS: http://www.cdc.gov/nceh/ehs/.”
Title:

Report and Re-creation - Interdisciplinary FBI Committee

Issue you would like the Conference to consider:

Acceptance of the report from the Interdisciplinary Foodborne Illness Training Committee and Recommendation to re-create the Interdisciplinary Foodborne Illness Training Committee

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.

There are many disease training programs in development by a number of governmental and NGO agencies. The outcome of these endeavors may help shape the future of food safety training.
The Interdisciplinary Foodborne Illness Training Committee has value in considering essential components for certification of foodborne illness outbreak trainings, and making recommendations for establishing a standard for voluntary accreditation of same.

**Recommended Solution: The Conference recommends...:**

1) acceptance of the Report from the Interdisciplinary Foodborne Illness Training Committee,

2) thanking the Committee members for their work, and

3) 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.

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**Attachments:**

- "Interdisciplinary FBI Committee Final Report"
- "Interdisciplinary FBI Committee Roster"

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CONFERENCE FOR FOOD PROTECTION 2008-2010
Interdisciplinary Foodborne Illness Training Committee
Final Report

COMMITTEE NAME: Interdisciplinary Foodborne Illness Training Committee

COUNCIL: II

DATE OF COMMITTEE REPORT: December 1, 2009

SUBMITTED BY: Michèle Samarya-Timm, Chair
Elizabeth Bugden, Co-Chair

COMMITTEE CHARGE(S): To work with the Council to Improve Foodborne Outbreak Response (CIFOR) and investigate establishing standards for foodborne illness training programs and report back to the 2010 Biennial Meeting.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

The Interdisciplinary Foodborne Illness Training Committee created a regular schedule of quarterly conference calls to work in an expeditious manner toward meeting the committee charge.

Our committee has reviewed the potential synergy between CIFOR Training assessment, and this committee’s charge. CIFOR is looking at gaps in training (accessibility, content). This CFP committee is looking at establishing a standard for programs for voluntary accreditation (more content based.)

This CFP committee challenged members with the following action items:
1. Identify principles that guide how standards are developed and any examples of how standards are developed.
2. Make a list of accreditations and certifications that are highly regarded and make a list of the essential components (what’s needed, how often is it renewed, syllabus, etc.)
3. Consider essential components for certification of foodborne illness outbreak investigations

The committee began looking at the new CIFOR guidelines to help facilitate our efforts, and to also identify and consider what criteria could be used to approve food safety trainings, and how to determine if a program is qualified.

In conducting further research for this objective, our committee discovered that a number of entities are in the process of developing training standards for Food Safety professionals. AFDO, along with the FDA 50-State Training Workgroup are conducting a job task analysis to help identify essential trainings. These essential trainings are to encompass all stakeholders and all elements of food protection with the goal of credentialing attendees. As the outcome of these endeavors may help shape the future of food safety training – and foodborne illness training, this committee has concluded that we may be a committee ahead of its time. As there are many prominent disease training programs in development, the committee will continue to track the progress of these programs. The committee recommends that this committee be re-created and charged to track the progress of these programs and bring back additional guidance to the Conference.
COMMITTEE MEMBER ROSTER:

Interdisciplinary Foodborne Illness Training Committee Roster is attached.

Requested action:
The committee will submit 1 issue:

1. **Acknowledgement of the Committee Report**
2. **thanking committee members, and**
3. **Re-Creation of the Interdisciplinary Foodborne Illness Training Committee** with the following charges:
   - track the progress of the prominent disease training programs in development,
   - bring back additional guidance to the Conference.
Title:

Report - Inspection Form Scoring Committee

Issue you would like the Conference to consider:

The Inspection Form Scoring Committee seeks Council II's acknowledgement of its committee report.

Public Health Significance:

A model scoring system will provide a uniform method to communicate food establishment inspection scores to regulators, the public, and the regulated industry throughout the country. A uniform system will also assist regulators and the regulated industry in redirecting resources so they are prioritized on improving food employee behaviors and food preparation practices that minimize the risk of foodborne illness.

Recommended Solution: The Conference recommends...

acknowledgement of the work of the Inspection Form Scoring Committee and to thank the committee for their hard work and dedication.

Submitter Information:

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Attachments:
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.
COMMITTEE NAME: Inspection Form Scoring Committee

COUNCIL II

DATE OF REPORT: 11-20-09

SUBMITTED BY: Chuck Catlin, Liz Pozzebon

COMMITTEE CHARGE(S):

At the 2008 Biennial Meeting, CFP recommended the creation of the Inspection Form Scoring Committee after the Inspection Form Committee completed their charge. The new Inspection Form Scoring Committee was charged with the following:

- Develop a research proposal to:
  - Determine the most effective foodservice establishment scoring system, including the most effective way to communicate food establishment inspection scores to the general public, in advance of them choosing where to dine.
  - Identify possible funding sources and researchers to conduct the research.
  - Report the committee's findings back to the conference at the 2010 Biennial Meeting.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

This committee originally found a researcher in early March 2009 from Loma Linda University. However, due to the downturn in the economy, the Loma Linda team withdrew their draft research proposal since they would no longer be able to commit resources to the project as previously anticipated. A literature review was conducted by committee members to identify other potential researchers and the Inspection Form Committee Work Plan was developed. After the literature review, three potential researchers were identified.

1. Dr. Craig Hedberg of the University Of Minnesota School Of Public Health is a recognized foodborne disease epidemiologist and an accomplished researcher. Dr. Hedberg has assigned a graduate student to assist in developing the research proposal that will accomplish the objectives of the committee.

2. Dr. Douglas Powell, Associate Professor from Kansas State University, is a recognized food safety professor, proactive food safety information communicator, and an accomplished researcher. Dr. Powell has a graduate student who is working on a similar project in New Zealand and will assist in developing the research proposal that will accomplish the objectives of the committee.

3. Dr. Ben Chapman, Assistant Professor Food Safety Extension Specialist from North Carolina State University, is an accomplished researcher. Dr. Chapman has students in the University Extension courses that study food safety and can actively participate in research that will accomplish the objectives of the committee.
After numerous conference calls and other correspondence with the three researchers and graduate student from the University of Minnesota, it became apparent that the committee charge was so broad in scope that the researchers and the committee agreed that it is advantageous for the team of researchers to work together. The research team (the three researchers and graduate student) is in the process of developing a comprehensive grant application for the Fiscal Year 2010 National Institute of Food and Agriculture (NIFA) Integrated Research, Education, and Extension Competitive Grants Program--National Integrated Food Safety Initiative. The deadline for submission is during January 2010. The CFP Inspection Forms Scoring Committee prepared a letter of recommendation for the research team to support their application; this letter was reviewed and approved by the CFP Executive Director. The Project Title is: Using Restaurant Inspection as a tool for Improving Food Safety. If the application is successful, the grant has the potential to fund the entire research project. With the diversity of representation from across the country and the support of the Inspection Form Scoring Committee, the research proposal is not only more representative of public opinion, but also a much stronger contender for the coveted research grant funding.

OUTCOMES (for charges assigned to re-created committee):

1. By 2012, develop a scoring system for the FDA Model Food Establishment Inspection Report Form.
2. By 2012, develop a method to post inspection scores so the public has access to the information in advance of choosing where to dine and purchase food items.

The Scoring Committee developed a work plan and through a literature review, was successful in finding groups from three universities willing to conduct research in the areas identified in the committee objectives. The researchers are in the process of applying for grant funding through NIFA. If their grant application is not successful, alternate sources of funding will be pursued. The researchers are planning to begin their research during 2010 and 2011. With the results of the research in hand, the committee expects to complete it’s objectives before February 2012.

REQUESTED ACTION

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

1. Continue working with academic researchers to:
   a. 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.
   b. 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 them choosing where to dine and purchase food items.
   c. Identify funding sources to conduct their research and provide a letter of support for funding already identified.

2. Report the committee’s findings back to the conference at the 2012 Biennial Meeting.
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Conference for Food Protection
2010 Issue Form

Council Recommendation: Accepted as Submitted
Accepted as Amended
No Action

Delegate Action: Accepted Rejected

Title:
Re-create - Inspection Form Scoring Committee

Issue you would like the Conference to consider:
The Conference recommends re-creating the Inspection Form Scoring Committee during 2010-2012 to further develop a model scoring system as outlined in the charges below.

Public Health Significance:
A model scoring system will provide a uniform method to communicate food establishment inspection scores to regulators, the public, and the regulated industry throughout the country. A uniform system will also assist regulators and the regulated industry in redirecting resources so they are prioritized on improving food employee behaviors and food preparation practices that minimize the risk of foodborne illness.

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.

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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.
Title:

Report - Electronic Reporting Committee

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Electronic Reporting Committee seeks Council II to acknowledge the committee report and thank the committee for completed work.

Public Health Significance:

The 2008 CFP Biennial Meeting created a new committee - Electronic Reporting Committee and gave the following charges (2008 II-036):

**Charge 1:** Consider options to make the results of the "Best Practices and Lessons Learned" as identified in the 2006-2008 Electronic Data Capture and Reporting Committee Survey 2 available to jurisdictions considering an electronic data capture system.

**Charge 2:** Conduct research into the feasibility of providing an anonymous, central electronic database for the collection of electronic data from jurisdictions across the country.

**Charge 3:** Work with jurisdictions to create a pilot project for collection of inspection data and include it in an anonymous test database and identify any challenges associated with such database development.

The 2008-2010 committee felt very strongly that 2006-2008 Electronic Data Capture and Reporting Committee Survey be made available from the CFP website in an easier way by placing a more prominent link. Creating an anonymous database will be very valuable to participating agencies and the food service industry. Data collection and analysis has important values within any regulatory program that are currently collecting their food inspection data electronically. Due to the current economic status of many agencies, the committee feels that CFP should wait for Food and Drug Administration (FDA) to determine
the results of the next phase of baseline survey based on Center for Disease Control (CDC) contributing factors to foodborne illness. After FDA formulates their plan, CFP should pursue charges 2 and 3 through the continued committee.

**Recommended Solution: The Conference recommends...:**

1. acknowledgement of the Electronic Reporting Committee final report,
2. thanking the committee members for completed work; and
3. that a more prominent link be provided on the CFP web site to the 2006-2008 Electronic Data Capture and Reporting Committee Survey.

**Submitter Information:**

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**Attachments:**

- "Electronic Reporting Committee Final Report"
- "Committee Roster"

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1/8/2010
CONFERENCE FOR FOOD PROTECTION
FINAL REPORT
Electronic Reporting Committee

2008-2010 Electronic Reporting Committee.

Council II

DATE OF REPORT: December 1, 2009

SUBMITTED BY:
Chirag H. Bhatt, RS
Electronic Reporting Committee Chair

Kim Stryker
Electronic Reporting Committee Co-Chair

COMMITTEE CHARGES:

Charge 1: Consider options to make the results of the "Best Practices and Lessons Learned" as identified in the 2006-2008 Electronic Data Capture and Reporting Committee Survey 2 available to jurisdictions considering an electronic data capture system.

Charge 2: Conduct research into the feasibility of providing an anonymous, central electronic database for the collection of electronic data from jurisdictions across the country.

Charge 3: Work with jurisdictions to create a pilot project for collection of inspection data and include it in an anonymous test database and identify any challenges associated with such database development.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

The 2006 Biennial Meeting recognized that after the creation of the standardized FDA Food Inspection Report Form the next step was to make it available electronically. Conference further recognized that regulatory agencies may be interested in capturing inspection data in an electronic format, and that this information could then be compiled into an anonymous national database for the purpose of research.

This committee was created to compile information regarding the software packages currently in use, development and implementation of these programs, costs, elements for incorporation into a single uniform electronic database to benefit all regulatory agencies, etc. Surveys of regulatory agencies were compiled in the 2006 – 2008 Electronic Data Capture and Reporting Committee Final Report.

The 2008 Conference created a new committee – Electronic Reporting Committee and gave the charges as described above (2008 II-036).

The committee met via conference calls 6 times. The calls were conducted during October 2008, January 2009, February 2009, May 2009, July 2009 and October 2009. A Google group site was also created and used by the members to post messages, files, web-links. Additionally, a draft request for proposal for database development was initiated and will be shared with the re-created committee.

The 2008-2010 committee felt very strongly that 2006-2008 Electronic Data Capture and Reporting Committee Survey be made available from the CFP website in an easier way by placing a more prominent link. The 2008-2010 Committee feels that creating such an anonymous database will be very valuable to participating agencies and the food service industry. Data collection and analysis has important values within any regulatory program that are currently collecting their food inspection data electronically. Due to the current economic status of many
agencies, the committee feels that Conference wait for Food and Drug Administration (FDA) to determine next phase of conducting baseline survey (based on CDC contributing factors to foodborne illness).

The committee recommends that Charge #1 be addressed by providing a more prominent link on the CFP website to the 2006-2008 Electronic Data Capture and Reporting Committee Survey; and that charge #2 and #3 be pursued after FDA formulates their plan.

REQUESTED ACTION:

The committee will submit the following issues at the 2010 Conference.

1) Acknowledgement of the committee report and thank the committee for completed work. (see Issue titled: Report – Electronic Reporting Committee)
2) Continue the Electronic Reporting Committee to work with Conference and others to discuss the benefits of creating an anonymous data base and maintaining it. (see Issue titled: Re-Create – Electronic Reporting Committee)

COMMITTEE MEMBER ROSTER:

Attached
Title:
Re-create - Electronic Reporting Committee

Issue you would like the Conference to consider:

Re-create the Electronic Reporting Committee to work with Conference on the Request for Proposal for an anonymous database and continue in order to complete all charges issued to this committee and secure consensus among all committee members.

Public Health Significance:

The 2006 CFP Biennial Meeting recognized that after the creation of the standardized Inspection Report Form the next step was to make it available electronically. Conference further recognized that regulatory agencies may be interested in capturing inspection data in an electronic format, and that this information could then be compiled into an anonymous national database for the purpose of research. This committee was originally created to compile information regarding the software packages currently in use, development and implementation of these programs, costs, elements for incorporation into a single uniform electronic database to benefit all regulatory agencies, etc. Surveys of regulatory agencies were compiled in the 2006 - 2008 Electronic Data Capture and Reporting Committee Final Report.

The 2008 CFP Biennial Meeting created a new committee - Electronic Reporting Committee and gave 3 charges:

Charge 1: Consider options to make the results of the "Best Practices and Lessons Learned" as identified in the 2006-2008 Electronic Data Capture and Reporting Committee Survey 2 available to jurisdictions considering an electronic data capture system.

Charge 2: Conduct research into the feasibility of providing an anonymous, central electronic database for the collection of electronic data from jurisdictions across the country.
**Charge 3:** Work with jurisdictions to create a pilot project for collection of inspection data and include it in an anonymous test database and identify any challenges associated with such database development.

The 2008-2010 committee felt very strongly that 2006-2008 Electronic Data Capture and Reporting Committee Survey be made available from the CFP website in an easier way by placing a more prominent link. Creating an anonymous database will be very valuable to participating agencies and the food service industry. Data collection and analysis has important values within any regulatory program that are currently collecting their food inspection data electronically. Due to the current economic status of many agencies, the committee feels that CFP should wait for Food and Drug Administration (FDA) to determine the results of the next phase of baseline survey based on Center for Disease Control (CDC) contributing factors to foodborne illness. After FDA formulates their plan, CFP should pursue charges 2 and 3 through the continued committee.

**Recommended Solution: The Conference recommends...**:

To re-create the Electronic Reporting Committee to work and develop a Request for Proposal for an anonymous data base after Food and Drug Administration (FDA) formulates future baseline survey plans and that the following charges then be pursued:

- Conduct research into the feasibility of providing an anonymous, central electronic database for the collection of electronic data from jurisdictions across the country.
- Work with jurisdictions to create a pilot project for collection of inspection data and include it in an anonymous test database and identify any challenges associated with such database development.
- Report back to the 2012 Biennial Meeting.

**Submitter Information:**

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Title:

Report - 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 seeks the Conference's acknowledgement of its Work Group Report.

Public Health Significance:

The Certification of Food Safety Regulation Professionals Work Group report submitted with this Issue as Attachment A provides a summary of the actions taken to address each of the following Conference charges:

  
  - Work Group review and deliberations will assess whether additional revisions/updates are needed to the CFP Field Training Manual and forms. (See Charge #1 in Work Group report)

- Determine if an evaluation tool that mirrors the CFP Field Training process should be developed.
  
  - If such an evaluation tool is necessary, should it be incorporated into Standard #2 or left as a stand alone tool available from FDA's web site. For this initiative, the Work Group is charged to work in collaboration with FDA's Division of Human Resources Development. (See Charge #2 in Work Group report)
  
  - Re-examine Step 4 of the current Program Standard 2 language as it relates to "standardization". Current language has raised some confusion among jurisdictions enrolled in the Standards as to what constitutes an acceptable standardization process. The Work Group will determine if the written criteria in Step 4 should be
- Review the criteria for Standard 2 - Trained Regulatory Staff, FDA Draft Voluntary National Retail Food Regulatory Program Standards to ensure it reflects the most up-to-date approach for training and standardizing Food Safety Inspection Officers (FSIOs) newly hired or assigned to regulatory retail food protection programs.

- Re-examine Program Standard #2 time lines established for new hires to attain the specific milestones for pre-requisite curriculum, completion of field training, through standardization (Steps 1 - 4 in Standard #2). (See Charge #4 in Work Group report)

- Charge transferred in 2008 from Council 3 - Assess the feasibility of incorporating an Allergen Management Course as part of the Standard 2 "Pre-Requisite Curriculum" and provide a recommendation to the 2010 Biennial Meeting. (See Charge #5 in Work Group report)

- Determine if there is a need to include the requirement of 25 joint field training inspections as a specific criterion within Step 2, Standard 2. (See Charge #6 in Work Group report)

- Assess the strengths/challenges associated with incorporating into Program Standard #2 curriculum requirements, courses related to Food Defense including National Incident Management Systems (NIMS) and Incident Command Systems (ICS) and provide a recommendation to the 2010 Biennial Meeting. (See Charge #7 in Work Group report)

In addition to this Issue requesting acknowledgement of the report, the CFP CFSRP Work Group has submitted 4 separate issues with recommended actions for the Conference to consider. A final issue with the recommendation for continuation of the CFP CFSRP Work Group and suggested 'charges' has also been submitted as a separate issue.

**Recommended Solution: The Conference recommends...:**

acknowledgement of the Conference for Food Protection, Certification of Food Safety Regulation Professionals - Work Group Report included as Attachment A with this Issue. The Conference further recommends that an expression of thanks be extended to all the CFSRP Work Group members who diligently dedicated their time over the past two years.

**Submitter Information:**

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Attachments:
- "Certification of Food Safety Regulation Professionals Work Group Report"

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2010 Conference for Food Protection

Certification of Food Safety Regulation Professionals
Work Group Report

Prepared and Submitted By the Work Group’s Co-Chairs
John Marcello          Susan Kendrick

BACKGROUND

The Conference for Food Protection (CFP) has progressed through multiple stages in the development of a nationally recognized process for training and standardizing regulatory Food Safety Inspection Officers (FSIO) responsible for institutional foodservice, restaurant, and retail food safety inspections. The 2008-2010 CFP Certification of Food Safety Regulations Professionals (CFSRP) Work Group deliberations focused on:

- Obtaining feedback from jurisdictions using the CFP Field Training Manual and forms on their experiences with training newly hired or staff newly assigned to the regulatory retail food protection programs. The feedback from these jurisdictions was used to assess the need to enhance or revise the process and/or forms.
- Reviewing specific criteria in Standard 2, Trained Regulatory Staff, FDA Program Standard (2009), that may be in need of clarification or revision.
- Assessing the need to include an audit process and tool that mirrors the CFP Field Training process as part of the FDA Program Standards.

A list of the members of the CFP Certification of Food Safety Regulations Professionals Work Group is included as Addendum A.

SUMMARY OF THE CONFERENCE CHARGES

The following tables provide a list of the Conference charges to the 2008-2010 CFP CFSRP Work Group. Following these tables, a short summary of the actions taken by the Work Group to address each of these charges is provided.

1. Continue to review the results of the 2006-2007 Assessment of Training Needs Pilot Project that resulted in the development of the current CFP Field Training Manual and Forms. Consideration will be given as to whether additional revisions/updates are needed to the CFP Field Training Manual and Forms.
2. Determine if an evaluation tool that mirrors the CFP Field Training process should be developed, and if so, should it be incorporated into Standard #2 or left as a stand alone tool available for FDA’s website. For this initiative, the Work Group is charged to work in collaboration with FDA’s Division of Human Resources Development.

3. Re-examine Step 4 of the current Program Standard 2 language as it relates to “standardization”. Current language has raised some confusion among jurisdictions enrolled in the Standards as to what constitutes an acceptable process.

4. Re-examine the Program Standard 2 timelines established for new hires to attain the specific milestones for pre-requisite curriculum, completion of field training, through standardization.

5. Assess the feasibility of incorporating an Allergen Management Course as part of the Standard 2 “Pre-Requisite Curriculum”.

6. Re-examine the need to include the requirement of 25 joint field training inspections as a specific criteria within Step 2, Standard 2.


CFSRP WORK GROUP RESPONSE TO EACH CHARGE

RESPONSE – WORK GROUP CHARGE #1

1. Continue to review the results of the 2006-2007 Assessment of Training Needs Pilot Project that resulted in the development of the current CFP Field Training Manual and Forms. Consideration will be given as to whether additional revisions/updates are needed to the CFP Field Training Manual and Forms.
Follow-up interviews were conducted with Twenty-two (22) of the Twenty-nine (29) state/local/tribal jurisdictions that participated in the 2007 Assessment of Training Needs (ATN) pilot project. The interview tool developed by the Work Group as well as a summary of the responses from jurisdictions is included as Addendum B.

Jurisdictions using the CFP Field Training process and forms have indicated an overwhelmingly favorable experience. The CFP CFSRP Work Group is not submitting any recommendations to the 2010 Conference for revisions to the CFP Field Training Manual or forms. However, five areas of focus have been identified that the future Work Group should continue to review and update if necessary:

- In collaboration with FDA’s Division of Human Resource Development, continue to review and revise, as needed, the Standard 2 classroom curriculum.
- Obtain feedback from state/local/tribal jurisdictions on the Standard 2 time frame for new hires or staff newly assigned the regulatory retail food protection program to complete Steps 1 through 4.
- Assess opportunities for enhancing the electronic versions of the CFP Field Training Manual and forms to minimize paperwork.
- Determine if the CFP Field Training Manual and forms have completely addressed all recommendations received as part of the 2007 ATN pilot project.
- Evaluate whether a performance audit should be included as part of the FDA Program Standards or made available via another mechanism.

The follow-up interviews did indicate the need for the Conference to enhance efforts to promote awareness of the CFP Field Training Manual and forms. The CFP CFSRP Work Group is recommending to the Conference that a new 2010-2012 charge be addressed to evaluate and determine the best approaches to promoting awareness and implementation of this national training model including use of websites, list serves, newsletters, testimonials, presentations, and training workshops, etc.

The responses obtained from the follow-up interviews with the ATN pilot jurisdictions served as an important resource for addressing several Conference charges related to the criteria in Standard 2 – Trained Regulatory Staff, FDA Program Standards (2009).
RESPONSE – WORK GROUP CHARGE #2

2. Determine if an evaluation tool that mirrors the CFP Field Training process should be developed, and if so, should it be incorporated into Standard #2 or left as a stand alone tool available for FDA’s website. For this initiative, the Work Group is charged to work in collaboration with FDA’s Division of Human Resources Development.

Three points were identified as the primary steps needed to respond to the Work Group charge referenced above. These points are as follows:

- Is an audit tool needed?
- How would the audit tool be administered?
- Where would such an audit tool be housed (in Standard 2, somewhere else in the Program Standards, or as a stand alone web document)?

Additional concerns were raised relative to the potential use of an FDA audit tool. Concerns included potential duplication between the FDA Retail Food Level I Performance Audit and its corresponding worksheet and the CFP Field Training Manual process; how the FDA Audit will fit with FDA Standardization Procedures; and, whether inclusion of an audit process into the CFP Field Training Manual would shift the focus from training assessment to performance competency and whether that would encompass disciplinary issues.

Results from the follow-up interviews with ATN pilot jurisdictions indicated support for the development of an audit tool that mirrored the CFP Field Training process. The CFP CFSRP Work Group determined that there should be an audit tool available that mirrors the performance elements and competencies listed in the CFP Field Training Plan included as part of Appendix B-2, Standard 2, FDA Program Standards (2009).

Subsequent Work Group deliberations addressed the feasibility of how such an audit tool would be administered and where it should be housed (whether in Standard 2, somewhere else in the Program Standards, or as a stand alone web document). The Work Group reached consensus that the audit process, whether included as part of Standard 2 or provided as a stand alone process, should be fully compatible with the CFP Field Training Manual.

The Work Group focused their review on four existing documents that contained guidance for, or related to, conducting training audits:

- FDA Program Standards (2009), particularly Standard 4 – Uniform Inspection Program;
• The performance elements and competencies contained in the *CFP Field Training Manual*, Appendix B-2, Standard 2 – Trained Regulatory Staff, *FDA Program Standards* (2009);
• *FDA Procedures for Standardization* (also referenced in Standard 2 – Trained Regulatory Staff); and
• *FDA Retail Food Level I Performance Audit* draft documents.

While there are distinct similarities between several of the reviewed programs, including a focus on inspection performance, quality and uniformity, there were significant concerns expressed relative to the relationship of the *FDA Retail Food Level I Performance Audit* tool to *Program Standard 2* as originally proposed by FDA in Issue 2008 II-052. If the FDA *Performance Audit* component is incorporated into Standard 2, along with the *CFP Field Training Manual* and *Standardization Procedures*, there will be three different yet similar types of verification tools within a single *Program Standard*.

The instructions and worksheets provided in the *CFP Field Training Manual* constitute a training process, **not** a certification or audit process. The *CFP Field Training Manual* is designed specifically for the newly hired or newly transferred FSIO and completion of that process represents program competency to initiate independent inspections. A “performance audit” is **not** a training function. It is designed to evaluate whether or not a candidate can successfully and repeatedly apply their knowledge and skills to the inspection environment in a manner that conforms to program requirements. “Standardization” is designed and intended for evaluation of FSIOs with a longer tenure as a field inspector with more varied experience conducting independent inspections and who will serve as training officers for other program inspection staff.

**In order to eliminate potential program redundancies, the CFP CFSRP Work Group is recommending a new 2010-2012 charge to collaborate with FDA on clarifying whether “Standardization” is more appropriately housed within “Standard 2” as a training function, or whether it should be reorganized somewhere else within the Standards.** The CFP CFSRP would explore with FDA the feasibility of either combining the “Performance Audit” functions with that of “Standardization”, or streamlining the duality of the processes to remove redundant or duplicative activities.

At this time, the program component with the greatest degree of compatibility for administration of the *FDA Retail Food Level I Performance Audit* is the *FDA Program Standards*, Standard 4 – Uniform Inspection Program. Use of the FDA “Performance Audit” as an application tool for the implementation of Standard 4 is relevant to the evaluation of a jurisdiction’s ongoing “quality assurance program.” Concurrently, the ten elements of competency derived from the *CFP Field Training Manual* and used for the “Performance Audit” criteria are well-suited to assess an FSIO’s knowledge, skills and abilities as related to inspection procedures. If accepted by FDA, modifications to the existing draft documents
for the *FDA Retail Food Level I Performance A* will be needed to incorporate the recommendations provided by the CFP CFSRP Work Group.

The CFP CSRP Work Group is recommending that a new 2010-2012 charge include conducting a pilot project 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*. The proposed pilot project objectives and time line are included as Addendum C.

**RESPONSE – WORK GROUP CHARGE #3**

3. Re-examine Step 4 of the current Program Standard 2 language as it relates to “standardization”. Current language has raised some confusion among jurisdictions enrolled in the Standards as to what constitutes an acceptable process.

In 2006, the Conference unanimously approved a recommendation from the CFP CFSRP Work Group to revise the minimum number of inspections a FSIO must successfully complete as part of their Food Code standardization process. The minimum number of standardization inspections in Step 4, Standard 2, was reduced from 8 to 4 for FSIOs who would *not* be expected to serve as “Training Standards” responsible for standardizing other FSIOs. The standardization process must be similar to the “FDA Standardization Procedures” and address the five following performance areas:

1. Risk-based inspections focusing on the factors that contributed to foodborne illness;
2. Good Retail Practices;
3. Application of HACCP Principles;
4. Inspection equipment; and
5. Communication.

The FDA standardization procedures are based on a minimum of 8 inspections and include performance areas related to the development of HACCP flow charts, completion of a risk control plan, and verification of a HACCP Plan. FDA standardizations are conducted with regulatory retail food protection personnel who would be *expected to serve* as “Training Standards” responsible for standardizing other FSIOs.

Jurisdictions participating in the *FDA Program Standards* have indicated that the Standard 2 criteria does not clearly address the differences in the standardization process needed to be a “Training Standard” versus standardization of FSIOs who will *not* conduct standardizations with other FSIOs.
The CFP CFSRP Work Group has submitted an Issue recommending that the definitions of “Trainer” and “Training Standard” contained in the FDA Program Standards (2009) be revised to clearly identify the requirements for each of these roles. In addition, the Work Group recommends that Step 4, Standard 2, be revised to include a reference to the requirements for conducting field standardizations of FSIOs as presented in the Work Group's proposed “Training Standard” definition.

**RESPONSE – WORK GROUP CHARGE #4**

4. Re-examine the Standard 2 time line established for new hires to attain the specific milestones for pre-requisite curriculum, completion of field training, through standardization.

The Standard 2 – Trained Regulatory Staff criteria includes a time frame of 18 months for new hires or staff newly assigned to the regulatory retail food protection program to complete Steps 1-4.

- **Step 1** – Pre-requisite curriculum courses (prior to conducting independent inspections);
- **Step 2** – A minimum of 25 joint field training inspections with the jurisdiction’s trainer and completion of a field training process similar to that presented in the CFP Field Training Manual;
- **Step 3** – A minimum of 25 independent inspections; and
- **Step 4** – A standardization process, based on a minimum of 4 inspections that is similar to the FDA Standardization Procedures.

The CFP CFSRP Work Group recommends that no change be made to the 18 month time frame. This consensus decision was based on internal Work Group deliberations and response from the follow-up interviews conducted with the ATN pilot project jurisdictions. The responses from the follow-up interviews were varied with 13 of the 22 respondents indicating that the 18 month time frame was appropriate.

**RESPONSE – WORK GROUP CHARGE #5**

5. Assess the feasibility of incorporating an Allergen Management Course as part of the Standard 2 “Pre-Requisite Curriculum”.

At the 2008 Biennial Meeting, the Voting Assembly of Delegates unanimously approved the Council III recommendation contained in Issue 2008 III-007, Food Allergy Information for state/local regulatory officials:
The CFP CFSRP Work Group has submitted an Issue recommending that a letter be sent to the FDA that food allergen resource information be included as part of the recommended curriculum in the FDA Voluntary National Retail Food Regulatory Program Standards, Standard #2, Trained Regulatory Staff and that a compendium of educational materials be made available to state/local/tribal regulators.

The Conference further recommends that the re-created Food Allergen Committee work with the FDA to develop an appropriate educational component regarding food allergen awareness.

The responses from the ATN pilot project jurisdictions indicated overwhelming support for inclusion of an Allergen Management Course as part of the Standard 2 – Trained Regulatory Staff curriculum.

Appendix B-1, Standard 2, contains a listing of the training curriculum expected to be completed by new hires or staff newly assigned to the regulatory retail food protection program. To be included in this listing, the subject matter must be in the form of a course with learning objectives. FDA’s Division of Human Resource Development has developed several of the core elements for an Allergen Management Course. FDA’s Center for Food Safety and Applied Nutrition is currently working on an Allergen Management guidance document. This document will include specific recommendations for the retail food industry. FDA is planning on collaborating with the CFP Food Allergen Committee to obtain feedback on the information contained in the Allergen Management guidance document. Once the document is finalized, FDA will incorporate specific allergen management guidance for foodservice and retail food operations into the Allergen Management course.

The CFP CFSRP Work Group has submitted a 2010 Issue recommending that the FDA Allergen Management Course be incorporated as part of the Standard 2 post curriculum upon its completion and review by the CFP Food Allergen Committee.

**RESPONSE – WORK GROUP CHARGE #6**

6. Re-examine the need to include the requirement of 25 joint field training inspections as a specific criteria within Step 2, Standard 2.

Feedback from the jurisdictions that participated in the 2007 ATN pilot project, administered through the Conference, indicated a wide variation in opinion as to the appropriate number of joint field training inspections needed to prepare new FSIOs for conducting independent inspections of foodservice and retail food facility types. A summary of the jurisdiction responses to appropriate number of joint field inspections is contained on pages 48 and 49 of the 2007 Assessment.
of Training Needs Pilot Project Report which is available from the Conference for Food Protection web site: [www.foodprotect.org](http://www.foodprotect.org)

Sixty-five percent (65%) of the jurisdictions participating in the pilot project indicated that 25 joint field training inspections was the appropriate minimum number to include in Standard 2. Of the 10 that responded with a “no”, the number of joint field training inspections recommended ranged from 10 to 100, with an average of 75. From comments received from the pilot jurisdiction, the appropriate number of joint field training inspections is primarily based on an individual’s skill, capability and affinity for learning new tasks or accomplishment of certain skills. These learning characteristics will vary from one individual to another.

A recurring comment from ATN pilot project jurisdictions was that the number of joint field inspections was not the performance measure they used to determine a trainee’s readiness to conduct independent inspections. The ultimate performance measure is the trainee’s ability to successfully demonstrate all the competencies listed on the CFP Field Training Plan contained in Appendix B-2, Standard 2.

Many jurisdictions indicated that having a minimum of 25 joint field training inspections provided the jurisdiction’s trainer with expectations on time commitments/resources that should be devoted to the training process. It provides for a degree of quality assurance and expectation of the training process for both the candidate and trainer.

The CFP CFSRP Work Group is submitting an Issue recommending that the Conference retain the reference to the minimum of 25 joint field inspections in Step 2, Standard 2, but also include language that would allow a trainer to conduct a fewer number provided that the exception was supported by written documentation, such as completion of the CFP Field Training Plan included in Appendix B-2, Standard 2.

**RESPONSE – WORK GROUP CHARGE #7**


State/local/tribal regulatory retail food safety professionals are often the first responders to a food safety or food defense emergency. Frequently these incidents impact multiple jurisdictions and require an operational response and management to ensure maximum public health protection.
The Federal Emergency Management Agency (FEMA) offers a national model training curriculum for all public officials with emergency response and coordination responsibilities. FEMA’s Emergency Management Institute provides many basic and advanced National Incident Management Systems and Incident Command Systems courses on-line for no cost. These courses which include final examinations and certificate of completions are available from the following web link: http://training.fema.gov/IS/NIMS.asp.

The CFP CFSRP Work Group has submitted an Issue recommending the inclusion of the following three FEMA courses as part of the “post curriculum” outlined on Appendix B-1, Standard 2.

**IS-100.a, Introduction to Incident Command System, ICS-100**
This course provides training and resources for personnel who require a basic understanding of the Incident Command System (ICS).

**IS-200.a, ICS for Single Resources and Initial Action Incidents, ICS-200**
This course provides training and resources for personnel who are likely to assume a supervisory position within the Incident Command System (ICS). The primary target audiences are response personnel at the supervisory level.

**IS-700.a, NIMS An Introduction, ICS 700**
This course provides training and resources for the National Incident Management System (NIMS). NIMS provide a consistent nationwide template to enable all government, private sector, and nongovernmental organizations to work together during domestic incidents.
2010-2012 Conference Charges for the Work Group

The Work Group issue titled, Re-Create – Certification of Food Safety Regulation Professionals Work Group, recommends that a new CFP CFSRP Work Group be re-created to address the following charges:

- 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.

- 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.

- 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.

- 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.

- Report back to the 2012 Biennial Meeting its findings regarding the above charges.

The last charge related to third party auditors presented above has been included as a new charge based on an increase in the number of independent third party auditors that have been contracted to conduct regulatory oversight inspections of institutional foodservice, restaurant, and retail food store facility types. Some areas of the country are beginning to disband the local regulatory retail food protection agency and contract the work to nongovernmental organizations. Currently, a national standard upon which to evaluate the
education and qualifications of independent third party auditors does not exist. Legislation has been introduced at the federal level that contains language that would recognize third party audits as a legitimate use of resources to enhance food safety. Since these issues are still not solidified at the time of submittal of the Work Group report to the 2010 Biennial Meeting, a closer look over the next two year cycle is in order.
## Summary of CFP CFSRP Work Group Issues
Submitted to the 2010 Conference

(Work Group Issues are listed by titles. Conference assigned “Issue Numbers” were not available prior to submission.)

| √ Issue | Report – Certification of Food Safety Regulation Professionals Work Group |
|         | **Attachment A** |
|         | 2010 Conference for Food Protection |
|         | Certification of Food Safety Regulation Professionals |
|         | Work Group Report |

| √ Issue | Emergency Management Course Additions to Appendix B-1, Standard 2 |
| √ Issue | Allergen Management Course Addition to Appendix B-1, Standard 2 |
| √ Issue | Clarifying Step 2, Standard 2 – Program Standards |
| √ Issue | Clarifying Definitions for Step 4, Standard 2 – Program Standards |
| √ Issue | Re-create – CFSRP Work Group |

| **Attachment A** |
| Performance Audit Tool Pilot Project Objectives and Time Line |
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REGULATION PROFESSIONALS WORK GROUP

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CONFERENCE FOR FOOD PROTECTION (CFP)

MODEL FIELD TRAINING MANUAL AND PROGRAM FOR
REGULATORY RETAIL FOOD SAFETY INSPECTION OFFICERS (FSIO)
PILOT PROJECT JURISDICTION FOLLOW-UP FEEDBACK FORM

(Please refer to the “CFP Field Training Manual” when responding to the following questions)

Name of Jurisdiction ______________________________________________________

Person Interviewed ______________________________________________________

Field Training Process Used:

- CFP Field Training Manual ☐ 4 or Assessment of Training Needs ☐ 16
- Combination of Field Training Manual and ATN 2

Comments on the Field Training Process:

- The municipal jurisdiction has not formally incorporated the use of the CFP Field Training Manual. All staff to date listed in Question #1 have been trained using the Assessment of Training Needs process and forms. The municipality’s training officer has reviewed the CFP Field Training Manual and prefers its design and format. The municipality plans to use the CFP Field Training process for when new hires begin training in the future.

- The State Department of Agriculture has developed a Training Plan that covers performance elements and competencies related to both retail food and manufactured foods. They are enrolled in both the FDA Manufactured Food and Retail Food Regulatory Program Standards. They also incorporate a Field Training Worksheet used to provide the new hire feedback. The worksheet is completed after every 5 inspections. The Field Training Worksheet basically follows the same format as the one provided in the CFP Field Training Manual. The training plan, however, is more aligned with the Assessment of Training Needs format. The State Department of Agriculture has a one year probationary period for new hires to determine whether or not the candidate is appropriate for state service. The Training Plan (ATN) process is used as documentation that a new hire has successfully completed all the performance elements and integrated into the agency’s probationary assessment.

- The county health department continues to use the Assessment of Training Needs because the tool met their training program needs. They have only made minor additions to the original tool. While aware of the revised version (CFP Field Training Manual), the need to move from the ATN process and forms has not been viewed as a priority. The county health agency is looking at the CFP Field Training Manual to assess whether it might better fit their training needs.

- The ATN was used by the county health department up to the point of the CFP Field Training Manual being released. No new employees have been hired since the Field Training
Training Manual was released. All training materials have been updated to replace the ATN and use the Field Training Manual. The county health department has computerized their inspection program and is in the process of developing a software package to support their training process. This software program will incorporate the use of all the forms contained in the CFP Field Training Manual. The county’s training officer indicated that once this project is complete, he would share the results with the CFP Work Group. Based on what is developed, CFP may consider looking into making such a software program available to other jurisdictions.

- As one of the jurisdictions that participated in the ATN pilot project, city-county health department received a copy of the CFP Field Training Manual after it was approved at the 2008 Conference. The food program manager indicated the changes incorporated into the CFP Field Training Manual clarified with new hires that the framework was a training process not an evaluation process. The new forms provide useful tools in tracking how a new hire is progressing through the training process.

- The county health department continued use of the ATN tool instead of the CFP Field Training Manual appears to be the result of miscommunication within the agency. The training officer was aware that the Conference had revised the ATN process/forms and that the CFP Field Training document was available for use. He thought he had been using the updated version but came to realize during the interview that he had not as yet integrated the new CFP Field Training manual into County’s training program.

- The county health department has not hired any new staff since the release of the CFP Field Training Manual. When the next new hire comes on board they will use the CFP Field Training Manual and forms rather than the ATN material. The county thought the CFP Field Training Manual and forms provided a solid, targeted, FSIO training framework.

1. How many FSIOS has the interviewee’s Jurisdiction trained using the field training process identified above? 162

2. Does the interviewee believe the FSIOS who have successfully completed the training program prescribed in the Model Field Training Manual or Assessment of Training Needs are properly prepared to conduct independent retail food and/or foodservice inspections at the conclusion of the training program?

☐ Yes 19 ☐ No 2 ☐ Maybe 1

If the interviewee said no, ask them to elaborate on what area(s) the FSIO is not properly prepared in to enable them to conduct independent inspections.

Comments Related to “No” Responses
Because we have only been able to do 8 inspections at the most. Independent inspections were not reviewed, lack of follow through on part of supervisors and trainers due to time constraints, priorities not well communicated and staff turnover/absences.
Training on process HACCP approach to conduct risk-based inspections is not clearly identified in the training curriculum. This course is currently a classroom FDA ORA-U offering, not an online course.

Public health risk communication is not well addressed by the online communications course.

Complaint investigation training, especially foodborne illness investigation, requires a specific approach.

**Maybe**

They do initial training on HACCP, FBI investigations, specialized processing, etc. before having the trainee do the ORAU courses. They also focus more on Risk Based Inspections during the training process.

3. Does the interviewee believe the Glossary of Terms in the Manual was sufficient to understand and implement the training process in your jurisdiction? IF THE JURISDICTION YOU ARE SURVEYING USED THE ASSESSMENT OF TRAINING NEEDS INSTEAD OF THE CFP MODEL FIELD TRAINING MANUAL, SKIP TO QUESTION 4

☐ Yes 12 ☐ No 17 No Response 10

If the interviewee said no, please specify what terms in the glossary he/she thought needed improvement or what terms they would like to see added to the glossary.

*No additional terms were recommended*

4. Did the jurisdiction’s FSIOs experience any problems with the Pre-Requisite Curriculum portion of the Program?

☐ Yes 5 ☐ No 17

If the respondent said yes, ask them to specify what problem(s) were encountered. Please specify if the problems were related to the FDA ORA U Web-based training or the equivalent coursework.

**Comments Related to “Yes” Responses**

- Shockwave was required and had to be downloaded by IT to all computers (employees are not permitted to download ANY software).
- Getting signed in and finding the correct classes was a little difficult.
- Since they do training of staff prior to the ORA U curriculum it would be hard to answer this question. The health department is hiring inspectors without Bachelor’s degrees, much less environmental health degrees, so the trainees need additional training up front.
Web-based training was helpful and covered basic principles of environmental health, but it was very time-consuming.

ORA U courses were labor intensive because MFRPS courses were also added onto our curriculum. The criteria for completing these courses in the FDA specified time period did not correlate with our jurisdiction’s “probationary” time period of one year. Our jurisdiction needs to complete the pre-training before the one year period, thus the liberal time frame FDA wants the courses completed puts our jurisdiction at a disadvantage because we must complete training (including standardization of each FSIO) within the first year of hire.

A jurisdiction that has a set probationary period and must comply with basic course requirements during that probationary period may be a problem. I realize that having more time than the jurisdiction requires would in and of itself be a good thing. However, when there is nothing addressing this possibility an auditor (in our case a joint administrative procedures committee that works for the legislature) may have issues with what constitutes before you go out in the field and what you can do afterwards.

Out of the four staff, only one has completed the FDA ORA U Web-based training. The rest have been given a deadline, July 2009 to complete all the training courses. The problem has not been the training material, but not making it a priority by the Environmental Health professional. Two of them have been in the field for at least 20 years, and they feel they have all the training they need; however, the problem has been addressed, and they should be finished with the online training by July.

We did not have the 2 persons do all of the prerequisites before starting. We find it difficult to accomplish this, but so far we have had people with strong public health experience. A brand new person with no experience I think we would do it this way.

We did not experience any problems using ORAU. Our new hires found the ORAU courses to be a review of concepts taught in their college courses.

The communications course was not available (and I am still not finding it on ORAU) and this was confusing since it appears on the list of pre-requisite courses.

Time wise it has been difficult to fit in all of the courses during our initial training period. We typically had inspectors ready to do independent inspections within 6 weeks of the hire date but sometimes it took 3-6 months for employees to complete the online courses due to the workload issue or computer/connection issues. Now the courses seem to be running smoothly compared to the past so the computer issues are no longer posing a problem. The workload issue is something we need to work on from a scheduling standpoint. Our trainees are often on travel status during training and it has been difficult to leave enough time during the training period for course completion.

It would be a very helpful training tool to have the food code modules available or if they are now available I haven’t been able to find them on ORAU.

The number one problem that we have had is staff getting access to ORA-U once they are enrolled. That is an internal problem with our IT programs and we think we have it solved. The second problem is convincing new hires that they have to complete the coursework, because most of our newly hired staff has many years of experience in food safety. Again, this is an internal problem, and not a problem with the training itself.

No problems were experienced related to the FDA ORA U web site, but using IE alternative web browsers (such as Mozilla Firefox) resulted in some functional problems. The problems where corrected by allowing pop-ups, and view this page in IE.
5. Does the interviewee believe the information provided in the Assessment of Training Needs or Section III of the Manual adequately describe the approach that is being recommended for identifying the training content, determining training needs, and tracking a FSIOs progress in demonstrating competencies specific to their job responsibilities?

☐ Yes 22  ☐ No 0

If the interviewee said no, identify those portions of the Assessment of Training Needs or CFP Field Training Manual that need improvement in the space below. Ask the interviewee to provide specific recommendation(s) for improving the content of the section of the ATN or Field Training Manual in the space provided below.

Additional Comments

- I really like how the CFP Field Training Manual is set up in this section for allowing flexibility.
- When the municipality did the pilot program they made some modifications in the program, which they have continued to use. So for the municipality, ORA U only supports the training, but most of the training is done as “one-on-one” classroom based training.
- The training officer liked the organization of the section.
- On page 7, include the definition of JFT in the table if this has not already been added.

6. The CFP Training Plan and Log or the Assessment of Training Needs are divided into six (6) inspection training areas and 23 “performance elements”. Does the interviewee believe these training areas and performance elements sufficiently address the knowledge and skills a FSIO needs to effectively conduct independent inspections of retail food and foodservice establishments?

☐ Yes 18  ☐ No 3  In general 1

If the interviewee said no, ask them to specify what improvements they believe should be made to the training areas or performance elements. This may include areas and elements they believe should be added or deleted.

Comments Related to “No” Responses

- Would like to see more focus on reviewing systems approach
  - Determining compliance with responsibilities of the person in charge (Food Code 2-103.??)
  - What are company policies→ example of policies for training employees on handwashing, how do they verify employees are following procedures? Handwashing policy, handwashing training, handwashing verification.
- The program should add:
• State training
• FBI training
• HACCP
• Food Code training

The ATN Field Training worksheet lists multiple items addressing aseptic sampling. These items should be deleted from the worksheet and offered in an addendum as optional performance elements. The focus on aseptic sampling (food and water) is too great for our food program.

• Elements of standardization should be included as part of a performance element. Our jurisdiction recently added a pre-standardization performance area to our check sheet which includes all HACCP exercises that the FSIO is required to complete for standardization. We found that after completing the training, these exercises were not included as part of training and the FSIO was not ready for the final evaluation of standardization. We also designed a performance element for all the training courses that were required throughout training. Each course was listed under the performance area and the tracking was beneficial to the evaluators.

• At the beginning of the pilot, the county added some optional items, like review file for repeated violation items, verify compliance with 410 IAC 7-22, review of HIPPA law, document repeat violations from previous inspection, refer report for enforcement action, complete a Risk Control Plan, Flow Chart. I believe some were incorporated into the final ATN form and some are jurisdiction-specific. All are addressed.

• We added specific computer-based inspection training: demonstrates ability to open a new establishment/inspection file, how to properly document risk factors, discussion with operators/employees; demonstrates ability to close an establishment file if needed.

• The State Department of Agriculture has identified a potential gap in the performance elements competencies contained in the CFP Field Training Plan and Worksheets. By the time the FSIO is scheduled to be standardized, all the performance elements and competencies related to the standardization process should have been addressed in the agency’s training program. The State agency discovered that as their new hires proceeded through the process they had not been exposed to the competencies needed to complete the following exercises that are included as part of the FDA Standardization process:
  - Development of a Risk Control Plan
  - Development of HACCP Flow Charts for each of the three process food flows
  - Verification of a HACCP Plan

The State agency encourages the CFP Work Group to consider adding these areas as specific competencies in the existing field training plan/forms OR develop a specific performance element that address pre-standardization training that lists the above items as need competencies.

• The inspection training areas and performance elements sufficiently address the knowledge and skills a FSIO needs to effectively conduct independent inspections of retail foodservice establishments. One of the strengths of the Field Training Manual is the flexibility/customization that can be done and to meet the unique and specific needs of a program but providing a well defined structure for the basic knowledge and skills and FSIO needs.
• The county agency has included additional performance elements not included on the current CFP Field Training Worksheet based on their program needs. Additional performance elements include the FSIOs ability to use their computer based inspection system and training is provided to ensure a FSIO follows all the county’s procedures for determining if an establishment is in compliance with their smoke free environment ordinance. In addition, they included as a performance element area a FSIO’s ability to conduct a menu based review to determine food safety priorities during the inspection.

7. Has the interviewee experienced any problems when implementing the following steps that are integral to the field training process described in the Assessment of Training or Section IV of the Model Training Plan?
   - STEP 1 – Determine Performance Elements to be Included in Your Training Plan
   - STEP 2 – Determine Competencies for Each Selected Performance Element
   - STEP 3 – Determine Need for Additional Performance Elements and Competencies
   - STEP 4 – Determine Appropriate Training Method for Each Competency

☐ Yes  2  ☐ No  19  No Response  1

If the interviewee said yes, ask them to identify the step(s) that has/have caused a problem and describe the problem(s) they have encountered.

Comments Related to “Yes” Responses
• Our program has not been able to get organized on this process and has not been consistent in its use.
• The only real problem we have had has been that we have had to use multiple people to conduct the training and evaluations. I would prefer to have a single training officer do this, but this is not possible with our current structure.
• Not all of these elements have been incorporated in a formal manner into our training plan.

8. Based on your experience using the CFP Field Training Manual or the Assessment of Training Needs process, do you believe the 18 month timeline provided in the FDA Voluntary National Retail Food Regulatory Program Standard No. 2 - Trained Regulatory Staff for completing steps 1 through 4 in the training process is the proper amount of time?

☐ Yes  13  ☐ No  9
If you said no, how many months do you believe are appropriate for completing steps 1 through 4 in the training process? __________

**STEP 1** – Completion of curriculum courses designated as “Pre” in Appendix B-1 prior to conducting any independent routine inspections

**STEP 2** – Completion of a minimum of 25 joint field training inspections, **AND**
- successful completion of the jurisdiction’s FSIO Field Training similar to the process outlined in Appendix B-2.

**STEP 3** – Completion of a minimum of 25 independent inspections **AND**
- remaining course curriculum (designated as “post” courses) outlined in Appendix B-1.

**STEP 4** - Completion of a standardization process similar to the FDA standardization procedures.

- 36 months – Inadequate staffing to do both training and standardization. We have been unable to standardize any employees as of yet.
- 18-24 months
- 6 months - ORAU courses were labor intensive because MFRPS courses were also added onto our curriculum. The criteria for completing these courses in the FDA specified time period did not correlate with our jurisdiction’s “probationary” time period of one year. Our jurisdiction needs to complete the pre-training before the one year period, thus the liberal timeframe FDA wants the course completed puts our jurisdiction at a disadvantage because we must complete training (including standardization of each FSIO) within the first year of hire.
- A jurisdiction that has a set probationary period and must comply with basic course requirements during that probationary period may be a problem. I realize that having more time than the jurisdiction requires would in and of itself be a good thing. However, when there is nothing addressing this possibility an auditor (in our case a joint administrative procedures committee that works for the legislature) may have issues with what constitutes before you go out in the field and what you can do afterwards.
- 24 months
- 24 months
- This is a difficult question to answer. Completing 25 joint inspections, 25 independent inspections and then completing a standardization process doesn’t seem feasible in an 18 month time frame. However, when we used the ATN process, we completed fewer than 25 joint inspections before proceeding to independent inspections. In such a case (less than 25 joint inspections) the 18 month time frame seems more realistic. We have not yet initiated step four due to limited resources.
• 24-36 months – We have not been able to standardize people due to economic and time resources. We hired 8 people all at once and this has been a drain on the system but we have performed follow-up field inspections with these individuals to ensure they are on track.
• 36 months.
• 24 months.
• The municipality does not have a large staff. Staff assigned to the food program is, for the most part, “specialized” concentrating the bulk of their work time to the food program. The training officer indicated that they have not experience a problem with the 18 month time frame for completing Standard 2 Steps 1 through 4. They standardize staff using the FDA process of 8 inspections including the exercises. They have had a problem with staff completing the post curriculum course in a timely manner. The training officer attributed this problem to the agency’s lack of quality assurance oversight to ensure completion of the post curriculum courses. Staff has been concentrating on completing their required number of inspections and not viewing the completion of the coursework as an integral part of their work plan responsibilities.
• The State agency must complete all their training and standardizations within the first 12 months due to the probationary assessment that must be conducted of all their new hires. The shorten time frame places significant stress on their agency’s ability to fit in all the required training, especially since they are also enrolled in the Manufactured Food Regulatory Program Standards that contain additional coursework requirements.
• Though the county marked YES to this question indicating that an 18 month time frame was appropriate for a new hire to complete Steps 1 through 4, it is important to note that they do not include (Standardization – Step 4) as part of the training process. The county’s training program consists of Steps 1 through 3. The training officer did indicate, however, that she is familiar with the FDA Standardization process and if it were included as part of the training program she still thinks the 18 month time frame is appropriate for all 4 Steps described in Standard 2.
• 25 joint field training inspections provide a good baseline for new hires. Some require less, some more. The Standard needs to maintain a minimum number of joint inspections otherwise time pressure related to having new hires contribute productively too the program will compromise the training process. In addition trainers have work load pressures as well and may not allocate the appropriate amount of time (number of inspections) to really ensure that the new hire is effectively trained and proficient in all performance element areas.
• The food program manager indicated that the 18 month Standard 2 time frame was appropriate for completion of Steps 1 through 3 but more time is needed for new hires to complete Standardization (Step 4). The county’s staff is, for the most part, Specialists not Generalists. Even with that said, the training officer encourages the Work Group to extend the time frame for completion of Steps 1 – 4 to 24 months. Staff needs some time in the field to assimilate the basic training prior to standardization. Generally the standardization process begins around 15-18 months into the new hire employment. Additional training, especially in risk based inspections, is needed to fully prepare the candidate for standardization.
9. The Assessment of Training Needs or Sections V and VI of the CFP Field Training Plan describe steps to follow when preparing for and conducting joint field training inspections. Has the interviewee experienced any problems when implementing these steps as part of their program?

☐ Yes 5  ☐ No 16  ☐ No Response 1

If the interviewee said yes, please have them identify which step(s) posed a problem for your jurisdiction and what they have done or what they believe should be done to correct this problem(s).

- It is a lot of paperwork to maintain. We would like to print all of the forms that will be filled out for the full process for each candidate (FSIO) into a comb binder. The FSIO will be responsible for making sure that the binder forms are filled out and maintained. A copy of this will be kept at the central office after completion.
- Initially (first 2-3 inspectors) we discovered that having more than one trainer was problematic. Once all joint inspections were done by the same standardizing officer the process has been much less confusing to the trainee.
- We created our own form based on the CFP Field Training Plan, condensed the format and limited the amount of times the form was required to be used. Evaluators fill out a joint inspection form only once, after they have completed at least 5 inspections in the session with that evaluator.
- On the first one we had to adopt it to the wholesale inspection, but it worked well.
- Our jurisdiction does not require new inspectors to become Registered Sanitarians or to have experience in food safety. We feel that 25 inspections were not enough for them to be trained and to start doing solo inspections. On average, it took around 40-45 inspections for them to obtain the information and to feel comfortable doing the inspections on their own.
- These areas have not been implemented into the State’s Agriculture training program.
- Although we have not been able to hire inspectors with processing or retail inspection experience, we found that we needed a classroom review session after the inspectors had been in the field because of the complexities of navigating the policies and procedures, laws and regulations, processing of paperwork and navigation of the computerized inspection program. We incorporated this classroom training into a modified version of the face-to-face Applications Course.

10. Do you believe the 25 joint inspections that are required in the CFP Field Training Manual or the Assessment of Training Needs process are too many, too few or just the right number?

  4 _____ Too many;  2 _____ Too few;  15 _____ Just right number;
  1 _____ None of these options
If you said too many or too few, how many joint inspections would you recommend that a FSIO be required to complete as part of the training process? __________

- 8
- 8-10
- 10 inspections, consistent with the standardization process, FDA
- 40-45
- New inspectors learn at different levels and have had different experience prior to hire. Staff that had some food regulatory experience prior to hire were ready to move into independent inspections before completing the 25 joint inspections. The trainer is in a better position to determine readiness to move into independent inspections rather than requiring a person ready to conduct independent inspections to continue to conduct joint inspections until 25 are completed.
- In our use of the ATN process, there was no predetermined number of joint inspections. The process was continued until a consistent, acceptable level of competency in all areas of the ATN had been demonstrated.
- During the interview, Dawn indicated that the Standard should not reference a specific number of joint inspections that needed to be completed. She said that the Standard should be reworded to reflect that a sufficient number of joint inspections should be conducted until such time as the Trainer determines that the Trainee can successfully perform all the competencies listed on the CFP Field Training Worksheet.
- We have made adjustments up or down depending on the trainee’s level of experience coming in to the job.
- 50 or more should be required because it takes more than 25 inspections to see all types of facilities in a jurisdiction and also to allow enough time for an inspector to feel comfortable doing these inspections solo.
- The training officer echoes the comments submitted by many of the jurisdictions I have interviewed that 25 joint inspections was the right minimum number. There is an understanding conceptually that the reasoning behind removing a minimum number and focusing on the use of the Training Plan as the determiner as to how many joint inspections are needed. The number of inspections should be based on how many it takes to ensure that a new hire can perform all the competencies. The municipality could live with either approach but if they had to make a choice they support retaining the minimum number of 25 joint inspections. A specified number of inspections provide a degree of quality assurance and expectation to the training process for both the candidate and trainer.
- The State agency does many more joint field training inspections that the minimum 25 contained in the Standard 2 criteria. They recommend that the CFP Work Group retain the reference to a minimum of 25 joint field training inspections.
- Conceptually the county would not have an issue with removing a reference to a specified number of joint field training inspections in the Standard 2 criteria and simply stating that the new hire would have to successful demonstration the performance elements in the CFP Field Training Manual before conducting independent inspections. The training officer did indicate, however, that having a minimum baseline number of 25 would assist jurisdictions with expectations on time commitments/resources that should be devoted to
the training process. For the county 25 joint field training inspections was considered a minimum number and for most new hires many more joint inspections are conducted.

- Our experience is 25 joint inspections is the right number. We have had individuals who were ready prior to completing all 25, but it provides the opportunity for additional observations of the FSIO, as well as opportunities for the FSIO to observe special circumstances that may not be observed in a setting with fewer joint inspections.

- The training officer echoed the same concerns for not having a minimum number of joint field training inspections stipulated in Standard 2. He stated that this is a quality assurance issue. If a minimum number of inspections are not stipulated, pressure exists to get new hires into the field to conduct inspections. While the training officer agreed that conceptually it really isn’t the number of joint training inspections that is the ultimate measurement rather it is the FSIO’s ability to demonstrate the performance elements and competencies, he stated that the county would retain a minimum of 25 joint field training inspections as a requirement in their own program should this criteria be removed from the Standard.

- A new hire to the food program will generally be able to assimilate the technical aspects of food inspections (knowing the code; observing violations; filling out reports, etc.) within the current 18 month period of time. Thirty-six (36) months, however, are necessary for the new hire to become proficient in the inter-communication skills that are key to behavior changes related to active managerial control of foodborne illness risk factors. If the goal of the Standard and standardization is simply to assess Food Code application and knowledge then the 18 month time frame is appropriate. If, however, the goal of Standard 2 is to train FSIOs to facilitate behavior changes within the inspection framework, then inter-communication skills are an essential piece and require experience in the field to acquire. The Standardization process should begin sometime the beginning of a candidates third year, therefore, I would recommend that the Standard provide a 36 month period of time from hire to successful completion of standardization.

- Echoing the comments received from other jurisdictions I have interviewed, the county’s training officer who thought that a minimum of 25 joint field training inspections was the appropriate number to include in the Standards. Conceptually the training officer understands the rationale for the Work Group’s consideration of possibly removing any reference to a specific number of inspections and focusing on conducting a sufficient number to ensure the new hire can perform all the competencies contained in the agencies training plan. Keeping a minimum number within the Standard, however, provides a quality assurance check for an agency’s training program. The training officer recommends that the CFP Work Group retain the reference to a minimum of 25 joint field training inspections.

11. Does the information presented in the Assessment of Training Needs or Section VII of the Model Training Plan provide the information the interviewee needs for their jurisdiction to develop an effective system to track a FSIO’s training progress and accomplishments?

☐ Yes 21  ☐ No 1
If the interviewee said no, ask them to identify the step(s) that has caused a problem and describe the problem(s) they have encountered.

- The logs are helpful, especially in the CFP Manual
- Using only the field training worksheet
- The ATN Field Training worksheet and separate documentation of successful completion do not provide an effective system to track an individual FSIO’s training needs and observed improvements as the FSIO progresses through training. A single document merging these two ATN components with entry of notes/comments is recommended.

12. Do you have an audit process or tool that you use as part of your training program to assure that a FSIO is properly trained before he/she is released into the field to conduct independent inspections?

☐ Yes 14 ☐ No 8

If you said no, do you think it would be beneficial to have an audit process or tool to use to assure that FSIOs are properly trained before they are allowed to conduct independent inspections?

- This tool – We don’t have an audit process separate from this.
- I say yes, but the tool is very informal
- The municipality standardizes their trainees to assure they are ready. (The training officer is FDA standardized)
- The training officer is not only the “trainer” but the “auditor” for the training.
- Yes, and it is in the developing stages. We hope we would have completed standard 2 of the FDA by the end of this fiscal year, including a verification tool.
- The audit process the food program manager used involved the review of all written reports; 3-4 joint field inspections with each staff and impromptu staff meetings to discuss new things.
- Yes. However, the training manual could serve in this capacity, but one more finely tuned as an audit tool would be beneficial. We need some way to monitor ongoing effective of field work by existing FSIO’s.
- No
- We have used the documents to conduct an evaluation, but only conduct a formal evaluation one time; we currently do not have the staff to do more frequent evaluations.
- During the interview, the training officer indicated that the county does not have a separate and distinct audit process for new hires. Currently they use the CFP Field Training Process and forms for both training and a final assessment by the Trainer. But it is done as one process. There is not a distinct “evaluation” component to their program. The training officer did indicate, however, that an audit tool should be added and based off the field training manual. In addition, such an evaluation process would be better positioned as a component of Standard 4 – Uniform Inspection Program than Standard 2 because it is a quality assurance issue rather than a training issue.
• We have a 6 month probationary period and it would be nice to have some sort of document that could be filled out by a supervisor to verify that the candidate is performing their job correctly. If used prior to the end of the probationary period, this document would likely help determine whether to keep a candidate or terminate them so this might be beyond the scope of an audit form.

• The Training officer indicated a preference for having an audit tool incorporated as part of Standard 2 not Standard 4. The audit tool would be a value added part of the training process that ensured the FSIO is ready to conduct independent inspections. The training officer’s preference was to have the audit process conducted before releasing the FSIO for independent inspections.

• We do not have a formal audit process. We have used the completion of the ATN/Joint Field Training Worksheet to determine whether the FSIO is ready to be released for independent inspections. After completion of the joint field inspections a supervisor observes the FSIO in the field and gives the final release. If an FSIO is not ready then the joint field training exercises would be extended. Yes, an audit process or tool would be beneficial.

• I feel that the ATN process assures that all necessary technical matters are discussed before an FSIO is approved to conduct independent inspections. No training process can be 100% complete and the ATN provides a reasonable foundation for a field inspector. Many questions will still come up during subsequent field work and our standardized training officer is always available for consultation.

• If an audit tool is included as part of the process, it should be included as part of Standard 4 quality assurance rather than Standard 2. Currently Standard 4 requires that 2 inspections be conducted with each Food Safety Inspection Officer to assess the QA elements contained in Standard 4. While this Standard specifies the number of QA inspections and broad based criteria, it does not provide a protocol for a consistent assessment of the candidate during the 2 QA inspections. An audit tool would provide a consistent approach to assessing whether a candidate in the field is performing to expectations and what gaps might exist in the jurisdiction’s training program.

• If not included in Standard 4, an audit tool might be considered as an intermediate step between the end of the field training process and standardization.

• Yes, having some ability to assure that a FSIO is properly trained before being released into the field to conduct independent inspections would be beneficial. Current format used includes discussion with trainee and trainer(s) to assess competency and comfort level for establishments in each risk level prior to conducting independent inspections in the corresponding risk levels.

• The training officer included in the survey response that they have an audit tool but it is an informal process. The municipality uses the Assessment of Training Needs first and foremost as a method for structuring their training and ensuring exposure to all the performance elements and competencies. The ATN worksheets are used more as an assessment tool. The municipality’s training officer questioned the need for an audit tool – not sure what value it brought to the program. After some discussion they indicated they would have to wait to review what the audit tool looked like and where it was positioned in the Standard. They indicated that they had not worked much with Standard 4 so they were not in a position to comments as to whether the audit tool would be more appropriate positioned as part of Standard 2 or 4.
The State agency using the ATN as a framework for creating their training plan. Though not the intention of the CFP Work Group, the state agency not only uses this training plan to assess the progress of a candidate through the training process but the information also is used to assess a new hire through the probationary period.

Though YES is marked on the questionnaire, the county does not implement a formal audit/evaluation process for inspectors in the field. The YES is marked as a reference that the ATN is used by training staff as an assessment tool as well as a training tool. The training officer indicated that the direction the county would like to take is to have staff supervisors conduct and audit/assessment of trained staff once they have been cleared to conduct independent inspections using a tool that mirrors the ATN, if not the ATN field training worksheet itself. Given that the county would prefer the supervisor’s conduct the audit/evaluation, should the CFP Work Group develop an audit process and forms, the training officer indicated that the audit/evaluation process should be included as a component of Standard 4 rather than Standard 2.

The food program manager would find an audit tool a value-added addition to the training process. If such a tool is added it should be incorporated as part of the QA process in Standard 4 rather than the training process in Standard 2. The training officer noted that the CFP Work Group had revised the original ATN to remove any reference to it being an evaluation/audit process. This was done to position the entire structure as a training process. If an audit tool is developed and incorporated into Standard 2 isn’t the CFP Work Group reverting back to incorporating elements of an evaluation?

13. The Assessment of Training Needs or Section VIII of the Model Training Plan describes additional food safety related courses and a modified standardization process that an FSIO should complete after she/he has started to conduct independent inspections. Have these requirements presented any problems for your jurisdiction or the FSIOs who are participating in the program?

☐ Yes 5 ☐ No 17 ☐ Yes and No 1

If the interviewee said yes, please identify what problems they have encountered.

• It hasn’t been a problem to standardize staff, but we have not been able to do the additional course work. Once staff are “cut loose” to do field work it’s harder to find time to keep them in the office doing online training.

• Standardization has not yet been completed. Because of workload and limited resources, State DOH has been unable to schedule standardization exercised with the County. This is still a priority and hopefully will be accomplished in 2009.

• This related to jurisdictions such as ours that have to meet both the retail and manufacturers program standards at the same time which can relate to a burdensome task when both programs require their own separate agenda and must be met within the same time frame.

• We do not use the modified standardization process. Therefore, we cannot truly evaluate how effective using this modified structure would be.
• “Application of the Basics of Inspection/Investigation Course FD170” through ORA-U. I checked the AFDO website and Indiana had no trainer available. I did not pursue obtaining the CD. It was implied that a “Train-the-Trainer” status was required to teach the course. I was unable to locate this course on ORA-U at the end of the pilot.
• Attendance at state environmental health sponsored training should always be encouraged and funding is a problem.
• Other meeting such as the State’s Food Safety and Defense Task Force, Symposium and other professional meetings are included in this.
• We have not completed the standardization process due to our perception of limited value with the current process. A primary concern is that doing eight standardization inspections is probably not always necessary, and is very time consuming. The standardization process should be complete when the requirements of standardization can be met through performance criteria rather than requiring that 8 standardization inspections be conducted.
• FDA’s standardization process does provide a good framework that we would like to build upon in order to better meet our standardization needs. However, we have lacked the resources to pursue this as quickly as we would like to. Below is some feedback from my standardization experience in 2005. While completing the standardization process some areas for improvement were identified. Below is a list of examples where the standardization marking instructions created limitations in adequately documenting food safety risk factors:
  1. During one inspection the operator revealed that his salesman delivered food products to the restaurant by car. This was a concern identified by discussion. Following the standardization inspection report marking instructions, item 4.0D (receiving) was marked IN even though concerns were identified via discussion.
  2. Two operators were able to discuss appropriate quick cooling methods. Discussion revealed that cooling had not been verified to meet food code requirements. Because no cooling was taking place at the time of inspection, item 5.3A was marked NO even though the operator hadn’t developed a system to monitor cooling (PIC responsibility 2-103.11 G)
  3. One operator described cooling of roasted meats. One step in the process was described as leaving the roast out on the counter at room temp until it was 120 °F. The operator could not relay how long the roast was on the counter or how long it then took to cool to 70 °F and then to 41 °F. Following the standardization inspection report marking instructions, item 5.3A (cooling) was marked NO (no cooling occurring during inspection) even though discussion revealed questionable cooling practices. Operator was marked IN for item 1.0A (demonstration of knowledge) because there were many good food safety systems in place.
  4. The standardization inspection report and CFP instructions do not address how to assess handwashing after restroom use. Handwashing in the restroom will rarely if ever be able to be assessed by sanitarian observation. However, discussion with operators can reveal how well the handwashing policy is followed by employees and how the operator monitors for appropriate employee behavior.
5. There were multiple instances where NO was marked, but discussion could have been an effective means of risk factor identification. For example:

* Discussion with operators can reveal what temperature each type of meat usually reaches when temps are taken or what the goal temp is for each product.
* Having the operator describe reheating and cooling processes and how these are monitored can help to identify potential problems even if the processes aren’t occurring during the inspection.

• Discussion can cover more topics (high risk processes and behaviors) while observation will be limited to what is happening at inspection time. Discussion helps to identify gaps in monitoring or knowledge. This creates a teaching moment.
• Whenever possible, observation should be used to confirm what the operator says.
• The value of discussion to supplement observations in risk identification needs to be emphasized. This is especially important in identifying factors that contribute to foodborne illness. The State’s experience in outbreak investigations and what we know about norovirus has shown that employee health, employee behaviors and food handling practices are risk identification and risk reduction focus areas. These risks are often difficult to see. Failure to recognize the importance of discussion and building an inspection process that doesn’t promote and capitalize on sanitarian ability to use a variety of methods in risk identification is a missed opportunity. Now is the time to thoroughly evaluate the standardization process and make adjustments that take what the FDA has provided and make it even better. This type of continuous improvement approach will maximize what the standardization process and the CFP form can do to support reduction and prevention of foodborne illness.
• The current marking instructions for the Standardization Inspection Report and the Conference of Food Protection Form require making broad judgments about operator compliance in demonstration of knowledge and employee health. This is challenging, because management of these areas in multi-faceted.
• Our field work has been so far behind due to budget and the limits this has placed upon us being fully staffed that so far we have not had any candidates complete all of the post requisite courses. For the same reasons, we have also not standardized any of our new employees, however, we have had trainers work with the new employees twice per month for their first 6 months in the field and once per month for the next 6 months so that we can ensure we are following up and keeping the new employees on track. However, this follow up training includes time in manufacturing as well as retail inspections.

14. It has been suggested that a course on allergens be added to the training curriculum in the CFP Training Manual. Would you recommend that this course be added as part of the pre-inspection curriculum or the post-inspection curriculum, or does it matter?

   ___8___ Pre-inspection   ___11___ Post-inspection   ___3___ Doesn’t matter

Comments:
The training officer agrees that an allergen course should be part of the Standard 2 curriculum and is best positioned as a pre-requisite course.

The municipality’s training staff did view the allergen management course as a “value added” component to the Standard 2 curriculum. They did not, however, view it as an essential course for determining whether a new hire would be ready to conduct an independent inspection. Viewed the allergen course as an enhancement of existing food safety knowledge and better positioned within the post curriculum segment of Standard 2.

The state agency views the allergen management course as a “value added” part for Standard 2 and has developed an allergen management course for the training of their new hires. They support incorporation of the allergen management course into Standard 2 as a pre-requisite course.

Allergen management course does provide value added to the training process but the food program manager does not considered an essential element to conducting basic inspection work. Though it is an emerging issue, the existing pre-requisite courses provide the needed information to get staff ready for independent inspections. Much like HACCP is positioned as a post curriculum course, the allergen management course will provide useful information but directed at a very specific process/procedure or set of circumstances.

15. It has been suggested that one or more courses on Food Defense [National Incident Management System (NIMS) or Incident Command System (ICS)] be added to the training curriculum in the CFP Training Manual. Would you recommend that this course be added as part of the pre-inspection curriculum or the post-inspection curriculum, or does it matter?

1_____ Pre-inspection 18_____ Post-inspection 3_____ Doesn’t matter

Comments:

The training officer agrees that an NIMS/ICS course should be part of the Standard 2 curriculum and is best positioned as a post curriculum course.

The county has already included NIMS and ICS training into their new hire program. The training officer was not sure whether they course material provided was consistent with the EPA course offered on line.

I am still studying this question. Many of the smaller jurisdictions do not use an incident command system, so the courses might not be useful. On the other hand, fire departments across the country use the ICS and many of the state jurisdictions are now using ICS on outbreaks, so just the understanding of the concept would be helpful.

The municipality’s training staff also viewed the NIMS and ICS courses as “value-added” pieces of the Standard 2 curriculum as long as they remained basic for new hires. They specifically mentioned that the scope of the courses should mirror the 100, 200, and 700 series course available on line. They definitely thought that these courses should be part of the Standard 2 post curriculum.

The state agency views NIMS and ICS training as “value added” course to the Standard 2 curriculum. FL Ag already delivers NIMS and ICS training for its new hires. They support incorporation of these courses into Standard 2 as part of the post curriculum.
• Both the allergen management and ICS courses are viewed as value-added training by the county. The training officer supports their incorporation into the Standard 2 criteria. The county is already looking into incorporating the web based NIMS and ICS courses in their training of new hires.

• The food program manager questioned whether NIMS and ICS are an appropriate addition to a “Retail Food Safety” curriculum. The manager recognized the value of training in these areas but think these courses should be part of an agencies overall training program for new employees rather than part of the Standard 2 curriculum. It was pointed out that NIMS and ICS are not food specific but can be related to any type of emergency management situations.

16. Is there any relevant information the interviewee would like to share about the Assessment of Training Needs or CFP Field Training Process that has not been addressed in the first 10 items of this survey? If so, please provide this information in the space below.

Comments:
• It would be great if a bound “field book” could be printed to provide to each FSIO when starting the training process. It would include all of the forms that need to be completed during the process. The trainee could provide the workbook to the trainer during each inspection. At the end there would be a complete record of training available AND/OR Develop an electronic database for recording all of the training information into.

• They are both great tools for ensuring all aspects of our food inspection program are covered. It is so easy to miss something if you are simply conducting joint inspections and not purposely looking for specific skill/knowledge areas.

• I also really like the abbreviated field training worksheet. The only thing I would change/modify would be along the lines of “signing off” on an aspect of it once it has sufficiently been shown to be mastered…ex: Professionalism.

• The ability to sign off that a new hire has performed a specific task is incorporated into the CFP Field Training Plan. Once the trainer determines that a new hire can perform a specific competency, the trainer does not need to continue to assess an area that the new hire can perform, rather they can concentrate on new areas or competencies the new hire is having difficulty with.

• I would like to hear how other jurisdictions are proceeding with this training program as well as communication from FDA on a more regular basis. Thank you for your support.

• The interviewee felt that this training is great.

• I believe the process is sound, but when there is not one dedicated trainer for all new trainees it presents problems for consistency within a program. Even amongst FDA standardized individuals there are still differences of interpretation of findings. I am not sure if this can ever be overcome.

• Our current plan resembles the CFP Training manual, but it not exactly the same and some of the forms used are different, but equivalent. Additionally, it should be noted that the state agency has responsibilities for retail food and manufactured food and our plan combines training requirements from both retail and manufactured Program Standard 2. We began development of this training plan in 2006 and continue to make
modifications to the plan with each new group of trainees. For an organization such as ours that has both programs, it is impractical to separate the two training plans; while generally, staff start with one or the other track (retail OR manufacturing), there is obviously overlap between the two and depending on staff and trainer resources, there may be cross training between the two at any one time (especially on field training). Because we are conducting the retail and manufactured foods training either consecutively or concurrently, this impacts our time for completion – especially to achieve Step 4 (standardization); not achieved within 18 months.
CFP Certification of Food Safety Regulation Professionals Work Group

Proposed Performance Audit Pilot Project

Objectives of Pilot Project

1. Evaluate the FDA Retail Food Level I Performance Audit (Audit) documents [i.e., Guide to the Performance Audit Process for State, Local & Tribal Food Safety Inspection Officers (hereafter FSIO), Retail Food Level I Performance Audit Criteria for FSIO, Audit Failure Reference Guide, Level I FSIO Audit Results Summary Form, Level I FSIO Audit Worksheet, Level I FSIO Auditor Feedback Form]
   - Review the performance elements and criteria for omissions, additions, and items not applicable.
   - Determine the strengths and weaknesses of the documents.
   - Verify ease of use of the documents, including instructions and format. Are jurisdictions able to utilize documents independently without direct supervision or oversight?
   - Determine length of time required to use the documents and complete the Audit process.

2. Assess the use of the Audit process
   - Verify that the Audit process is appropriate to assess the FSIO’s knowledge, skills and ability when applying the competencies required during a field inspection.
   - Verify the appropriate placement of the Audit process application tool; as a stand-alone document or within the Voluntary National Retail Food Regulatory Program Standards as part of the training process (Standard 2 – Trained Regulatory Staff) or as part of the ongoing quality assurance program (Program Standard 4 – Uniform Inspection Program).

3. Gather and analyze data from the pilot study and prepare a Pilot Project Report for the Conference for Food Protection Certification of Food Safety Regulation Professionals Work Group (Work Group) at the 2012 biennial meeting of the Conference for Food Protection (Conference).
## Pilot Project Timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2010</td>
<td>Begin development of Pilot Project packages / Fact Sheet (web-based, paper, etc.)</td>
</tr>
<tr>
<td>April 2010</td>
<td>Solicitation of interested jurisdictions during the 2010 biennial meeting of the Conference</td>
</tr>
<tr>
<td>May 2010</td>
<td>Selection of jurisdictions for Pilot Project (Minimum of 8 jurisdictions desired)</td>
</tr>
<tr>
<td>June 2010</td>
<td>Send out Pilot Project packages to selected jurisdictions and notify jurisdictions not selected</td>
</tr>
<tr>
<td>July 2010</td>
<td>Conference call with selected jurisdictions (Overview of Pilot Project objectives, goals, methodology, data collection, etc.)</td>
</tr>
<tr>
<td>January 2011</td>
<td>Interim data collection from jurisdictions (Data may be received through CFP website)</td>
</tr>
<tr>
<td>February 2011</td>
<td>Interim conference call with jurisdictions (Review of data received to date, overview of progress, solicitation of questions, reminder of deadlines, etc.)</td>
</tr>
<tr>
<td>July 2011</td>
<td>Completion of field component of Pilot Project and collection of completed data reports from jurisdictions</td>
</tr>
<tr>
<td>August 2011</td>
<td>Convene conference call focus group of jurisdiction representatives to review Pilot Project outcomes</td>
</tr>
<tr>
<td>December 2011</td>
<td>Submit final Work Group report and any Issues for consideration at the 2012 biennial meeting of the Conference.</td>
</tr>
</tbody>
</table>
Methodology

Selection of jurisdictional participants: Criteria for participation in the Audit Pilot Project is as follows:

- Jurisdictions MUST be enrolled in Program Standards to participate.
- Jurisdictions must agree to follow the training criteria specified in Program Standard 2, Steps 1 – 3 (includes use of a field training process and documentation similar to that contained in the CFP Field Training Manual and forms, Appendix B-2) with newly hired FSIOs while a participant in the Pilot Project.
- Jurisdictions must have a sufficient number of FSIOs that have successfully completed Standard 2, Steps 1-3.
- Jurisdictions must make a commitment to meet the Pilot Project timelines, reporting protocols, and participate in conference calls.
- Jurisdictions must agree to publication of their participation in Pilot Project Report (note: individual responses will remain confidential).
- Any jurisdictions not selected will be notified.

Distribution of Pilot Project Package: All selected jurisdictions will receive an Electronic Pilot Project Package containing the following materials:

- Copy of newly revised Standard 2 – Trained Regulatory Staff (as approved by the 2010 biennial meeting of the Conference) and Standard #4 – Uniform Inspection Program
- Copy of the FDA Retail Food Level I Performance Audit process documents including instructions.
- Copy of the CFP Field Training Manual.
- Performance Audit Pilot Project protocol and timeline.
- Contact information for Performance Audit Pilot Project Director.

Launch of Pilot Project: Pilot Project will be initiated with a conference call of all participating jurisdictions. The purpose of the conference call will be to provide an overview of the Pilot Project objectives, goals, timeline, methodology, participant expectations, data collection, and other reporting criteria.

Interim Progress Review of Pilot Project: Participating jurisdictions will submit reporting documents completed to date to Pilot Project Director. Data will be analyzed and summarized to identify any potential challenges, omissions, or errors that would hinder completion of the project. Additionally, a conference call will be conducted with participating jurisdictions for additional verbal feedback and clarification.

Data Collection and Reporting: The design of the Data Collection and Reporting Instrument will incorporate the following:

- A questionnaire designed to solicit information.
- Demographical information
• Focus Group(s) designed to solicit additional anecdotal information and recommendations.

**Roles and Responsibilities**

The following roles and responsibilities are integral to this Pilot Project:

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference for Food Protection Certification of Food Safety Regulation Professionals Work Group</td>
<td>Staff all Pilot Project Activities, review the Pilot Project outcomes and make further recommendations to the Conference.</td>
</tr>
<tr>
<td>Pilot Project Subgroup</td>
<td>Prepare Pilot Project Package, prepare Fact Sheet, solicit jurisdictional participation, select participants, distribute Pilot Project Package, receive Pilot Project data from the Pilot Project Director, tabulate and analyze data, summarize the results of the Pilot Project and prepare the Pilot Project Report (including recommendations) for presentation to the 2012 biennial meeting of the Conference.</td>
</tr>
<tr>
<td>Pilot Project Director</td>
<td>Serve as the central point of contact for the Pilot Project, collect data and forward to the Pilot Project Subgroup, coordinate focus group meetings, and present Pilot Project findings to the Conference.</td>
</tr>
<tr>
<td>Jurisdictional Participants</td>
<td>Carry out the activities of the Pilot Project including following the criteria specified in <em>Retail Food Level I Performance Audit</em> documents. Jurisdictions must be active participants in the FDA Program Standards and will have met the requirements of Standard 2, Steps 1 – 3, relative to use of the <em>CFP Field Training Manual</em>; must also be able to assess the feasibility of using the Audit documents with newly hired or existing FSIOs relative to applicability to Standard 4; completing the data reporting instruments; participating in focus group calls; agreeing to publication of Pilot Project participation; and providing feedback to the Pilot Project Subgroup.</td>
</tr>
<tr>
<td>Conference for Food Protection</td>
<td>Provide assistance as requested by the Work Group to disseminate and collect information.</td>
</tr>
<tr>
<td>FDA</td>
<td>Will collaborate with the Pilot Project Subgroup in the design and format of the Pilot Project, analysis of data, and subsequent recommendations for use and placement of the Audit documents and/or process.</td>
</tr>
</tbody>
</table>
Analysis of Data

The Pilot Project Subgroup will analyze the data by tabulating and summarizing all responses to the questionnaire and the focus group meetings. Based on the results of the Pilot Project, the Work Group will determine necessary or recommended changes that need to be made to the training/Audit documents and/or process.

Preparation of Pilot Project Report

A report of the results of the Pilot Project will be created. The report will include a summary of the results of the data tabulation (including participant list, demographics, and questionnaire results), a list of recommended changes to the Audit documents and a list of recommended changes to the Voluntary National Retail Food Regulatory Program Standards (Standard #2 and/or Standard #4). This report will be submitted to the 2012 biennial meeting of the Conference for Food Protection.

Additionally, Pilot Project results and recommendations will be developed in collaboration with FDA’s Division of Human Resource Development to assist in the development of a performance assessment specific to the responsibilities of state, local and tribal retail food safety inspection officers.
Allergen Management Course Addition to Appendix B-1, Standard 2

The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group is recommending that the Allergen Management course currently under development within FDA's Division of Human Resources Development be included as part of the required "post curriculum" contained in Appendix B-1, Standard 2, of the FDA National Voluntary Retail Food Regulatory Program Standards (2009) upon completion and review by the CFP Food Allergen Committee.

Public Health Significance:

At the 2008 Biennial Meeting, the Voting Assembly of Delegates unanimously approved the Council III recommendation contained in Issue 2008 III-007, Food Allergy Information for state/local regulatory officials, stating:

*The Conference recommends that the Food Allergen Committee be reestablished and that a letter be sent to the FDA recommending that food allergen resource information be included as part of the recommended curriculum in the FDA Voluntary National Retail Food Regulatory Program Standards, Standard #2, Trained Regulatory Staff and that a compendium of educational materials be made available to state/local regulators.*

*The Conference further recommends that the Food Allergen Committee work with the FDA to develop an appropriate educational component regarding food allergen awareness.*

The Executive Board of the Conference charged the CFP CFSRP Work Group with incorporating Food Allergen resource information as part of the recommended curriculum in Standard #2, Trained Regulatory Staff, FDA Program Standards (2009). The CFP CFSRP Work Group conducted follow-up interviews with State/local/tribal jurisdictions that participated in the CFP Assessment of Training Needs Pilot Project in 2007. One of the
objectives of this pilot project was to assess the appropriateness of the Standard #2 curriculum. The feedback received indicated overwhelming support for inclusion of an Allergen Management Course as part of the Standard #2 curriculum.

Appendix B-1 of Standard #2 contains a listing of the training curriculum expected to be completed by new hires or staff newly assigned to the regulatory retail food protection program. To be included in this listing, the subject matter must be in the form of a course with learning objectives. FDA's Division of Human Resource Development has developed several of the core elements for an Allergen Management Course. FDA's Center for Food Safety and Applied Nutrition is currently working on an Allergen Management guidance document. This document will include specific recommendations for the retail food industry. FDA is planning on collaborating with the CFP Food Allergen Committee to obtain feedback on the information contained in the Allergen Management guidance document. Once the document is finalized, FDA will include specific allergen management guidance for foodservice and retail food operations in the Allergen Management course.

The CFP CFSRP Work Group is recommending that the FDA Allergen Management course be incorporated as part of the Standard #2 post curriculum upon its completion and review by the CFP Food Allergen Committee. This course is not likely to be ready for posting by the 2010 Biennial Meeting but may be ready shortly there after. Rather than waiting another 2 years to deliberate the inclusion of this course into the Standard #2 post curriculum at the 2012 Biennial Meeting, the CFP CFSRP thinks it is prudent for the Conference to send a letter to FDA recommending that upon its full completion, the Allergen Management Course be included as part of the Standard #2 post curriculum when FDA revises the Standards document to reflect the recommended changes and/or revisions approved at the 2010 Biennial Meeting.

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.
- the inclusion of the finalized Allergen Management Course as part of the "post curriculum" training in Appendix, B-1, Standard 2 - Trained Regulatory Staff, FDA Draft Voluntary National Retail Food Regulatory Program Standards when the next subsequent version is drafted. Moreover, at the time the Allergen Management Course is ready for inclusion as part of Appendix B-1, the total post curriculum hours and total Standard 2 training hours should be revised accordingly.

Submitter Information:
Name: John A. Marcello, Co Chair
Organization: CFP Certification of Food Safety Regulation Professionals Work Group
Address: 51 W. 3rd Street, E-265
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.
Program Standard #2
APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

For state, local & tribal regulators to register on-line for free access to web courses, go to:
http://www.fda.gov/ora/training/

Pre-requisite (“Pre”) curriculum courses
(to be completed during the 25 joint inspection period AND prior to conducting any independent inspections)

PUBLIC HEALTH PRINCIPLES
Public Health Principles (90) FDA36

MICROBIOLOGY
Food Microbiological Control (series):
1. Overview of Microbiology (60) MIC01
2A. Gram-Negative Rods (60) MIC02
2B. Gram-Positive Rods & Cocci (90) MIC03
3. Foodborne Viruses (60) MIC05
4. Foodborne Parasites (90) MIC05
Mid-Series Exam (30) MIC16
5. Controlling Growth Factors (90) MIC06
6. Control by Refrigeration & Freezing (60) MIC07
7A. Control by Thermal Processing (90) MIC08
7B. Control by Pasteurization (90) MIC09
10. Aseptic Sampling (90) MIC13
12. Cleaning & Sanitizing (90) MIC15

PREVAILING STATUTES, REGULATIONS, ORDINANCES
Basic Food Law for State Regulators (60) FDA35
Basics of Inspection:
Beginning an Inspection (90) FDA38
Issues & Observations (90) FDA39
An Introduction to Food Security Awareness (60) FD251
(ORA U internet site)

2005 Food Code*
NOTE: Specific state/local laws & regulations to be addressed by each jurisdiction

COMMUNICATION SKILLS
Communication Skills for Regulators*

Curriculum (“Post”) courses
(to be completed anytime prior to Food Code Standardization AND within 18 months of hire or assignment to the regulatory retail food program)

MICROBIOLOGY
Food Microbiological Control (series):
7C. Control by Retorting (90) MIC10
8. Technology-Based Food Processes (120) MIC11
9. Natural Toxins (90) MIC12

HACCP
Basics of HACCP (series):
1. Overview of HACCP (60) FDA16
2. Prerequisite Programs & Preliminary Steps (60) FDA17
3. The Principles (60) FDA18

EPIDEMIOLOGY
Foodborne Illness Investigations (series):
1. Collecting Surveillance Data (90) FI01
2. Beginning the Investigation (90) FI02
3. Expanding the Investigation (90) FI03
4. Conducting a Food Hazard Review (90) FI04
5. Epidemiological Statistics (90) FI05
6. Final Report (30) FI06

ALLERGEN MANAGEMENT
NOTE: Upon completion by FDA’s DHRD and review by the CFP Allergen Committee – the Allergen Management Course will be listed as a post-curriculum course in Standard 2

( ) Average time in minutes required to take the course, 60 minutes equals .1 CEU, 90-120 minutes equals .2 CEUs
Estimated total hours for “Pre” courses are 42 hours.
Estimated total hours for “Post” courses are 22 hours.
Estimated total hours for completion of all Program Standard #2 coursework are 64 hours
Program Standard #2
APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

“Application” Courses and “Hands-On” Training

To provide application and transfer of web instruction to the FSIO’s work environment, a jurisdiction’s training program (inclusive of both classroom instruction and field training inspections) for staff newly hired or newly assigned to the retail food protection program must include a minimum of eighty percent (80%) of the learning objectives contained in the ORA U Application of Basics of Inspection/Investigation Course (FD170). A jurisdiction may use any one of the following options to address learning objectives not covered in their existing training programs.

1. Classroom Course: Application of the Basics of Inspection/Investigation FD170 (available at www.afdo.org; or course contents are available on CD through FDA’s Division of Human Resource Development’s lending library).
2. Courses and or field training exercises developed by State/local regulatory jurisdictions or other entities containing learning objectives and exercises equivalent to Option 1 above.
3. Discussions Questions & Exercises * (Conducted in the office or during the 25 joint inspections)

* Under construction

The learning objectives for the ORA U Application of the Basics of Inspection/Investigation course (FD170) are included below:

APPLICATION OF THE BASICS OF INVESTIGATION/INSPECTION – FD170

Applying Knowledge and Principles to the Real World of Inspection and Investigation of Food Establishments

Learning Objectives: Upon completion of this course, participants will be able to:

1. Demonstrate their knowledge of relevant food laws and regulations and how to apply them properly during inspections.
2. Demonstrate hands-on competency in the use of equipment and instruments used during food establishment inspections.
3. Successfully perform a hands-on exercise of aseptic sampling with sterile sampling containers using deli-style food samples.
4. Identify biological, physical, and chemical hazards and risks associated with foods and the operation of food establishments and will apply this knowledge to determine if a food establishment is in compliance.
5. Identify good basic inspection and communication techniques used in food processing, storage, and retail facilities.
6. Demonstrate their ability to identify the causes and symptoms of food borne illness, to identify implicated foods, to select proper foods for sampling, to determine individuals to interview, to identify the likely causative organism(s), and to recommend procedures that would prevent further outbreaks.
7. Demonstrate their ability to document quantitative observations, to distinguish fact from opinion, to gather, synthesize and document all facts, to avoid ambiguity, and to distinguish relevant from irrelevant facts.
Title:
Emergency Management Course Additions to Appendix B-1, Standard 2

Issue you would like the Conference to consider:
The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group is recommending that the basic Federal Emergency Management Agency (FEMA) courses related to National Incident Management Systems (NIMS) and Incident Command Systems (ICS) be included as part of the required "post curriculum" contained in Appendix B-1, Standard 2, of the FDA National Voluntary Retail Food Regulatory Program Standards (2009).

Public Health Significance:
State/local/tribal regulatory retail food safety professionals are often the first responders to a food safety or food defense emergency. Frequently these incidents impact multiple jurisdictions and require an operational response and management to ensure maximum public health protection.

The Federal Emergency Management Agency (FEMA) offers a national model training curriculum for all public officials with emergency response and coordination responsibilities. FEMA’s Emergency Management Institute provides many basic and advance National Incident Management Systems and Incident Command Systems courses on-line for no cost. These courses which include final examinations and certificate of completions are available from the following web link: http://training.fema.gov/IS/NIMS.asp.

Three basic NIMS and ICS courses are being recommended by the CFP CFSRP work group for inclusion as part of the post curriculum outlined on Appendix B-1, Standard 2.

IS-100.a, Introduction to Incident Command System, ICS-100
This course provides training and resources for personnel who require a basic understanding of the Incident Command System (ICS).

**IS-200.a, ICS for Single Resources and Initial Action Incidents, ICS-200**

This course provides training and resources for personnel who are likely to assume a supervisory position within the Incident Command System (ICS). The primary target audiences are response personnel at the supervisory level.

**IS-700.a, NIMS An Introduction, ICS 700**

This course provides training and resources for the National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private sector, and nongovernmental organizations to work together during domestic incidents.

Each of these courses is three hours (total of nine hours).

Successful completion of the learning objectives contained in these three courses establishes a solid foundation for preparing regulatory retail food protection staff to prevent, respond to, recover from, and mitigate the effects of incidents regardless of cause, size, location and complexity in order to reduce the loss of life, property damage, and harm to the environment.

**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:

- include the following three Federal Emergency Management Agency (FEMA) courses as part of the post curriculum retail food protection training program as contained in Attachment A with this Issue (changes are noted with shaded background)
  - IS-100.a, *Introduction to Incident Command System*, ICS-100
  - IS-200.a, *ICS for Single Resources and Initial Action Incidents*, ICS 200
  - IS-700.a, *NIMS an Introduction*, ICS-700; and
- update the post curriculum courses and total training hours listed in Appendix B-1 to reflect the additional 9 hours needed to complete the three FEMA courses. Any references to these training hours in other parts of the FDA Program Standards are to be updated to ensure consistency.

**Submitter Information:**

Name: John A. Marcello, Co-Chair
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City/State/Zip: Tempe, AZ 85281
Telephone: 480 829-7396 Fax: 480 829-7677 ext. 35
E-mail: john.marcello@fda.hhs.gov

Attachments:
- "Program Standard 2 - Appendix B-1 Curriculum for Regulatory Retail Food Saf"

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APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers
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NOTE: Specific state/local laws & regulations to be addressed by each jurisdiction

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EMERGENCY MANAGEMENT
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2. IS-200.a, ICS for Single Resources and Initial Action Incidents, ICS-200
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4. Identify biological, physical, and chemical hazards and risks associated with foods and the operation of food establishments and will apply this knowledge to determine if a food establishment is in compliance.

5. Identify good basic inspection and communication techniques used in food processing, storage, and retail facilities.

6. Demonstrate their ability to identify the causes and symptoms of food borne illness, to identify implicated foods, to select proper foods for sampling, to determine individuals to interview, to identify the likely causative organism(s), and to recommend procedures that would prevent further outbreaks.

7. Demonstrate their ability to document quantitative observations, to distinguish fact from opinion, to gather, synthesize and document all facts, to avoid ambiguity, and to distinguish relevant from irrelevant facts.
Title:

Clarifying language for Step 2, Standard 2 - Program Standards

Issue you would like the Conference to consider:

Revise Step 2, Standard 2 - Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards (2009)

Public Health Significance:

The CFP Certification of Food Safety Regulation Professionals (CFSRP) Work Group received a charge from the 2008 Biennial Meeting to re-examine the Standard 2 criteria requiring new hires or staff newly assigned to the retail food protection program to conduct a minimum of 25 joint field inspections with the jurisdiction's designated trainer. Feedback from the jurisdictions that participated in the 2007 Assessment of Training Needs (ATN) pilot project, administered through the Conference, indicated a wide variation in opinion as to the appropriate number of joint field training inspections needed to prepare new Food Safety Inspection Officers (FSIO) for conducting independent inspections of foodservice and retail food facility types. A summary of the jurisdiction responses to appropriate number of joint field training inspections is contained on pages 48 and 49 of the 2007 Assessment of Training Needs Pilot Project Report which is available from the Conference for Food Protection web site.

Sixty-five percent (65%) of the jurisdictions participating in the pilot project indicated that 25 joint field training inspections was the appropriate minimum number to include in Standard 2. Of the 10 that responded with a "no", the number of joint field training inspections recommended ranged from 10 to 100, with an average of 75. From comments received from the pilot jurisdictions, the appropriate number of joint field training inspections is primarily based on an individual's skill, capability and affinity for learning new tasks or accomplishment of certain skills. These learning characteristics will vary from one individual to another.
In 2009, the CFP CFSRP Work Group conducted follow-up interviews with the jurisdictions that participated in the pilot project to assess their experiences with the continued use of the CFP Field Training Manual and forms. Twenty-two jurisdictions were canvassed, fifteen (68%) indicated a minimum of 25 joint field inspections was the appropriate number. A recurring comment from these jurisdictions was that the number of joint field inspections was not the performance measure they used to determine a trainee's readiness to conduct independent inspections. The ultimate performance measure is the trainee's ability to successfully demonstrate all the competencies listed on the CFP Field Training Plan contained in Appendix B-2, Standard 2.

Many jurisdictions indicated that having a minimum of 25 joint field training inspections specifically referenced in Standard 2, provided the jurisdiction's trainer with expectations on time commitments/resources that should be devoted to the training process. It provides for a degree of quality assurance and expectation of the training process for both the candidate and trainer.

The CFP CFSRP Work Group has deliberated the information received from jurisdictions that have implemented the Standard 2 training process. Based on this research, the CFP CFSRP Work Group is recommending that the Conference retain the reference to the minimum of 25 joint field inspections in Step 2, Standard 2, but also include language that would allow a trainer to conduct a fewer number provided that exception was supported by written documentation, such as completion of the CFP Field Training Plan included in Appendix B-2, Standard 2.

**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:

*Note, in the context below:
-- FSIO is a "Food Safety Inspection Officer" and the acronym is spelled out and defined earlier in the Standard.
-- wording to be inserted is indicated with underline format; wording to be deleted is with strike through.*

**REQUIREMENT SUMMARY**

**STEP 2** - Completion of a **minimum** of 25 joint field training inspections or a sufficient number of joint inspections determined by the trainer and verified through written documentation that the FSIO has demonstrated all performance elements and competencies to conduct independent inspections of retail food establishments,

AND
successful completion of the jurisdiction's FSIO Field Training Plan similar to the process outlined in Appendix B-2.

**Step 2: Initial Field Training and Experience**

The regulatory staff conducting inspections of retail food establishments must conduct a minimum of 25 joint field inspections with a trainer or the jurisdiction's designated staff member, who has successfully completed all training elements (Steps 1 - 3) required by this Standard. The 25 joint field inspections are to be comprised of both "demonstration" (trainer led) and "FSIO-led" (trainee led) inspections and include a variety of retail food establishment types available within the jurisdiction. If the trainer determines that the FSIO has successfully demonstrated the required performance elements and competencies, a lower minimum number of joint field training inspections can be established for that FSIO provided there is written documentation, such as the completion of the CFP Field Training Plan in Appendix B-2, to support the exception.

Demonstration inspections are those in which the jurisdiction's trainer and/or designated staff person takes the lead and the FSIO observes the inspection process. FSIO-led inspections are those in which the candidate takes the lead and demonstrates competencies identified in the jurisdiction's retail food program training plan. The jurisdiction's trainer is responsible for determining the appropriate combination of demonstration and FSIO-led inspections based on the FSIO's food safety knowledge and performance during the joint field training inspections.

The joint inspections must be conducted using a field training process and forms similar to ones presented in the *CFP Field Training Manual* included as Appendix B-2. The *CFP Field Training Manual* consists of a training plan and log, trainer's worksheets, and procedures that may be incorporated into any jurisdiction's retail food training program. It is a national model upon which jurisdictions can design basic field training and provides a method for FSIOs to demonstrate competencies needed to conduct independent inspections of retail food, restaurant and institutional foodservice establishments.

Jurisdictions are not required to use the forms or worksheets provided in the *CFP Field Training Manual*. Equivalent forms or training processes can be developed. To meet the intent of this Standard, documentation must be maintained that confirms FSIOs are trained on, and have demonstrated, the performance element competencies needed to conduct independent inspections of retail food and/or foodservice establishments.

**NOTE:** The *CFP Field Training Manual* is designed as a training approach providing a structure for continuous feedback between the FSIO and trainer on specific knowledge, skills and abilities that are important elements of effective retail food, restaurant, and institutional foodservice inspections.

- The *CFP Field Training Manual* is **NOT** intended to be used for certification or licensure purposes.
Regulatory jurisdictions are **NOT** to use the CFP Field Training Manual for administrative purposes including but not limited to, job classifications, promotions, or disciplinary actions up to and including termination.

FSIOs must successfully complete a joint field training process, similar to that presented in the CFP Field Training Manual, prior to conducting independent inspections and re-inspections of retail food establishments in risk categories 2, 3, and 4 as presented in Appendix B-3 (taken from Annex 5, Table 1 of the 2005 FDA Food Code). The jurisdiction's trainer/food program manager can make a determination as to the FSIO's readiness to conduct independent inspections of risk category 1 establishments as defined in Appendix B-3 at any time during the training process.

**NOTE:** The criterion for conducting a minimum of 25 joint field training inspections is intended for new employees or employees new to the food safety program. In order to accommodate an experienced FSIO, the supervisor/training officer can in lieu of the 25 joint field inspections

- Include a signed statement or affidavit in the employee's training file explaining the background or experience that justifies a waiver of this requirement; and
- The supervisor/training officer must observe experienced FSIOs conduct inspections to determine any areas in need of improvement. An individual corrective action plan should be developed outlining how any training deficiencies will be corrected and the date when correction will be achieved.

**Reference:**

APPENDIX B-2: CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers, Standard #2 - Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards, referenced in this Issue is available from the following CFP web link:

www.foodprotect.org/media/guide/CFPFieldTrainingManual-1-7-08.pdf

**Submitter Information:**

Name: John A. Marcello, Co-Chair  
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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.
Clarifying Definitions for Step 4, Standard 2 - Program Standards

Issue you would like the Conference to consider:

Revise the definitions for "Trainer" and "Training Standard" to clarify the differences in performance responsibilities and qualifications. In addition, revise Step 4, Standard 2 - Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards (2009) to include a reference to the "Training Standard" qualifications listed in the definition section of the FDA Program Standards document.

Public Health Significance:

In 2006, the Conference unanimously approved a recommendation from the CFP Certification of Food Safety Regulation Professionals (CFSRP) work group to revise the minimum number of inspections a Food Safety Inspection Officer (FSIO) must successfully complete as part of their Food Code standardization process. The minimum number of standardization inspections in Step 4, Standard 2, was reduced from 8 to 4 for FSIOs who would NOT be expected to serve as "Training Standards" responsible for standardizing other FSIOs. The standardization process must be similar to the "FDA Standardization Procedures" and address the five following performance areas:

1. Risk-based inspections focusing on the factors that contributed to foodborne illness;
2. Good Retail Practices;
3. Application of HACCP Principles;
4. Inspection equipment; and
5. Communication.
The FDA standardization procedures are based on a minimum of 8 inspections and include performance areas related to the development of HACCP flow charts, completion of a risk control plan, and verification of a HACCP Plan. FDA standardizations are conducted with regulatory retail food protection personnel who would be expected to serve as "Training Standards" responsible for standardizing other FSIOs.

Jurisdictions participating in the FDA Program Standards have indicated that the Standard 2 criteria does not clearly address the differences in the standardization process needed to be a "Training Standard" versus standardization of FSIOs who will NOT conduct standardizations with other FSIOs.

The CFP CFSRP work group is recommending that the definitions of "Trainer" and "Training Standard" contained in the FDA Program Standards (2009) be revised to clearly identify the requirements for each of these roles. In addition, the work group recommends that Step 4, Standard 2, be revised to include a reference to the requirements for conducting field standardization of FSIOs as presented in the work group's proposed "Training Standard" definition.

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.

*Note: new language is underlined; language to be deleted is with strike through.*

**DEFINITIONS**

The following definitions apply in the interpretation and application of these Standards.

24) **Trainer** - an individual who has successfully completed the training elements as outlined in Steps 1-3, Standard 2, and is recognized by the program manager as having field experience and communication skills necessary to train new employees.

1. Satisfactory completion of the prerequisite curriculum;

2. Completion of a field training process similar to that contained in Appendix B-2, and

3. Completion of a minimum of 25 independent inspections and satisfactory completion of the remaining course curriculum.
25) **Training Standard** - a trainer who has successfully completed the following training **AND** and standardization elements in Standard 2 and is recognized by the program manager as having the field experience and communication skills necessary to train and standardize new employees. The training and standardization elements include:

1. Satisfactory completion of the prerequisite curriculum;

2. Completion of a field training process similar to that contained in Appendix B-2;

3. Completion of a minimum of 25 independent inspections and satisfactory completion of the remaining course curriculum; and

4. **Successful completion of a standardization process based on a minimum of eight inspections that includes development of HACCP flow charts, completion of a risk control plan, and verification of a HACCP Plan, similar to the FDA Standardization Procedures.**

**Step 4 - Food Safety Inspection Officer - Field Standardization**

Within 18 months of employment or assignment to the retail food program, staff conducting inspections of retail food establishments must satisfactorily complete four joint inspections with a "training standard" using a process similar to the "FDA Standardization Procedures." The jurisdiction's "training standard" must have met all the requirements for conducting field standardizations as presented in the definition section for these Standards. The standardization procedures shall determine the inspector's ability to apply the knowledge and skills obtained from the training curriculum, and address the five following performance areas:

1. Risk-based inspections focusing on the factors that contribute to foodborne illness;

2. Good Retail Practices;

3. Application of HACCP;

4. Inspection equipment; and

5. Communication.

**Submitter Information:**

<table>
<thead>
<tr>
<th>Name:</th>
<th>John A. Marcello, Co-Chair</th>
</tr>
</thead>
<tbody>
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<td>CFP Certification of Food Safety Regulation Professionals Work Group</td>
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</tr>
</tbody>
</table>

*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.*
Title:

Re-create - CFSRP 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 2010-2012 CFP Certification of Food Safety Regulations Professional (CFSRP) Work Group should be re-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 all regulatory retail food safety professionals - including third party independent auditors - 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 all 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.

Results from the follow-up interviews with Assessment of Training Needs ATN pilot jurisdictions indicated support for the development of an audit tool that mirrored the CFP Field Training process. The Work Group reached consensus that the audit process, whether included as part of Standard 2 or provided as a stand alone process, should be fully compatible with the CFP Field Training Plan included as part of Appendix B-2, Standard 2, FDA Program Standards (2009).

In order to eliminate potential program redundancies, the CFP CFSRP Work Group is recommending a new 2010-2012 charge to collaborate with FDA 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 to prevent any unnecessary redundancies in the creation of work products or assignment of tasks/responsibilities. This collaborative effort will include an assessment of the need and potential structure for incorporating Food Safety Inspection Officer "Performance Audits" as a component of the Program Standards.

In addition, a new charge for this Work Group is proposed based on an increase in the number of independent third party auditors contracted to conduct regulatory oversight inspections of institutional foodservice, restaurant, and retail food store facilities. Some areas of the country are beginning to disband the local regulatory retail food protection agency and contract the work to nongovernmental organizations. Currently, a national standard upon which to evaluate the education and qualifications of independent third party auditors does not exist. Legislation has been introduced at the federal level that contains language that would recognize third party audits as a legitimate use of resources to enhance food safety. Since these issues are not solidified at the time of submittal of the Work Group report to the Conference of Food Protection, a closer look over the next two year cycle is in order.

**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 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 opportunity 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.

Submitter Information:

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Attachments:

- "Proposed Performance Audit Pilot Project Objectives and Time Line"

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.
Objective of Pilot Project

1. Evaluate the FDA Retail Food Level I Performance Audit documents [i.e., Guide to the Performance Audit Process for State, Local & Tribal Food Safety Inspection Officers (hereafter FSIO), Retail Food Level I Performance Audit Criteria for FSIO, Audit Failure Reference Guide, Level I FSIO Audit Results Summary Form, Level I FSIO Audit Worksheet, Level I FSIO Auditor Feedback Form]
   - Review the performance elements and criteria for omissions, additions, and items not applicable.
   - Determine the strengths and weaknesses of the documents.
   - Verify ease of use of the documents, including instructions and format. Are jurisdictions able to utilize documents independently without direct supervision or oversight?
   - Determine length of time required to use the documents and complete the Audit process.

2. Assess the use of the Audit process
   - Verify that the Audit process is appropriate to assess the FSIO’s knowledge, skills and ability when applying the competencies required during a field inspection.
   - Verify the appropriate placement of the Audit process application tool; as a stand-alone document or within the Voluntary National Retail Food Regulatory Program Standards as part of the training process (Standard 2 – Trained Regulatory Staff) or as part of the ongoing quality assurance program (Program Standard 4 – Uniform Inspection Program).

3. Gather and analyze data from the pilot study and prepare a Pilot Project Report for the Conference for Food Protection Certification of Food Safety Regulation Professionals Work Group (Work Group) at the 2012 biennial meeting of the Conference for Food Protection (Conference).
**Pilot Project Timeline**

<table>
<thead>
<tr>
<th>Month</th>
<th>Event</th>
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</thead>
<tbody>
<tr>
<td>March 2010</td>
<td>Begin development of Pilot Project packages / Fact Sheet (web-based, paper, etc.)</td>
</tr>
<tr>
<td>April 2010</td>
<td>Solicitation of interested jurisdictions during the 2010 biennial meeting of the Conference</td>
</tr>
<tr>
<td>May 2010</td>
<td>Selection of jurisdictions for Pilot Project (Minimum of 8 jurisdictions desired)</td>
</tr>
<tr>
<td>June 2010</td>
<td>Send out Pilot Project packages to selected jurisdictions and notify jurisdictions not selected</td>
</tr>
<tr>
<td>July 2010</td>
<td>Conference call with selected jurisdictions (Overview of Pilot Project objectives, goals, methodology, data collection, etc.)</td>
</tr>
<tr>
<td>January 2011</td>
<td>Interim data collection from jurisdictions (Data may be received through CFP website)</td>
</tr>
<tr>
<td>February 2011</td>
<td>Interim conference call with jurisdictions (Review of data received to date, overview of progress, solicitation of questions, reminder of deadlines, etc.)</td>
</tr>
<tr>
<td>July 2011</td>
<td>Completion of field component of Pilot Project and collection of completed data reports from jurisdictions</td>
</tr>
<tr>
<td>August 2011</td>
<td>Convene conference call focus group of jurisdiction representatives to review Pilot Project outcomes</td>
</tr>
<tr>
<td>December 2011</td>
<td>Submit final Work Group report and any Issues for consideration at the 2012 biennial meeting of the Conference.</td>
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</table>
Methodology

Selection of jurisdictional participants: Criteria for participation in the Audit Pilot Project is as follows:

- Jurisdictions MUST be enrolled in Program Standards to participate.
- Jurisdictions must agree to follow the training criteria specified in Program Standard 2, Steps 1 – 3 (includes use of a field training process and documentation similar to that contained in the CFP Field Training Manual and forms, Appendix B-2) with newly hired FSIOs while a participant in the Pilot Project.
- Jurisdictions must have a sufficient number of FSIOs that have successfully completed Standard 2, Steps 1-3.
- Jurisdictions must make a commitment to meet the Pilot Project timelines, reporting protocols, and participate in conference calls.
- Jurisdictions must agree to publication of their participation in Pilot Project Report (note: individual responses will remain confidential).
- Any jurisdictions not selected will be notified.

Distribution of Pilot Project Package: All selected jurisdictions will receive an Electronic Pilot Project Package containing the following materials:

- Copy of newly revised Standard 2 – Trained Regulatory Staff(as approved by the 2010 biennial meeting of the Conference) and Standard #4 – Uniform Inspection Program
- Copy of the FDA Retail Food Level I Performance Audit process documents including instructions.
- Copy of the CFP Field Training Manual.
- Performance Audit Pilot Project protocol and timeline.
- Contact information for Performance Audit Pilot Project Director.

Launch of Pilot Project: Pilot Project will be initiated with a conference call of all participating jurisdictions. The purpose of the conference call will be to provide an overview of the Pilot Project objectives, goals, timeline, methodology, participant expectations, data collection, and other reporting criteria.

Interim Progress Review of Pilot Project: Participating jurisdictions will submit reporting documents completed to date to Pilot Project Director. Data will be analyzed and summarized to identify any potential challenges, omissions, or errors that would hinder completion of the project. Additionally, a conference call will be conducted with participating jurisdictions for additional verbal feedback and clarification.

Data Collection and Reporting: The design of the Data Collection and Reporting Instrument will incorporate the following:

- A questionnaire designed to solicit information.
- Demographical information
- Focus Group(s) designed to solicit additional anecdotal information and recommendations.
**Roles and Responsibilities**

The following roles and responsibilities are integral to this Pilot Project:

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>Conference for Food Protection Certification of Food Safety Regulation Professionals Work Group</td>
<td>Staff all Pilot Project Activities, review the Pilot Project outcomes and make further recommendations to the Conference.</td>
</tr>
<tr>
<td>Pilot Project Subgroup</td>
<td>Prepare Pilot Project Package, prepare Fact Sheet, solicit jurisdictional participation, select participants, distribute Pilot Project Package, receive Pilot Project data from the Pilot Project Director, tabulate and analyze data, summarize the results of the Pilot Project and prepare the Pilot Project Report (including recommendations) for presentation to the 2012 biennial meeting of the Conference.</td>
</tr>
<tr>
<td>Pilot Project Director</td>
<td>Serve as the central point of contact for the Pilot Project, collect data and forward to the Pilot Project Subgroup, coordinate focus group meetings, and present Pilot Project findings to the Conference.</td>
</tr>
<tr>
<td>Jurisdictional Participants</td>
<td>Carry out the activities of the Pilot Project including following the criteria specified in <em>Retail Food Level I Performance Audit</em> documents. Jurisdictions must be active participants in the FDA Program Standards and will have met the requirements of Standard 2, Steps 1 – 3, relative to use of the <em>CFP Field Training Manual</em>; must also be able to assess the feasibility of using the Audit documents with newly hired or existing FSIOs relative to applicability to Standard 4; completing the data reporting instruments; participating in focus group calls; agreeing to publication of Pilot Project participation; and providing feedback to the Pilot Project Subgroup.</td>
</tr>
<tr>
<td>Conference for Food Protection</td>
<td>Provide assistance as requested by the Work Group to disseminate and collect information.</td>
</tr>
<tr>
<td>FDA</td>
<td>Will collaborate with the Pilot Project Subgroup in the design and format of the Pilot Project, analysis of data, and subsequent recommendations for use and placement of the Audit documents and/or process.</td>
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</tbody>
</table>


Analysis of Data

The Pilot Project Subgroup will analyze the data by tabulating and summarizing all responses to the questionnaire and the focus group meetings. Based on the results of the Pilot Project, the Work Group will determine necessary or recommended changes that need to be made to the training/Audit documents and/or process.

Preparation of Pilot Project Report

A report of the results of the Pilot Project will be created. The report will include a summary of the results of the data tabulation (including participant list, demographics, and questionnaire results), a list of recommended changes to the Audit documents and a list of recommended changes to the Voluntary National Retail Food Regulatory Program Standards (Standard #2 and/or Standard #4). This report will be submitted to the 2012 biennial meeting of the Conference for Food Protection.

Additionally, Pilot Project results and recommendations will be developed in collaboration with FDA’s Division of Human Resource Development to assist in the development of a performance assessment specific to the responsibilities of state, local and tribal retail food safety inspection officers.
Conference for Food Protection
2010 Issue Form

Title:
Report - FPMTTC Committee

Issue you would like the Conference to consider:
Please acknowledge the final report as submitted and thank the 2008-2010 Food Protection Manager Training, Testing and Certification Committee members for their effort in addressing the charges from the 2008 Biennial Meeting.

Public Health Significance:
Food establishments have fewer critical risk factors when food there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection’s Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf)

Recommended Solution: The Conference recommends...:
acknowledging the attached Committee report and extending thanks to the Committee members for their work.

Submitter Information:
Name: Joyce Jensen, REHS, CP-FS, Committee Chair
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Telephone: 402-441-8033 Fax: 402-441-6206
E-mail: jjensen@lincoln.ne.gov
Attachments:

- "Proposed Standards 2010"
- "Bylaw Revision 2010"
- "CFPMTTC Committee Membership"
- "Final Committee Report 2010"

*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.*
Committee Charge(S):

2008 CFP Issue II-037
The Conference recommends this standing committee be charged to continue working with the Conference for Food Protection (CFP) Executive Board and the American National Standards Institute (ANSI)-CFP Accreditation Committee (ACAC) to maintain the standards in an up-to-date format.

2008 CFP Issue II-039
To evaluate Annex B Section B3, to consider incorporating the training recommendations suggested by the Committee as shown below.

Annex B Section B3: Qualifications for Certification. In order to become a Certified Food Protection Manager an individual must pass a food safety certification examination from an accredited certifying program recognized by the CFP. To prepare for certification, it is recommended that the individual obtain training based on the content of the areas of knowledge prescribed in Paragraph 2-102.11 (C) of the FDA Food Code and content outlined based on job task analyses developed by accredited certification organizations.

Committee Activities and Recommendations:
Following the 2008 CFP biennial meeting, the Food Protection Manager Training, Testing, and Certification Committee (FPMTTC) met in person twice and held several conference calls to address the charges and to review and revise the Committee Bylaws.

The Committee Chair would like to thank the Committee Vice-Chair, Jeff Hawley, for his valued assistance, and all of the Committee Members for their hard work and input on addressing the CFP charges. The Committee would like to thank: Jeff Hawley and Harris Teeter, Inc. for hosting the September 10, 2008 conference call; Dr. Cynthia Woodley and David Cox and Professional Testing for hosting the January 14 and 15, 2009 face-to-face meeting at in Orlando, Florida; Frank Ferko and US Foodservice for hosting the August 26 and 27, 2009 face-to-face meeting in Rosemont, Illinois; and Katie Piche and National Restaurant Association Solutions for hosting the November 19, 2009 Committee web conference call.
The Committee completed work on the two charges from the 2008 CFP Biennial Meeting. For the first charge (from 2008 Issue II-037), several concerns came up relative to the Standards for Accreditation of Food Protection Manager Certification Programs (hereafter referred to as Standards) that were discussed, and proposed revisions to the Standards have been submitted as Issues. For the second charge (from 2008 Issue II-039) to propose a revision to the Annex B Section B3, the Committee came up with alternative language that gives guidance on training; this language has been submitted as a separate Issue.

The proposed changes to the Standards Section 5 were the most challenging for the Committee. It is important to remember the history of Food Protection Manager Certification. This program had been thoroughly researched and debated over many years when the CFP determined that a legally defensible nationally recognized third party accreditation of certification programs was needed.

To have a certification program, standards are necessary, and then certification organizations would be accredited by an accrediting organization that would independently evaluate if the certification organization’s program meets the standards. A certification is not a record of training attended by an individual. A certification is the result of a legally defensible process based on a current job analysis that demonstrates an individual has the knowledge required to protect the public from foodborne illness.

It may help to refer to the attached Standards for Accreditation of Food Protection Manager Certification Programs in Annex A and the definitions in Section 1 to assist with understanding the accreditation and certification process. The following comparison table assists in clarifying the differences between “certification” programs and “certificate” programs.

<table>
<thead>
<tr>
<th>CERTIFICATION Program</th>
<th>CERTIFICATE Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Results from an assessment process</td>
<td>Results from an educational process</td>
</tr>
<tr>
<td>Awarded by a third party</td>
<td>Awarded by training and educational programs</td>
</tr>
<tr>
<td>Indicates mastery-demonstration of required competencies to practice</td>
<td>Indicates successful completion of a course/s</td>
</tr>
<tr>
<td>Has on-going requirements; holder must demonstrate s/he continues to meet the requirements</td>
<td>No on-going requirements. Individuals may or may not demonstrate knowledge of course at the end of a set period in time</td>
</tr>
<tr>
<td>Certification owned by the certification body-can be taken away</td>
<td>Certificate owned by the certificate holder.</td>
</tr>
</tbody>
</table>

A certification examination is developed and administered by an independent third party so that the outcome is valid. “Teaching to the test,” assisting in the “understanding” of the questions, or otherwise “helping” with the test by an instructor, trainer, or educator would invalidate the certification process, no matter how good the intentions. However, when the Standards were developed, it became evident a system to train and test thousands of food protection managers was already in place across the country, and that it would be a challenge to change the existing process. So to compromise, the CFP Standards included requirements to provide a “firewall” that separates “training” and “testing” while allowing an instructor, trainer, or educator to administer the test. Allowing a trainer to administer the examination is unique for a certification.
process and has continually been the source of problems and/or concerns for food protection manager certification programs, ANSI, and ACAC.

To address this challenge, the FPMTTC Committee is proposing a change to the Standards Section 5 that would **NOT** allow an instructor, trainer, or educator to be a test administrator or proctor. The Standards Section 5, as proposed, would still allow an instructor, trainer, or educator and a test administrator or proctor to be part of the same organization/agency. Test administrators and proctors would, however, be restricted from participating with training.

This proposed change to the Standards Section 5 was not a unanimous decision by the Committee. The following are some advantages and concerns of the proposed revision as discussed by the Committee:

**Advantages of separating the instructor/educator/trainer from the test administrator/proctor:**

- CFP and FDA are supportive of a “certification” program which is legally defensible.
- It will be a step in the right direction, rather than forcing a total separation requiring a separate organization to administer the test.
- According to ANSI, typical certification programs beyond the food industry do not allow an instructor/educator/trainer to be a test administrator/proctor. Our current process blurs the lines and gives the appearance of a certificate program (take a course and an exam) rather than a certification program.
- Not taking action may result in jurisdictions dropping the certification requirement because of an invalid process.
- The current process has created opportunities for violation of exam security by allowing an instructor/educator/trainer to have direct contact with the exams.
- The credibility of the CFP and the Standards for Accreditation of Food Protection Manager Certification Programs will be jeopardized if this issue is not addressed.
- What a program is worth is the value it takes to achieve it. The expense, training, and degree of knowledge needed to be certified reflect the value of the certification. If the process is not valid or if there are opportunities in the process that allow individuals to get around the requirements, it devalues the programs for all others who have achieved the certification.
- The certification providers would have more control over the integrity and accountability of the exam administration process by restricting who has access to the examinations.
- There have been studies that indicate that when there is clear singular role identity (such as “test administrator” vs. “trainer”) there is better adherence to the rules and requirements for that specific role, and less chance of deviation from the role.
Concerns of separating the instructor/educator/trainer from the test administrator/proctor:

- Having an instructor/educator/trainer separate from a test administrator/proctor may add to the expense of the certification process. This may discourage access to manager certification rather than encourage it.

- When training and testing are not combined, there is additional time needed if the candidate has to take the exam at a different location.

- The separation could decrease in-person trainings and increase “online training” options, which may not be completely embraced by some regulatory jurisdictions.

- The separation could have a negative impact on the training and testing opportunities in rural and low population areas.

- The separation could have a negative impact on entities that currently have one person that both instructs a course and administers the test.

- There are alternatives to certification, including certificate programs where the manager would be trained and then pass a non-certified exam; however, the result may not have the same degree of assurance that a manager has the knowledge required to protect the public from foodborne illness.

- Dishonest people will always be a problem that has to be addressed and separating the roles may not necessarily add any greater security to the process.

The above concerns were discussed by the Committee and were found to be very legitimate but the overarching factor is maintaining the credibility of the Food Protection Manager Certification Program. The intent is to have a certification process that minimizes the chances of inappropriate activity and gives the certification organizations the ability to address situations of concern.

ANSI has recommended that the Committee look at how the Standards could be brought more in alignment with International Standard ISO17024 which sets out general requirements for an organization's certification program for individual persons.

In the continuing process to maintain the Standards in an up-to-date format per 2008 Issue II-037, the Committee completed draft revisions to the FPM TTC Committee Bylaws and is presenting the following proposals as Issues:

- To change and shorten the Committee name.
- To modify composition of the Committee to include representatives of training providers while not increasing the total number of Committee members.
- To define a quorum to be one (1) more than half of the filled Committee positions, rather than a specific number.
- To allow the Committee Chair and Vice-Chair to be selected from any representative group on the Committee.
• Other non-substantive clean-up bylaw changes.

The Committee agreed that a future charge is to determine how Committee membership vacancies and change of membership representation are addressed in the Committee bylaws and propose changes if needed.

**REQUESTED ACTION:**

The Committee submits the following Issues to the 2010 CFP Biennial Meeting:

1) **Report – FPMTTC Committee**

   This Issue requests that the Conference acknowledge the final report as submitted, and thanks the Committee members for their effort in addressing the charges from the 2008 Biennial Meeting.

2) **Amend training language in Standards for Accreditation**

   This Issue addresses charge from 2008 CFP Issue II-039 with proposed clarification to Annex B Section B3 regarding training recommendations.

3) **Amend Section 5 of the Standards for Accreditation**

   This proposed Section 5 revision includes new and revised subsections establishing the following: an instructor, trainer, or educator cannot serve as test administrator, or proctor; roles and responsibilities for certification personnel; competency requirements for test administrators and proctors; item and examination exposure controls; and establishes formal agreements with test administrators/proctors that include a code of conduct, conflict of interest, and a statement of consequences for breach of the agreement. In addition, some of the subsections have been reorganized for clarity and renumbered accordingly.

4) **Remove reference to “monitor” in the Standards for Accreditation**

   The term monitor is not currently used by certification organizations and was defined as a proctor. The term is no longer applicable.

5) **Change name of the “FPMTTC Committee”**

   The proposed revision to change the Committee name from “Food Protection Manager Training, Testing and Certification Committee” to “Food Protection Manager Certification Committee” to more accurately reflect the actual food protection manager certification program as written by the standards.

6) **Revise Bylaws of the FPMTTC Committee**

   This FPMTTC Committee proposed Bylaw revision includes: adding training providers to the composition of the Committee, establishing that a quorum is based on the number of filled positions, and some non-substantive clean-up language.
7) **New or Continuation Charges for the renamed Committee**

The Conference recommends that this standing committee 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.

- investigate if the *Standards for Accreditation of Food Protection Manager Certification Programs* should create more alignment with ISO17024 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.

**ATTACHMENTS:**

*Standards for Accreditation of Food Protection Manager Certification Programs*

*Food Protection Manager Training, Testing, and Certification Committee Bylaws*

*Food Protection Manager Training, Testing, and Certification Committee Member Roster*

**COMMITTEE MEMBER ROSTER:**

Attached
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 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 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 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 meet the following CFP standards and provide evidence of compliance through the documentation requested in the application. In addition, the certification organization must agree to abide by certification policies and procedures which are specified by the CFP Manager Training, Testing and Certification Committee, hereinafter referred to as the MTTC 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 MTTC Committee will work directly with the **accrediting 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 MTTC 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 2-102.11 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 Paragraph 2-102.11(B).

**Modifications and Improvements**

The MTTC 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 Biennial Conferences under the title, Standards for **Accreditation of Food Protection Manager Certification Programs**.

The revision and reformatting of the document were made after a comprehensive MTTC Committee review of each section. 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.

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 competency. Certification organizations have a responsibility to ensure that the certification process is fair to the candidates 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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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 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. 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 development and administration.

   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.

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 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. responsibility for identifying hazards in the day-to-day operation of a food establishment that provides food for human consumption;

   b. development or implementation of specific policies, procedures or standards aimed at preventing foodborne illness;
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. 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 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 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 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 forms** means alternate sets of test questions (with at least 25% alternate questions) to assess the same *competencies*, conforming to the same *examination specifications*.

1.19 **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 **Examination version** means a test in which the exact set of items in an *examination form* is presented in another order, language, manner or medium.

1.21 **Food establishment**

   a. Food establishment means an operation that stores, prepares, packages, serves, vends, or otherwise provides food for human consumption:

      i. 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. 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. Food establishment includes:

      i. 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. 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.

   c. Food establishment does not include:

      i. an establishment that offers only prepackaged foods that are not potentially hazardous;

      ii. a produce stand that only offers whole, uncut fresh fruits and vegetables;

      iii. a food processing plant;
iv. 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. an area where food that is prepared as specified in Subparagraph (c) (iv) of this definition is sold or offered for human consumption;

vi. 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. a private home that receives catered or home-delivered food.

1.22 Food safety certification examination means an examination in food safety approved in accordance with the provisions of this program.

1.23 Instructor means an individual who teaches a course that includes competencies in prevention of foodborne illness.

1.24 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.

1.25 Item sequence means the presentation order of test items in an examination.

1.26 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. Tasks are the individual functions, whether mental or physical, necessary to carry out an aspect of a specific job.

b. Knowledge, skills, and abilities (KSAs) include the information and other attributes that the worker must possess in order to perform effectively and safely. They include information and understanding as well as learned behaviors and natural attributes.

1.27 Legal 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.
1.28 **Legally 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’ 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 knowledge, skills, and abilities required to protect the consumer from foodborne illness.

1.29 Monitor means the same as Proctor (See Proctor.)

1.30 Overexposure means the relative frequency in which a test item which is presented across all computerized tests has undermined the integrity of the tests. Whether a test item is overexposed or not is based upon the type of exam test item (pictorial vs. written) and its frequency of use.

1.31 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 have the ability to observe examinee behaviors, accurately distribute and collect test materials, and assist the test administrator as assigned. They must have training or documented successful experience in monitoring procedures and must affirm in writing an agreement to maintain test security and to assure that they have no conflict of interest.

1.32 Psychometric means scientific measurement or quantification of human qualities, traits or behaviors.

1.33 Psychometrician means a professional with specific education and training in development and analysis of tests 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 development and a minimum of two in statistical methods.

1.34 Regulatory authority means a government agency that has been duly formed under the laws of that jurisdiction to administer and enforce the law.

1.35 Reliability means the degree of consistency with which a test measures the attributes, characteristics or behaviors that it was designed to measure.

1.36 Retail food industry means those sectors of commerce that operate food establishments.

1.37 Test 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 monitor/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.

1.3837 Test encryption and decoding means the security aspects of a computer examination to prevent the test 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.

1.3938 Trainer, in this instance, means a professional with appropriate expertise who conducts a course in food safety for applicants for certification as Food Protection Managers.

1.4039 Validity means the extent to which a test score or other type of assessment measures the attributes it was designed to measure. In this instance, does the test 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 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. the availability of financial resources to effectively and thoroughly conduct regular and ongoing certification program activities.

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

4.0 Food Safety Certification Examination Development

4.1 Food safety certification examinations administered by accredited certifying programs must comply fully with all criteria set by the CFP and must meet explicit and implicit standards to protect the public from foodborne illness.

4.2 Each certification organization must provide evidence that it meets the following professional requirements:

a. ability to conduct or otherwise use a legally defensible and psychometrically valid job analysis;

b. demonstrated experience in the development of psychometrically valid competency examinations;

c. demonstrated capability to develop and implement thorough procedures for security of the item bank, printed, taped or computerized examinations, exam answer sheets, and candidate scores;

d. data handling capabilities commensurate with the requirements for effective processing, reporting, and archiving of candidate food safety certification examination scores; and

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 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. complete description of the scope and usage of the examination;

b. job analysis task list, with knowledge, skills, and abilities (KSAs);

c. examination specifications;

d. the number of unduplicated items in the item bank;

e. statistical performance of each item in the bank;

f. number of examination forms and evidence of their equivalence to each other;
g. description of method used to set passing score;

h. copies of all logs, diaries, and personnel lists and descriptions kept as required in the development process;

i. summary statistics (Section 4.16 Periodic Review) for each examination form;

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 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 be sufficiently diverse as to avoid cultural bias and ensure fairness in content according to all federal requirements.

4.5 The job analysis must 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 be derived from a valid study of the job analysis tasks and their accompanying knowledge, skills, and abilities (KSAs) and must be appropriate to all aspects of the retail food industry. The job analysis must 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 be available to candidates and to the public.

4.7 The certification organization or its contracted test provider must 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 be provided to the accrediting organization on demand.

4.8 Certifying organizations are required to systematically evaluate practices in the retail food industry to assure 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 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 be based on psychometrically valid procedures to assure the relative equivalence of scores from various examination forms. The certifying organization must 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 be provided to assure 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 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 provide evidence of content equivalency of the translated version with the original examination form and/or item bank. The developer must provide a detailed description of the translation method(s), including the rationale for selecting the translation method(s), and must 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 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 items and of the full examination. Those materials must be provided to the accrediting organization on demand.

a. All examinations must be delivered and administered in a format that ensures the security of the examination (i.e. in a secured environment with a proctor.) Un-proctored examinations are not acceptable regardless of the mode of administration.

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4.15 **Security.** The certifying organization will demonstrate that procedures are developed and implemented to assure that individual items, item banks, food safety certification examinations presented in all media (printed, taped and computerized), test answer sheets and candidate scores are and remain secure. Demonstration shall include an overall examination security plan that covers each step in the examination development 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 organization must 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 used) administered during the preceding six months, as well as other information that may be reasonably requested by the accrediting organization:

a. number of food safety certification examinations administered,
b. mean,
c. mode,
d. standard deviation,
e. range,
f. reliability coefficient,
g. number and percentage of candidates passing the examination, and
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 for Examination Administration.** Certification organizations must specify procedures for administering all food safety certification examinations in a standard manner in order to assure that all candidates are provided with the opportunity to perform according to their level of competency and to assure comparability of scores. Procedures must include, but not be limited to:

a. requirements for qualifications of test administrators and monitor/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,
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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,

b. 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.
c. must be in a proctored environment where the interpreter and candidate are not a
distraction to other candidates, and
d. 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

5.0 Food Safety Certification Examination Administration

5.1 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 be accomplished in a manner that ensures fairness to all candidates.

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.

5.3 Instructor/Educator/Trainer as Test Administrator/Proctors Proctoring Food Safety Certification Examinations. When an instructor/educator/trainer of food safety training shall not be a test administrator or proctor administers, proctors or monitors a food safety certification examination, from an accredited certification program, the accredited Instructor/educator/trainer and test administrator/proctor may exist in the same legal entity but shall be structurally and functionally separated to insure the confidentiality and security of the examination. The 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.

5.4 Test Administrator and Monitors/Proctor Qualifications, Training and Duties. Certifying Certification organizations must specify the responsibilities of test administrators and of monitors/proctors, set minimum criteria for approval of test administrators and for monitors/proctors, and provide suitable programs of training to enable persons to meet those criteria. Responsibilities, duties, qualifications and training of test administrators and monitors/proctors must 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 monitors/proctor fails to meet job responsibilities must be implemented and documented. Where instructors/educators/trainers are used as test administrators/proctors, the certifying organization shall enter into a formal contractual
relationship with the test administrators/proctors to ensure they follow all administrative procedures.

5.5 The certification organization shall define and provide descriptions for the roles of test administrators, proctors, and certification personnel that will clearly delineate the responsibilities of each role. The certification organization shall demonstrate how it ensures that all certification personnel, including test administrators and proctors, understand and practice the procedures identified for their roles.

5.6 The certification organization shall ensure that all test administrators and proctors meet the competency requirements established by the certification organization, comply with all requirements of the certification organization, and are not instructors, educators, or trainers participating in training for Certified Food Protection Managers.

5.7 The certification organization shall enter into a formal agreement with the test administrators/proctors and shall assess and monitor the performance of test administrators and proctors in accordance with all documented procedures and agreements. The formal agreement shall include, at a minimum, provisions that relate to code of conduct, conflict of interest and a statement of consequences for breach of the agreement.

5.8 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.

5.49 Where special accommodations must be made for otherwise qualified candidates under provisions of the Americans with Disabilities Act, arrangements must 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 be provided to the certifying certification organization.

5.510 The certifying certification organization must provide procedures to be followed in any instance where the security of a food safety certification examination is, or is suspected to be, breached. Included must be specific procedures for handling and for reporting to the accrediting organization, any suspected or alleged cheating incidents, lost or stolen booklets, intentional or unintentional divulging of test items by examinees or test administration personnel, or any other incidents perceived to have damaged the security of the examination or any of its individual items. Corrective actions to guard against future security breaches must be established and implemented. Documentation of corrective actions and their effectiveness must be made available to the accreditation body.
5.611 **Examination Administration Manual.** The certifying certification organization must provide each test administrator with a manual detailing the requirements for all aspects of the food safety certification examination administration process.

5.712 **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 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;

b. shipping must be done by certifiable, traceable means so that its location can be determined at any given time; and

c. the packing list must show the number of packages in the shipment and the exact contents of each.

The package(s) of examination booklets must be placed in secure storage immediately upon delivery. They must be kept in secure storage both before and after they are used.

5.913 **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 monitors/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.

5.1014 **Monitors/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.

5.1115 The number of approved monitors/proctors assigned to a test administrator must be sufficient to allow each examinee to be observed and supervised to assure conformance to security requirements. There shall be no less than one test administrator for the first thirty-five examinees, plus one additional test administrator or proctor or monitor for each additional 35 examinees or fraction thereof.

5.1216 **Site Requirements.** Sites chosen for administering food safety certification examinations must conform to all legal requirements for safety, health, and accessibility for all qualified candidates. Additionally, the accommodations, lighting, space, comfort, and work space for taking the examination must allow all candidates to perform at their highest level of competency.
Requirements at each site include but are not limited to:

a. accessibility in accordance with requirements of the Americans with Disabilities Act must be 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;

b. all sites must conform to all fire safety and occupancy codes of the jurisdiction in which they are located;

c. there must be sufficient spacing between each examinee in the area in which the actual testing is conducted, or other appropriate and effective methods, to preclude any examinee from viewing another examinee’s test;

d. acoustics must allow each examinee to hear instructions clearly, using an electronic audio system if necessary;

e. lighting at each examinee’s work space must be adequate for reading fine print; and

f. ventilation and temperature must be appropriate for health and comfort of examinees.

Examination Scheduling. Food safety certification examinations must be scheduled far enough in advance to allow for timely shipment of supplies.

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.

Scoring will be done only by means authorized by the certifying certification organization and approved by the accrediting organization.

Food safety certification examination scores will not be released as being official until verified and approved by the certifying certification organization.

Examinee scores will be confidential, available only to the examinee and to persons or organizations approved in writing by the examinee.

Score reports will be available to examinees in a time frame specified in the application, which will not be later than 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 certifying certification organization will have ongoing communication with examinees and with the test administrator until the scores are verified and released.
SECTION 6.0 – COMPUTER-BASED TESTING (CBT)

6.0 Computer-Based Test Development and Administration

6.1 Computer-Based Test Development. Examination specifications for computer-based testing must 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 be evaluated for suitability for computer delivery, be reviewed in the delivery medium, and be reviewed in the presentation delivery medium. Assumptions must 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 that the items are protected from overexposure. Item usage statistics must 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 be provided to demonstrate equivalence of the examinees’ scores.

6.5 Tutorials and/or practice tests must 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 be demonstrated. Data must be gathered and continually analyzed to determine if scoring methods are comparable.

6.7 Evidence of security in the computer-based testing environment must 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 be provided.

6.9 Policies and procedures regarding the recording and retention of the item sequence and item responses for each examinee must be developed and followed. Computer examinations using a unique sequence of items for each examinee must record the information necessary to recreate the sequence of items and examinee responses on the computer examination.
6.10 Systems and procedures must be in place to address technical or operational problems in examination administration. For example, the examination delivery system must 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 be developed.

6.11 **Due Process.** Candidates must 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 AND THE PUBLIC

7.0 Certification Organizations Responsibilities to Candidates and the Public.

7.1 Responsibilities to Applicants for Certification. A certifying organization shall:

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. 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. 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. provide evidence that competently proctored testing sites are readily accessible (Section 5.10);

e. provide evidence of uniformly prompt reporting of food safety certification examination results to applicants (Section 5.19);

f. provide evidence that applicants failing the food safety certification examination are given information on general areas of deficiency;

g. provide evidence that each applicant’s food safety certification examination results are held confidential (Sections 5.17 and 5.18); and

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 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.
7.4 **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 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 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, 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 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. The name and complete ownership of the legal entity.

b. The address, telephone/fax number(s) and other contact information of the certification organization’s headquarters.

c. 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. 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 organization shall:

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. 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);

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. 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. 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. publish a comprehensive summary or outline of the information, knowledge, or functions covered by the food safety certification examination (Section 4.6);
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. 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. make available upon request to the accrediting organization copies of all publications related to the certification program,

b. advise the accrediting organization of any proposed changes in structure or activities of the certifying organization,

c. advise the accrediting organization of substantive change in food safety certification examination administration,

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. 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. submit to the accrediting organization the report requirements information specified for the Food Protection Manager Certification Program, and

g. be re-accredited by the accrediting organization at least every 5 years.
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 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 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 scores.

Actual or potential conflicts of interest that might influence judgment or performance of examination developers, test administrators or proctors/monitors, instructors/trainers/educators, 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 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. In order to become a Certified Food Protection Manager, an individual must pass a food safety certification examination from an accredited certifying program recognized by the CFP. To prepare for certification, it is recommended that the individual obtain training. Based on the content of the areas of knowledge prescribed in Paragraph 2-102.11(C) of the FDA Food Code, 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.
Preamble

The Food Protection Manager Training, Testing and 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 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 charged to the Committee by the Board. The Committee 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.

Section 5. All issues, intellectual properties, and/or inventions created by the Committee and approved by the voting assembly of the Conference become the property of the Conference.

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. The Chair and Vice-Chair shall be 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 from the following groups that comprise the broad-based representation of the Conference: regulatory agencies, industry, academia and consumer groups. The Chair and Vice-Chair shall not be selected from the same group affiliation.

Section 3. The Chair and Vice-Chair shall serve until the conclusion of the next 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 4. The Committee Chair and Vice-Chair may serve consecutive terms 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, individuals must commit in writing to active participation and be approved by the Conference Chair and the Board.

Section 2. The Committee Chair, Vice-Chair, and/or Council II Chair will select committee members from the list of volunteers or recruit volunteers as appropriate to balance the committee as delineated under Article IV. Committee Structure and Representation.

Section 3. The composition of the Committee is a balanced representation of industry, regulatory, academia, certification providers, training providers, and consumers. The Committee shall consist of twenty-eight (28) members in addition to the Chair and Vice-Chair.

Subsection 1. Nine (9) Ten (10) representatives from regulatory agencies:

a. Two (2) Three (3) from State regulatory agencies;

b. Two (2) Three (3) from local regulatory agencies;

c. Two (2) from federal government agencies with retail food program responsibilities.
d. Three (3) Two (2) “At Large” appointments. (*At Large representation – agencies with primary regulatory food safety responsibilities or professional organizations whose mission incorporates a significant public health protection focus.)

Subsection 2. Nine (9) Ten (10) industry representatives;

a. Three (3) Four (4) from the foodservice (restaurant) industry;

b. Three (3) Four (4) from the retail food store industry, and

c. Three (3) Two (2) “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) Four (4) certification providers that are accredited by the Conference’s accreditation process;

Subsection 4. Three (3) Food Protection Manager training providers;

Subsection 4 5. Two (2) representatives from academia, and

Subsection 5 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 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 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.

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 Conference meetings.

Article VI 5. Committee Organization, and Operation, and Meetings
Section 1. The Committee shall receive its direction from the Board. The Board shall assign the Committee its charges as ratified 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 session until the confidential portion of the proceedings have 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 7. In addition to the charges and issues received from the Board, Committee members may submit issues and alternative recommendations to the Committee. 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.
Section 9. A quorum to conduct Committee meetings and conference calls shall be the presence of one more than half of the fifteen (15) Committee members. 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.

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 11. Voting. 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.

Section 12. The Vice-Chair may voice positions on issues. When the Committee Chair conducts a meeting, the Vice-Chair may vote on all matters before the Committee.

Section 13. 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. 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 15. 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.

Article VII. Duties of the Committee Chair
Section 1. The Chair, with the approval of the Board and the Council II Chair, shall select Committee members in accordance with Article IV.

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 to the Committee in accordance with Article VIII.

Section 3. The Chair shall preside at all meetings of the Committee, except as provided in Article VII, Section 1.

Section 4. The Chair shall coordinate the arrangement of meetings and conference calls.

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 distributing written or oral reports to the Board detailing the activities of the Committee. The Chair shall be called upon to report at the biennial Conference meeting on the activities of the Committee.

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.

Section 3. The Vice-Chair shall perform all duties assigned by the Chair.

**Article IX. Duties of Committee Members**

Section 1. A Committee member’s tenure shall be carried out in accordance with Article IV, Section 2.

Section 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. The member may submit in writing a designated representative in his/her place to the Chair. This designated representative may vote on issues before the committee.

Section 3. Committee members or designated representative 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 4. Committee members or designated representative shall have the responsibility to complete work assignments within time frames designated by the Committee.

Section 5. Committee members or designated representative shall have the responsibility to notify the Committee Chair or the Chair’s designee of their inability to complete a work assignment.

Section 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, shall require the concurrence of two-thirds (2/3) of the voting members of the Committee.

Article X IX. Committee Consultants

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.

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.

Article XI X. 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-XI. Committee Reports

Section 1. The Committee Chair shall submit a status report of the Committee’s activities to the Council II Chair no later than thirty (30) days prior to the Board meetings.

Section 2. The Committee Chair shall coordinate the development of a final report of the Committee activities to the Council with recommended actions. The final report shall be done in advance of the Conference meeting as part of an Issue submission. 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 shall be in attendance when Council II meets during the Conference meeting to present and discuss the Committee’s report and any issues submitted by the Committee.

Article XIII-XH. Amendments

The Food Protection Manager Training, Testing and 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 group 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 Training, Testing and Certification Committee Bylaws
Revised Bylaws approved 2010 2004 Conference
Revised 6/8/2004
<table>
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<tr>
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<tr>
<td>Joyce Jensen, Chair</td>
<td>Lincoln-Lancaster Co. Health Dept</td>
<td>3140 N Street</td>
<td>Lincoln, NE 68510-1514</td>
<td>(402) 441-8033</td>
<td><a href="mailto:jjensen@lincoln.ne.gov">jjensen@lincoln.ne.gov</a></td>
</tr>
<tr>
<td>Jeff Hawley, Vice-Chair</td>
<td>Harris Teeter, Inc.</td>
<td>701 Crestdale Road</td>
<td>Matthews, NC 28105</td>
<td>(704) 844-3098 (704) 236-0890 (C)</td>
<td><a href="mailto:jhawley@harristeeter.com">jhawley@harristeeter.com</a></td>
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**Regulatory - 10**

**State Regulatory - 3**

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<tr>
<td>Aggie Hale</td>
<td>Fl. Dept. of Agriculture</td>
<td>3125 Conner Blvd Rm 290</td>
<td>Tallahassee, FL 32399-1650</td>
<td>(850) 245-5549</td>
<td><a href="mailto:halea@doacs.state.fl.us">halea@doacs.state.fl.us</a></td>
</tr>
<tr>
<td>Patrick Guzzle</td>
<td>Idaho Dept of Health and Welfare</td>
<td>450 West State Street, 4th Floor</td>
<td>Boise, ID 83720-0036</td>
<td>(208) 334-5938</td>
<td><a href="mailto:guzzlep@dhw.idaho.gov">guzzlep@dhw.idaho.gov</a></td>
</tr>
<tr>
<td>Mary Lou LaCasse</td>
<td>New Mexico Environment Department</td>
<td>525 Camino de los Marquez, Suite 1</td>
<td>Santa Fe, NM 87505</td>
<td>(505) 476-8608</td>
<td><a href="mailto:marylou.lacassee@state.nm.us">marylou.lacassee@state.nm.us</a></td>
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**Local Regulatory - 3**

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<tr>
<td>Vicki Everly</td>
<td>Santa Clara Co Dept of Environmental Health</td>
<td>1555 Berger Drive, Suite 300</td>
<td>San Jose, CA 95112-2716</td>
<td>(408) 918-3490</td>
<td><a href="mailto:vicki.everly@deh.sccgov.org">vicki.everly@deh.sccgov.org</a></td>
</tr>
<tr>
<td>Teresa Lee</td>
<td>City of Rosenberg</td>
<td>3720 Airport Avenue,</td>
<td>Rosenberg, Texas 77471</td>
<td>832-595-3553</td>
<td><a href="mailto:teresa@ci.rosenberg.tx.us">teresa@ci.rosenberg.tx.us</a></td>
</tr>
<tr>
<td>Cassandra Mitchell-Baker</td>
<td>Fairfax County Health Department</td>
<td>10777 Main Steet, Suite 111</td>
<td>Fairfax, VA 22030</td>
<td>(703) 246-8438</td>
<td><a href="mailto:cassandra.mitchell@fairfaxcounty.gov">cassandra.mitchell@fairfaxcounty.gov</a></td>
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**Federal Regulatory - 2**

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<tr>
<td>Lynn Hodges</td>
<td>USDA-Office of Outreach, Education &amp; Employee Training</td>
<td>1100 Commerce St., Ste. 516</td>
<td>Dallas, TX 75242</td>
<td>(972) 937-7519</td>
<td><a href="mailto:Lynn.Hodges@fsis.usda.gov">Lynn.Hodges@fsis.usda.gov</a></td>
</tr>
<tr>
<td>Laurie Williams</td>
<td>FDA/CFSAN/Office of Food Safety</td>
<td>5100 Paint Branch Pkwy</td>
<td>College Park, MD 20740</td>
<td>(301) 436-2938</td>
<td><a href="mailto:Laurie.Williams@fda.hhs.gov">Laurie.Williams@fda.hhs.gov</a></td>
</tr>
<tr>
<td>John Hicks (Alt)</td>
<td>Office of Policy, Program &amp; Employment Dev. USDA-FSIS</td>
<td>1400 Independence Ave. SW</td>
<td>Washington, DC 20250</td>
<td>(202) 205-0210</td>
<td><a href="mailto:john.hicks@fsis.usda.gov">john.hicks@fsis.usda.gov</a></td>
</tr>
<tr>
<td>Kristina Barlow (Alt)</td>
<td>Office of Policy, Program &amp; Employment Dev. USDA-FSIS</td>
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<td><a href="mailto:kristina.barlow@fsis.usda.gov">kristina.barlow@fsis.usda.gov</a></td>
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**At Large Regulatory - 2**

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<tr>
<td>Tony Carotenuto</td>
<td>Navy and Marine Corps Public Health Center</td>
<td>620 John Paul Jones Circle</td>
<td>Portsmouth, VA 23708</td>
<td>(757) 953-0712</td>
<td><a href="mailto:anthony.carotenuto@med.navy.mil">anthony.carotenuto@med.navy.mil</a></td>
</tr>
<tr>
<td>Patricia Welch</td>
<td>Illinois Department of Public Health</td>
<td>525 West Jefferson Street, 2nd Floor</td>
<td>Springfield, IL 62761</td>
<td>(217) 782-4345</td>
<td><a href="mailto:patricia.welch@illinois.gov">patricia.welch@illinois.gov</a></td>
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**Industry - 10**

**Food Service Industry - 4**

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<th>Address</th>
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<tr>
<td>Douglas Davis</td>
<td>Marriott International</td>
<td>10400 Fernwood Road Dept. 51.932</td>
<td>Bethesda, MD 20817</td>
<td>(301) 380-5736</td>
<td><a href="mailto:douglas.davis@marriott.com">douglas.davis@marriott.com</a></td>
</tr>
<tr>
<td>Susan Quam</td>
<td>Wisconsin Restaurant Association Education Foundation</td>
<td>2801 Fish Hatchery Road</td>
<td>Madison, WI 53713</td>
<td>(608) 270-9950</td>
<td><a href="mailto:squam@wirestaurant.org">squam@wirestaurant.org</a></td>
</tr>
<tr>
<td>Geoff Luebkemann</td>
<td>Florida Restaurant &amp; Lodging Association</td>
<td>230 S. Adams Street</td>
<td>Tallahassee, FL 32301-7710</td>
<td>(850) 224-2250</td>
<td><a href="mailto:geoff@frla.org">geoff@frla.org</a></td>
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### Retail Industry - 4

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<tr>
<td>Dianna Pasley</td>
<td>Schnuck Markets, Inc.</td>
<td>11420 Lackland Road</td>
<td>St. Louis, MO 63146</td>
<td>(314) 994-4346</td>
<td><a href="mailto:dpasley@schnucks.com">dpasley@schnucks.com</a></td>
</tr>
<tr>
<td>Todd Rossow</td>
<td>Publix Super Markets, Inc.</td>
<td>P.O. Box 32024</td>
<td>Lakeland, FL 33802</td>
<td>(863) 688-1188</td>
<td><a href="mailto:todd.rossow@publix.com">todd.rossow@publix.com</a></td>
</tr>
<tr>
<td>Thomas McMahan</td>
<td>Supervalu, Inc.</td>
<td>250 Park Center Blvd.</td>
<td>Boise, ID 83706</td>
<td>(208) 395-3265</td>
<td><a href="mailto:thomas.mcmahan@supervalu.com">thomas.mcmahan@supervalu.com</a></td>
</tr>
<tr>
<td>Sharon Wood</td>
<td>H-E-B Grocery Company</td>
<td>5105 Rittman Rd.</td>
<td>San Antonio, TX 78218</td>
<td>(210) 938-6511</td>
<td><a href="mailto:wood.sharon@heb.com">wood.sharon@heb.com</a></td>
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### At Large Industry - 2

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<tr>
<td>George Roughan</td>
<td>TAP Series, LLC</td>
<td>28310 Roadside Dr, Suite 215</td>
<td>Agoura Hills, CA 91301</td>
<td>(818) 889-8799</td>
<td><a href="mailto:groughan@chimsol.com">groughan@chimsol.com</a></td>
</tr>
<tr>
<td>Bill Vear</td>
<td>MindLeaders, Inc.</td>
<td>5500 Glendon Ct., Suite 200</td>
<td>Dublin, OH 43016</td>
<td>(800) 223-3732</td>
<td><a href="mailto:bvear@mindleaders.com">bvear@mindleaders.com</a></td>
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### Certification Providers - 4

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<tr>
<td>Larry Lynch</td>
<td>Environmental Health Testing</td>
<td>5728 Major Blvd., Suite 750</td>
<td>Orlando, FL 32819</td>
<td>(800) 446-0257</td>
<td><a href="mailto:llynch@nrfsp.com">llynch@nrfsp.com</a></td>
</tr>
<tr>
<td>Kate Piche'</td>
<td>National Restaurant Association</td>
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<td>Chicago, IL 60604-2814</td>
<td>(312) 261-5348</td>
<td><a href="mailto:kpiche@restaurant.org">kpiche@restaurant.org</a></td>
</tr>
<tr>
<td>Kenneth Walters</td>
<td>Prometric</td>
<td>1260 Energy Lane</td>
<td>St. Paul, MN 55108</td>
<td>(651) 603-3416</td>
<td><a href="mailto:Kenneth.Walters@prometric.com">Kenneth.Walters@prometric.com</a></td>
</tr>
<tr>
<td>Rose Mary Ammons (alt)</td>
<td>Environmental Health Testing</td>
<td>3141 Lakestone Drive</td>
<td>Tampa, FL 33618</td>
<td>(813) 960-0103</td>
<td>(813) 494-5494 (C) <a href="mailto:ammonsrm@verizon.net">ammonsrm@verizon.net</a></td>
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### Academia - 2

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<tr>
<td>David McSwane</td>
<td>Indiana University</td>
<td>801 W. Michigan Street</td>
<td>Indianapolis, IN 46202</td>
<td>(317) 274-2918</td>
<td><a href="mailto:dmcswane@iupui.edu">dmcswane@iupui.edu</a></td>
</tr>
<tr>
<td>Julie Albrecht</td>
<td>Univ of Nebraska/Lincoln, Nutrition &amp; Health</td>
<td>119 Ruth Leverton Hall</td>
<td>Lincoln, NE 68583-0808</td>
<td>(402) 472-8884</td>
<td><a href="mailto:jalbrecht1@unl.edu">jalbrecht1@unl.edu</a></td>
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### Consumer/Independent - 2

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<th>Address</th>
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<tbody>
<tr>
<td>Cynthia D. Woodley</td>
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### ANSI Representative

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<th>Address</th>
<th>City, State, Zip</th>
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<th>Email</th>
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<tbody>
<tr>
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### Accreditation Committee

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<tr>
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<tbody>
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Updated 10-29-2009
Title:

FPMTTC Committee - Amend training language in Standards

Issue you would like the Conference to consider:

The Food Protection Manager Training, Testing and Certification (FPMTTC) Committee was charged by the 2008 Biennial Meeting to evaluate Annex B Section B3 of the Standards for Accreditation of Food Protection Manager Certification Programs and to consider incorporating the training recommendations suggested by the committee as shown below:

"Annex B Section B3: Qualifications for Certification. In order to become a Certified Food Protection Manager an individual must pass a food safety certification examination from an accredited certifying program recognized by the CFP. To prepare for certification, it is recommended that the individual obtain training based on the content of the areas of knowledge prescribed in Paragraph 2-102.11 (C) of the FDA Food Code and content outlined based on job task analyses developed by accredited certification organizations."

The FPMTTC Committee discussed the suggested language and has recommended the following alternative wording for Section B3, which meets the intent of the charge:

(note: italicized words are defined within the Standards)

B3. Qualifications for Certification. To become a Certified Food Protection Manager, an individual must pass a food safety certification examination from an accredited certifying program 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.
Public Health Significance:

Assisting with the certification of food protection managers will promote continued reduction in critical risk factors at food establishments. Providing content guidance for training programs that prepare candidates for certification will further promote the success of food protection manager certification programs.

See also the CDC endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website at http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf.

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

B3. Qualifications for Certification. To become a Certified Food Protection Manager, an individual must pass a food safety certification examination from an accredited certifying program 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 task analyses, provided on the CFP website, which may be of value in developing or evaluating training. To prepare for certification, it is recommended that the individual obtain training based on the content of the areas of knowledge prescribed in Paragraph 2-102.11 (C) of the FDA Food Code:

Submitter Information:
Name: Joyce Jensen, REHS, CP-FS, Chair
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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.
Title:

FPMTTC Committee - Amend Section 5 of the Standards for Accreditation

Issue you would like the Conference to consider:

The Food Protection Manager Training, Testing and Certification (FPMTTC) Committee propose revisions to Section 5 of the Standards for Accreditation of Food Protection Manager Certification Programs as noted below:

- clarify that an instructor, trainer, or educator can no longer serve as test administrator, or proctor;
- define the role and responsibilities for test administrators, proctors, and certification personnel;
- establish competency requirements for test administrators and proctors;
- establish item and examination exposure controls;
- require formal agreements with test administrators/proctors, to include a code of conduct, conflict of interest statement, and a statement of consequences for breach of the agreement;
- reorganize and renumber relevant subsections; and
- insert changes into the Table of Contents as needed.

Public Health Significance:

Food establishments have fewer critical risk factors when there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection’s Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managertcert/MTTC_cdc_endorse.pdf)

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:

*note: language to insert is indicated with underline; language to delete is with strike through*

5.3 Proctoring Food Safety Certification Examinations - Instructor/Educator/Trainer as Test Administrator/Proctor. An instructor/educator/trainer of food safety training shall not be a test administrator or proctor who administers, proctors or monitors a food safety certification examination, from an accredited certification program, the accredited Instructor/educator/trainer and test administrator/proctor may exist in the same legal entity, but shall be structurally and functionally separated to insure the confidentiality and security of the examination. The 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-examination exposure. The exposure plan must take into account the number of times a test item and form/version is administered.

5.4.8 Test Administrator and Monitors/Proctor Qualifications, Training and Duties.

Certification Certifying organizations must specify the responsibilities of test administrators and of monitors/proctors, set minimum criteria for approval of test administrators and for monitors/proctors, and provide suitable programs of training to enable persons to meet those criteria. Responsibilities, duties, qualifications and training of test administrators and monitors/proctors must 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 monitors/proctor fails to meet job responsibilities must be implemented and documented. Where instructors/educators/trainers are used as test administrators/proctors, the certifying organization shall enter into a formal contractual relationship with the test administrators/proctors to ensure they follow all administrative procedures.

5.5 The certification organization shall define and provide descriptions for the roles of test administrators, proctors, and certification personnel that will clearly delineate the responsibilities of each role. The certification organization shall demonstrate how it ensures that all certification personnel, including test administrators and proctors, understand and practice the procedures identified for their roles.
5.6 The certification organization shall ensure that all test administrators and proctors meet the competency requirements established by the certification organization, comply with all requirements of the certification organization, and are not instructors, educators, or trainers participating in training for Certified Food Protection Managers.

5.7 The certification organization shall enter into a formal agreement with the test administrators/proctors and shall assess and monitor the performance of test administrators and proctors in accordance with all documented procedures and agreements. The formal agreement shall include, at a minimum, provisions that relate to code of conduct, conflict of interest and a statement of consequences for breach of the agreement.

5.8 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.

5.13-9 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 monitors/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.

The Conference further recommends that non-substantial revisions to the Standards such as renumbering and changes to the Table of Contents be approved as documented in the FPMTTC Final Report attachment, Standards for Accreditation of Food Protection Manager Certification.

Submitter Information:
Name: Joyce Jensen, REHS, CP-FS, Committee Chair
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Fax: 402-442-6206

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.
Title:

FPMTTC Committee - Remove "monitor" from Standards for Accreditation

Issue you would like the Conference to consider:

The Food Protection Manager Training, Testing and Certification (FPMTTC) Committee recommends removing the definition and use of the term "monitor" from the Standards for Accreditation of Food Protection Manager Certification Programs. The term "monitor" is no longer used by certification organizations and in the Standards is always used synonymously with the term "proctor."

Proposed revisions are noted in the FPMTTC Committee report attachment titled: Standards for Accreditation of Food Protection Manager Certification.

Public Health Significance:

Food establishments have fewer critical risk factors when there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection’s Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf)

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:

(note: underlined sections are due to proposed Standards revisions in other FPMTTC Committee submitted Issues)

- 1.29 (definition)
• 1.36 c.
• 4.17.a.
• 5.3.
• 5.4
• 5.13
• 5.14
• 5.15
• Annex A

As these are non-substantial revisions to the Standards, exact language changes can be found in the FPM TTC Committee Final Report attachment, Standards for Accreditation of Food Protection Manager Certification.

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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.
Title:
FPMTTC Committee - Name Change

Issue you would like the Conference to consider:

Changing the standing committee name from "Food Protection Manager Training, Testing and Certification Committee" to "Food Protection Manager Certification Committee" with the acronym FMPCC. The proposed committee name better reflects the actual food protection manager certification program as written by the standards.

Public Health Significance:

Food establishments have fewer critical risk factors when there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf)

Recommended Solution: The Conference recommends...:

1) 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 FPMTTC 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.
2) Adding a new article to the *FPMTTC 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, FPMTTC Committee Bylaws, and information on the CFP Website be updated to reflect the new full committee name or the acronym FPMCC.

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

**Submitter Information:**

Name: Joyce Jensen, REHS, CP-FS, Chair  
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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.*
Title:

FPMTTC Committee - Revise Bylaws

Issue you would like the Conference to consider:

The proposed revision to the Food Protection Manager Training, Testing, Certification Committee Bylaws includes:

- adding training providers to the composition of the committee,
- establishing that the quorum is based on the number of filled positions,
- renumbering as needed, and
- some clean-up language.

Public Health Significance:

Food establishments have fewer critical risk factors when there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection's Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf)

Recommended Solution: The Conference recommends...:

adopting the Committee Bylaw revisions as proposed by the Food Protection Manager Training, Testing and Certification Committee. All new language is indicated in underline format; language to be deleted is in strike through.

Substantial revisions to the Food Protection Manager Training, Testing, and Certification Committee Bylaws are as follows:
Section 2. The Council II Chair shall select the Committee Chair and Vice-Chair from the following groups that comprise the broad based representation of the Conference: regulatory agencies, industry, academia and consumer groups. The Chair and Vice-Chair shall not be selected from the same group affiliation.

Section 3. The composition of the Committee is a balanced representation of industry, regulatory, academia, certification providers, training providers, and consumers. The Committee shall consist of twenty-eight (28) members in addition to the Chair and Vice-Chair.

Subsection 1. Nine (9) Ten (10) representatives from regulatory agencies:

a. Two (2) Three (3) from State regulatory agencies;

b. Two (2) Three (3) from local regulatory agencies;

c. Two (2) from federal government agencies with retail food program responsibilities.

d. Three (3) Two (2) "At Large" appointments. (*At Large representation - agencies with primary regulatory food safety responsibilities or professional organizations whose mission incorporates a significant public health protection focus.)

Subsection 2. Nine (9) Ten (10) industry representatives;

a. Three (3) Four (4) from the foodservice (restaurant) industry;

b. Three (3) Four (4) from the retail food store industry, and

c. Three (3) Two (2) "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) Four (4) certification providers that are accredited by the Conference’s accreditation process;

Subsection 4. Three (3) Food Protection Manager training providers;

Subsection 4.5. Two (2) representatives from academia, and

Subsection 5.6. Two (2) consumer/independent representatives/public members.

Section 9. A quorum to conduct Committee meetings and conference calls shall be the presence of one more than half of the filled fifteen (15) Committee positions members. 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.

Non-substantial revisions to Standards Section 5, such as renumbering, can be found in the FPMTTC Committee Final Report attachment, *Food Protection Manager Training, Testing, and Certification Committee Bylaws*.

NOTE: The revisions with this Issue do **not** include the proposed Committee name change; this change is presented in a separate Issue.

**Submitter Information:**

Name: Joyce Jensen, REHS, CP-FS, Chair  
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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.*
Title:
New or Continuation Charges for the renamed FPMTTC Committee

Issue you would like the Conference to consider:
The renamed CFP standing committee, the "Food Protection Manager Certification Committee" (FPMCC) 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.
- investigate if the Standards for Accreditation of Food Protection Manager Certification Programs should create more alignment with ISO17024 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.

Public Health Significance:
Food establishments have fewer critical risk factors when there are employees who have a Food Protection Manager Certification in accordance with the Conference for Food Protection’s Standards, according to the CDC as stated in the endorsement letter to the Conference dated April 5, 2006, and referenced on the Conference Website. (http://www.foodprotect.org/media/managercert/MTTC_cdc_endorse.pdf)

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.
- 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 2012 Biennial Meeting of the Conference for Food Protection.

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.*
Title:

Food Protection Manager Certification

Issue you would like the Conference to consider:

Modify the Food Code to require that at least one Person in Charge in each food establishment be certified according to a CFP recognized program. Low risk establishments (e.g. all prepackaged foods, just coffee, etc) would be exempt from the new certified food protection manager requirement.

In addition, if Food Code Priority Item violations are found during inspections and the Person in Charge is not able to answer questions concerning Food Code requirements to prevent foodborne illness specific to the establishment's operations, the Regulatory Authority could require that any non certified Person in Charge become a certified food protection manager through a CFP recognized program.

Public Health Significance:

In a 2006 letter from Dr. Howard Frumkin from the Centers for Disease Control and Prevention (CDC) to the CFP Chair, Dr. Frumkin stated "Results of a recent EHS-Net cross-sectional study strongly suggest that the presence of a certified food safety manager significantly reduces the risk for outbreaks of foodborne illness in restaurants. In fact, the presence of a certified food safety manager was the major distinguishing factor between restaurants in which foodborne illness outbreaks occurred and restaurants in which foodborne illness outbreaks did not occur... Certified food safety kitchen managers were also associated with the absence of bare-hand contact with food as a contributing factor for foodborne illness outbreaks and with fewer Norovirus and Clostridium perfringens outbreaks" (see attached Managercertificationreferences).

Cates et al. (2009) found in an analysis of 8,338 inspections in Iowa that restaurants with a Certified Kitchen Manager present during inspection were less likely to have a critical
violation for personnel (P < 0.01), food source or handling (P < 0.01), facility or equipment requirements (P < 0.05), and hot holding (P < 0.05).

A 2004 FDA baseline survey evaluated the correlation between certified food protection managers and compliance with the Food Code. FDA reported "It appears that the presence of a Certified Food Protection Manager has a positive effect on the overall percent IN Compliance within some facility types." "Fast Food and Full Service Restaurant facility types with a Certified Food Protection Manager had overall IN Compliance percentages that were significantly higher than establishments without a Certified Food Protection Manager." Significantly better overall IN Compliance rates were also found in meat and poultry departments and in produce departments with certified managers.

In 2009, a CDC EHS-Net funded food protection manager certification survey was distributed by the Rhode Island Department of Health and the University of Rhode Island to 2008 CFP delegates and/or state health department representatives from all 50 states, Washington D.C., Guam and Puerto Rico. There were 52 respondents representing 44 states, Washington DC, Guam and Puerto Rico. The results indicated that 22 states, Washington DC, Guam, and Puerto Rico all had state/jurisdiction wide mandatory certification programs. Twenty-five percent of respondents indicated their agency rules require a certified food protection manager be present at all hours of operation. Respondents from 4 states without requirements expressed explicitly that attempts are currently being made to implement mandatory statewide certification.

In summary, the science indicates that the lack of a certified food protection manager is associated with outbreaks and the presence of risk factors associated with outbreaks. The lack of uniformity and reciprocity in food manager certification requirements also creates needless costs for the food industry in retraining and/or retesting personnel who move from one regulatory jurisdiction to another. A national uniform standard for food protection manager certification is needed in the Food Code for at least one certified food protection manager per food establishment (exempting low risk establishments) to reduce foodborne illness, obtain active managerial control of foodborne illness risk factors, obtain uniformity, and reduce costs for the food industry.

In 2009, the National Association of County and City Health Officials (NACCHO) found that 51% of local health departments were impacted by layoffs, attrition, reduced hours and/or furloughs. With the reduction of regulatory personnel, it is all the more critical for the food industry to assure Active Managerial Control through certified food protection managers in order to prevent foodborne illness.

This issue is supported by CDC and the nine Environmental Health Specialist Network (EHS-Net) states.

**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.

In addition to the above basic requirement, if Priority Item violations are found during inspections and the Person in Charge is not able to answer questions concerning food protection requirements specific to the food operation, the Regulatory Authority should be able to require that a non certified Person in Charge become a certified food protection manager through a CFP recognized program.

The suggested new wording and placement in the Food Code is as follows:

Existing 2009 Food Code Language

"2-102.20 Food Protection Manager Certification.

A PERSON IN CHARGE who demonstrates knowledge by being a FOOD protection manager that is certified by a FOOD protection manager certification program that is evaluated and listed by a Conference for Food Protection-recognized accrediting agency as conforming to the Conference for Food Protection Standards for Accreditation of Food Protection Manager Certification Programs is deemed to comply with ¶ 2-102.11(B)."

Proposed Addition to Food Code

2-102.21 Certified Food Protection Manager.

(A) Except as specified in (B) of this section, each FOOD ESTABLISHMENT must have at least one PERSON IN CHARGE who is a FOOD protection manager certified in accordance with the provisions detailed in 2-102.20; has supervisory, training, and management responsibilities; and is responsible for food preparation and service with the authority to direct and control such activities.

(B) Establishments that serve or sell only pre-packaged foods; establishments that prepare only nonpotentially hazardous foods (nonTCS foods); and establishments that heat only commercially processed, potentially hazardous foods (TCS foods) for hot holding for less than four hours are exempt from the requirements of paragraph (A).

(C) Should there be failure to demonstrate knowledge of foodborne disease prevention during inspections in any food establishment through violations of PRIORITY ITEMS and should there be a failure to correctly respond to the inspector's food protection questions as they relate to the specific FOOD operation, the REGULATORY AUTHORITY may require that the PERSON IN CHARGE who is not certified become a certified FOOD protection manager in accordance with the provisions detailed in 2-102.20.

Submitter Information:
Name: Ernest Julian, PhD., Chief, Office of Food Protection
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.
Manager Certification References

Issue submitted by: Ernest Julian, Ph.D.


Title:

Report - Program Standards Committee

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Program Standards Committee 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 and management of a retail food program in our continued goal of reducing foodborne illnesses and the promotion of active managerial control of all factors that may cause foodborne illness. This committee was formed to work with the FDA Clearinghouse Committee to clarify and address language issues currently found in the Standards.

Over the past two years, the Committee has worked with the FDA Clearinghouse Committee and the attached report outlines the process and culmination of their work.

Recommended Solution: The Conference recommends:

1. Acknowledgement of the CFP Program Standards Committee Report;

2. Thanking the Committee members; and,

3. 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:
o summary of Program Standards changes from 2007 and 2009
o the two most current versions of the Program Standards (currently, 2007 and 2009)
o all Supplemental Tools and Materials
o the FDA Data Collection Manual

Submitter Information:
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Attachments:
• "2008-2010 Program Standards Committee Final Report"
• "2008-2010 Program Standards 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.
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2/11/2010
COMMITTEE NAME: Program Standards Committee
COUNCIL (I, II, OR III): II
DATE OF REPORT: November 25, 2009
SUBMITTED BY: Liza Frias

COMMITTEE CHARGE(S):

1. Serve as a stakeholder group to provide input to an FDA internal working group which will be considering administrative functions such as:
   A. The frequency of revision of the Program Standards document
   B. Dissemination of changes to the Program Standards document and supporting tools and training materials
   C. Effective dates/timeframes for meeting new requirements of the Standards
   D. Mechanisms for encouraging timely self-assessments and audits by enrolled jurisdictions
   E. Mechanisms for making changes to the PS documents
2. Formulate resolutions to issues brought before the Committee for language changes to the Program Standards prior to the 2010 CFP Biennial Meeting.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

The 2008-2010 Program Standards Committee has met on a regular basis by conference call to discuss the issues brought forth by the FDA Clearinghouse Committee as identified in the committee charge.

Charge 1A – The frequency of revision to the Program Standards document
   - The committee recommends that changes to the Program Standards be published every 2 years; however, the effective date for compliance by a jurisdiction would be every 5 years at their next self-assessment. These changes have been included as part of the amendments to Standard 9 as attached (submitted as Issue titled: Amendment to Standard No. 9 Program Assessment).

Charge 1B - Dissemination of changes to the Program Standards document and its supporting tools and materials
   - The committee recommends that FDA continue to send the Retail Resource Disk to all enrolled jurisdictions and a hard copy only if requested by an enrolled jurisdiction.
   - The committee requests that the following documents be available on the FDA website:
     - Summary of Changes from 2007 and 2009
     - Two most current versions of the Program Standards (i.e. 2007, 2009)
     - Supplemental Tools and Materials
     - FDA Data Collection Manual

Charge 1C - Effective dates/timeframes for meeting new requirements to the Standards

The committee spent the majority of the two years working on Standard No. 9 to help clarify the parameters for both the self-assessment and verification audit. Through this review, the committee is recommending the addition of a new definition Self-Assessment Update (submitted as Issue titled: Proposed New
Definition for Voluntary Retail Food Regulatory Program Standards and also amending Standard No. 9 (submitted as Issue titled: Amendment to Standard No. 9 Program Assessment).

**Charge 1D - Mechanisms for encouraging timely self assessments (SAs) and audits by enrolled jurisdictions**

The committee discussed how to encourage jurisdictions to participate in the Program Standards. The concern raised among the committee members was the financial commitment that is required and in these days where budgets are being reduced, the lack of adequate resources available to jurisdictions. The committee recommends that an issue be submitted requesting that the Conference send a letter 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 Regulatory Retail Program Standards to build the necessary infrastructure to assess, implement and audit program efforts to attain standards (submitted as Issue titled: Financial Support for Voluntary Retail Food Regulatory Program Standards).

**Charge 1E - Need for additional changes or improvement to the Standards**

The FDA Clearinghouse is working on changes to Standard No. 6. These changes were discussed by the Program Standards committee and will be submitted to the conference by the FDA Clearinghouse committee.

The NVEAIS Committee provided the Program Standards committee an update on July 23, 2009 regarding their proposed issue submission to amend Standard 5, FBI and Food Security Preparedness and Response to incorporate a recommendation to the outcome section of this standard that would encourage jurisdictions participation in the CDC National Voluntary Environmental Assessment Information System (NVEAIS). The Program Standards committee supported their recommendation.

**Recommendation(s) for future charge:**

The Committee recommends that the following charges be made to a re-instituted Program Standards Committee following the CFP 2010 Conference (submitted as Issue titled: Re-Create Program Standards Committee):

1. Serve as a stakeholder group to provide input to an FDA internal working group which will be considering administrative functions such as:
   a. Criteria for verification auditors
   b. Recommending additional changes or improvements to the Program Standards

2. Formulate resolutions to issues brought before the committee and report back to Conference at the 2012 CFP Biennial Meeting.

**REQUESTED ACTION:**

The Program Standards committee will submit five (5) issues at the 2010 Conference based on the recommendations of the committee. The issues are:

- Report – Program Standards Committee
- Proposed New Definition for Voluntary Retail Food Regulatory Program Standards;
- Amendment to Standard No. 9 Program Assessment; and
- Financial Support for Voluntary Retail Food Regulatory Program Standards
- Re-Create Program Standards Committee
ATTACHMENTS:

- Proposed New Definition for Voluntary Retail Food Regulatory Program Standards
- Proposed Amendment to Standard No. 9 Program Assessment
- Financial Support for Voluntary Retail Food Regulatory Program Standards
- Re-Create Program Standards Committee
- 2008-2010 Program Standard Committee Roster
Title:
New Definition for Voluntary Retail Food Regulatory Program Standards

Issue you would like the Conference to consider:
The Program Standards Committee in collaboration with the FDA Clearinghouse Committee would like to add a new definition for "Self-Assessment Update" to the Program Standards in an effort to provide further clarification to the Program Standards.

Public Health Significance:
The definitions provided in the beginning of the Program Standards assist with the interpretation and application of the standards. The proposed changes will ensure that the Program Standards are more uniformly followed and applied.

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

1. that the Definitions in the Program Standards be amended to include designation in numerical order, and
2. 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.

Submitter Information:
Name: Liza Frias, Chair
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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.*
Title:
Amendments to Program Standard No. 9 - Program Assessment

Issue you would like the Conference to consider:
Amend Program Standard No. 9 to provide jurisdictions with clarification on what a regulatory agency must achieve to be listed as an active participant of the Voluntary National Retail Food Regulatory Program Standards and how to meet and achieve Standard No 9.

Public Health Significance:
The committee was charged with looking at an effective way of meeting the needs of state, local, and tribal jurisdictions with respect to the FDA’s current approach to establishing timelines with meeting new Program Standards and self assessments.

Currently, a jurisdiction that has not yet completed its self assessment must meet any new requirements in a revised Standard in order to achieve conformance with that Standard. Jurisdictions that already meet a certain Standard before the changes go into effect have a specific deadline to meet the requirements to continue meeting the standard. For instance, changes to Standard No. 2 were approved at the 2006 CFP Biennial Meeting. The effective date of these changes was January 1, 2007. Jurisdictions that previously met Standard 2 had to implement the changes for any new staff hired after January 1, 2007 in order to continue meeting the Standard.

Due to the current language included in Standard No. 9, a jurisdiction would not be encouraged to participate in the Voluntary National Retail Food Regulatory Program Standards due to the complex and often inability to complete the required self assessments in a two year time period.

The proposed language as submitted by the Program Standards Committee not only provides clarity on what a jurisdiction must complete to be listed as an active participant of
the Program Standards, but also provides for flexibility and continued enhancement of a jurisdiction's food safety program within a reasonable time period.

**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*.

**Submitter Information:**

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**Attachments:**

- "Proposed Amendments to Standard No. 9 Program Assessment"

*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.*
Proposed Amendments to Standard No. 9 – Program Assessment

Due to the amount of formatting and editing changes made and to allow for ease of reading, the language proposed below does not include underline/strike-out format. A full text of the existing language contained in Standard No. 9 can be found beginning on page 6 of this document.

STANDARD NO. 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 that:

1 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,

1 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,

1 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 an update to a SELF-ASSESSMENT 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. A RISK FACTOR STUDY (SURVEY) 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,

1 2. An analysis is made of the data collected and a report on the outcomes and conclusions of the RISK FACTOR STUDY (SURVEY) 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:

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 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 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.
B. Verification Audit

1. The program manager, or a designated representative, requests 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.

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), is completed and submitted to the appropriate FDA Regional Office within 30 days following a self-assessment or 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 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 assure that:

**A.** A risk factor study (survey) and report on the occurrence of foodborne illness risk factors is completed. A risk factor study (survey) 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 (survey) includes all facility types under regulation by the jurisdiction.

It is recommended that a jurisdiction’s first risk factor study (survey) 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 (survey) 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:

1. Institutions – 1) Hospitals; 2) Nursing Homes; 3) Elementary Schools (K-5)
2. Restaurants – 4) Full Service; 5) Fast Food
3. 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.)

D. A jurisdiction may use routine inspection data or may conduct a separate data collection in completing a Risk Factor Study (Survey). 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. 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. Written reports on the occurrence of RISK FACTOR STUDIES (SURVEYS),
3. VERIFICATION AUDIT reports,
4. FDA National Registry Report (FDA Form 3519), and
5. Affidavit of Permission to Publish (FDA Form 3520).
**Existing language**

**STANDARD NO. 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**

1. For listing on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure:
   
   A. That the program manager conducts an initial *self-assessment* within 12 months of the date of enrollment in the National Registry and every 36 months thereafter; and,
   
   B. That a *verification audit* is conducted within 36 months of the initial *self-assessment*. Subsequent verification audits are conducted every 36 months thereafter.

2. For achievement of Standard 9, a jurisdiction must assure:
   
   A. That a survey and report on the occurrence of foodborne illness risk factors and the use of *Food Code* interventions is completed within the 36-month period between the self-assessment and the verification audit; and
   
   B. A survey on the occurrence of foodborne illness risk factors and *Food Code* interventions is conducted at least once every five years thereafter to measure trends specific to the occurrence of the risk factors and interventions.


**Description of Requirement**

For Listing on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure that:

**1. Self-Assessment**

The program manager, or a designated representative, conducts an initial *self-assessment* of the retail food safety program within 12 months of the date of enrollment in the National Registry and every 36 months thereafter. The *self-assessment* will determine:

   A. The compliance status with each of the National Standards by completing the Appendix documents (hereafter referred to as the worksheets) or documents containing equivalent summary information for each Standard, and
   
   B. 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 are incomplete or provide inadequate information upon which to make a determination or to enable a verification audit, that standard is not met.

**2. Verification Audit**

The first *verification audit* is conducted within 36 months the initial *self-assessment*. An individual as defined in the definitions shall complete the verification audit. Subsequent verification audits are conducted every 36 months thereafter. Verification audits confirm and report on the accuracy of the *self-assessment* and the occurrence of risk factors and *Food Code* interventions survey reports. During the *verification audit*, the auditor will:
A. Review the quality records and confirm that the self-assessment accurately reflects the current program compliance status in each of the program elements, and

B. Confirm that the occurrence of risk factors survey collection procedures and survey tools similar to Appendix J have been used and that the conclusions are supported by the data.

3. Achievement of Standard 9

A jurisdiction must assure that a survey and report on the occurrence of foodborne illness risk factors and the use of Food Code interventions is completed within the 36-month period between the self-assessment and the verification audit. The survey information is updated at least once in every 5 years to measure trends specific to the occurrence of the risk factors and Food Code interventions. The subsequent surveys and reports will determine whether there has been a net change in the occurrence of the risk factors and use Food Code interventions.

A data collection instrument similar to the FDA model form referenced in 2.B., 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 study or with data from other jurisdictions.

4. Reporting

The FDA National Registry Report (Appendix I) will be completed and submitted to the appropriate FDA Regional office within 30 days following completion of the self-assessment, survey report on the occurrence of foodborne illness risk factors and Food Code interventions, verification audits, and/or survey of risk factor occurrence updates. The FDA National Registry listing will be updated using data contained in this report. A current Release and Permission to Publish Form must accompany each FDA National Registry Report.

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. Verification audit reports,
4. FDA National Registry Report, and
5. Affidavit of Permission to Publish.
Title:
Financial Support for Voluntary Retail Food Regulatory Program Standards

Issue you would like the Conference to consider:
Request financial support from the U.S. Food and Drug Administration for State, Territorial, Tribal, and Local Food Safety Agency adoption, assessment and implementation of the Voluntary National Retail Food Regulatory Program Standards.

Public Health Significance:
On July 7, 2009 the multi-agency Food Safety Working Group established by President Obama recommended a new public health focused approach to food safety based upon three core principles: prioritizing prevention, strengthening surveillance and enforcement, and improving response and recovery. An effective food safety system requires an integrated approach where the U.S. Food and Drug Administration (FDA) relies on the more than 3,000 state, territorial, tribal, and local food safety agencies to conduct food safety inspections across the food supply chain, monitor the safety of the food supply through sampling and testing, and conduct foodborne illness surveillance, response and recovery actions.

The Voluntary National Retail Food Regulatory Program Standards have been established by the FDA in collaboration with the Conference for Food Protection to establish a uniform foundation for the design and management of federal, state, territorial, tribal, and local food programs. The standards specify best practices and requirements for high quality food safety programs. The development and implementation of these programs are hampered by insufficient funding for non-federal food safety agency partners to develop the basic infrastructures necessary to implement uniform, protective, and effective food safety programs. The Voluntary National Retail Food Regulatory Program Standards effort also lack infrastructure and resources for conducting timely verification audits of program assessments.
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.

Submitter Information:
Name: Liza Frias, Chair
Organization: 2008-2010 Program Standards Committee
Address: Supervalu 1421 S. Manhattan Avenue
City/State/Zip: Fullerton, CA 92831
Telephone: 714-300-6813    Fax: 714-300-6931
E-mail: liza.frias@supervalu.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.*
Title:
Re-create - Program Standards Committee

Issue you would like the Conference to consider:

The Conference for Food Protection (CFP) Program Standards requests that the committee be reinstated to 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

- Mechanisms for making changes to the Program Standards documents.

and present their findings at the 2012 CFP Biennial Meeting.

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 and management of a retail food program in our continued goal of reducing foodborne illnesses and the promotion of active managerial control of all factors that may cause foodborne illness. This committee was formed to work with the FDA Clearinghouse Committee to clarify and address language issues currently found in the Standards.

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.


Submitter Information:
Name: Liza Frias - Committee Chair
Organization: 2008-2010 Program Standards Committee
Address: Supervalu1421 S. Manhattan Avenue
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E-mail: Liza.Frias@supervalu.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.
Title:
Change in Program Standard No. 6 and Appendix F, Compliance and Enforcement

Issue you would like the Conference to consider:
Currently for a jurisdiction to meet Standard No. 6, under Description of Requirement, 3., the program element needed is "documentation on the establishment inspection report form or in the establishment file showing compliance and/or enforcement action was taken to achieve compliance at least 80 percent of the time when out of control risk factors or interventions are recorded on a routine inspection measured using the procedures in Supplement to Standard 6, Appendix F." As more and more jurisdictions work toward meeting Standard No. 6, it has become apparent that the current sample size needs to be increased so that the probability of a jurisdiction passing and meeting the Standard accurately reflects the conditions experienced by enrolled jurisdictions. Based on an improved analysis of the requirements for a jurisdiction to pass, it is recommended that the minimum number of establishments chosen for file review be changed from 20 to 40 with the maximum number remaining at 70.

In addition the following phrase within the language of Requirement 3 needs clarification, "achieve compliance at least 80 percent of the time". The language change should be " . . . where at least 80 percent of sampled establishments . . . " (See the recommended solution below for full text changes). The change in wording clarifies the requirements for meeting the Standard.

Public Health Significance:
The number of establishments (file records) used in the calculation of the scoring affects the probability of a jurisdiction passing with a score of 80%. The recommendation is to increase the sample size in the Standard to improve the probability of a high-performing jurisdiction passing the Standard and to clarify the language to avoid confusion in the calculation of the scoring (or rating) of files as pass/fail.
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.

Modify Standard 6 so that it reads:

Description of Requirement

"... The essential program elements required to meet this standard are:

1. No Change.
2. No Change.
3. Documentation on the establishment inspection report form or in the establishment file using the statistical method for file selection in the Supplement to Standard 6, Appendix F, where at least 80 percent of sampled establishments meet the following conditions:
   a) The inspection and enforcement staff takes compliance and enforcement action according to the procedures (i.e., the staff follows the step-by-step compliance and enforcement procedures when violations occur), and
   b) Resolution was successfully achieved for all out-of-control risk factors or interventions that were recorded on the selected routine inspection.

3. Documentation on the establishment inspection report form or in the establishment file that compliance and/or enforcement action was taken to achieve compliance at least 80 percent of the time when out of control risk factors or interventions are recorded on a routine inspection measured using the procedures in Supplement to Standard 6, Appendix F.
   1. Compliance and enforcement actions that follow the step-by-step procedure.

Documentation

"The quality records needed for this standard include:

1. No change.
2. No change.
3. Documentation that compliance and enforcement action was taken correctly for at least 80% of sampled establishments 80 percent of the time using the worksheet and procedures in Supplement to Standard 6, Appendix F, when out-of-control risk factors or code interventions are recorded on routine inspections.
4. No change.
Modify Appendix F, Supplement to Standard 6 - Compliance and Enforcement so that it reads:

Selecting the Sample

Jurisdictions with **under 800** total establishments will select 40 files for review, or if they have less than 40 establishments in the inventory, then all files are to be reviewed. Jurisdictions with **800 or more** establishments will select a sample equal to 5% of the total establishments up to a maximum of 70 files. This initial selection of sample files will be the initial sample and will be the first files reviewed. Sample selection using a table of random numbers or a random number generator is the preferred method of sample selection and can be used with a card file, ledger, list, or automated data system. However, two alternative sample selection techniques acceptable for retail food program self-assessments are presented here.

1. Method 1. No change.

2. Method 2. The second alternative technique to the use of a random number generator utilizes a card file, ledger, list or data processing record system. When this procedure is used, all the establishments in the program must be subject to sampling. The frequency interval may be determined by dividing the total number of retail food establishments by the number of files needed in the sample. (For example, if there are 800 establishments within the jurisdiction, a sample of 40 would be needed (5% of 800) (5% of 80). The frequency interval would be 800 divided by 40, or 20. Thus every 20th establishment shall be selected to make up the initial sample.) To establish a starting point when using a frequency interval of 20, write numbers 1 - 20, inclusive, on separate strips of paper and draw one slip at random. The number appearing on that strip of paper represents the first establishment to be drawn. If a ledger or list is being used for sampling and the number drawn is 7, then the seventh entry in the ledger or list would be the first establishment in the sample. The second establishment would be the 27th entry, the third would be the 47th entry and so forth, until the sample of 40 is drawn.

**Alternate Sample List**

Paragraphs 1 - 4: No Change.

Paragraph 5, Change to read:

If method 1 is used for the random selection, the alternate sample files will be the last files drawn. For example, if the sample size required is **40**, then **52** files will be selected, and the last **12** files drawn will be designated as alternative files.

Paragraph 6 to end of Appendix F - No Change.

**Submitter Information:**
Name: Glenda R. Lewis
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.
STANDARD NO. 6  COMPLIANCE AND ENFORCEMENT

This standard applies to all compliance and enforcement activities used by a jurisdiction to achieve compliance with regulations.

REQUIREMENT SUMMARY

Compliance and enforcement activities result in follow-up actions for out-of-control risk factors and timely correction of code violations

DESCRIPTION OF REQUIREMENT

Compliance and enforcement encompasses all voluntary and regulatory actions taken to achieve compliance with regulations. Voluntary corrective action includes, but is not limited to, such activities as on-site corrections at time of inspection, voluntary destruction of product, risk control plans and remedial training. Enforcement action includes, but is not limited to, such activities as warning letters, re-inspection, citations, administrative fines, permit suspension and hearings. Compliance and enforcement options may vary depending on state and local law.

The program must demonstrate credible follow-up for each violation noted during an inspection, with particular emphasis being placed on risk factors that most often contribute to foodborne illness and Food Code interventions intended to prevent foodborne illness. The resolution of out-of-compliance risk factors and/or food code interventions must be documented in each establishment record. The essential program elements required to meet this standard are:

1. A written step-by-step procedure that describes how compliance and enforcement tools are to be used to achieve compliance.
2. Inspection report form(s) that record and quantify the compliance status of risk factors and interventions (i.e., IN compliance, OUT of compliance, Not Observed, or Not Applicable).
3. Documentation on the establishment inspection report form or in the establishment file using the statistical method for file selection in the Supplement to Standard 6, Appendix F, where at least 80 percent of sampled establishments meet the following conditions:

   a) The inspection and enforcement staff takes compliance and enforcement action according to the procedures (i.e., the staff follows the step-by-step compliance and enforcement procedures when violations occur), and

   b) Resolution was successfully achieved for all out-of-control risk factors or interventions that were recorded on the selected routine inspection.
3. Documentation on the establishment inspection report form or in the establishment file that compliance and/or enforcement action was taken to achieve compliance at least 80 percent of the time when out-of-control risk factors or interventions are recorded on a routine inspection measured using the procedures in Supplement to Standard 6, Appendix F.


OUTCOME

The desired outcome of this standard is an effective compliance and enforcement program that is implemented consistently to achieve compliance with regulatory requirements.

DOCUMENTATION

The quality records needed for this standard include:

2. Inspection form that meets the criteria.
3. Documentation that compliance and enforcement action was taken correctly for at least 80 percent of sampled establishments 80 percent of the time using the worksheet and procedures in Supplement to Standard 6, Appendix F, when out-of-control risk factors or code interventions are recorded on routine inspections.
4. A reference “Key” which identifies the major risk factors and Food Code interventions on the jurisdiction's inspection report form. [Note: A jurisdiction will not be penalized under Standard 6 for sections of the Food Code which have not yet been adopted].
WORKSHEET INSTRUCTIONS

This Standard applies to all voluntary and regulatory activities used by a jurisdiction to achieve compliance with regulatory requirements. The desired outcome is an effective compliance and enforcement program that consistently follows through on documented violations and achieves compliance. The sequence and type of follow-up activity a particular jurisdiction elects to use may vary. However, when an out-of-control risk factor or intervention is documented on an inspection report, the expectation is that actions taken to correct the violation will also be documented in the establishment file. For the purposes of self-assessment, follow-up actions have been divided into three types.

- On-site corrective action that occurs at the time of a routinely scheduled inspection,
- Follow-up action that occurs after the routine inspection, such as re-inspections, training, risk control plans, and informal conferences, and
- Enforcement activities such as fines, permit suspension, hearings, mandated training, restriction of operations, embargo, etc.

The measure of success for a compliance and enforcement program under Standard 6 is based on a review of randomly selected establishment files to determine whether documented violations have been resolved satisfactorily in the establishment.

In order to track documented violations through the compliance and enforcement process for a period of time long enough to determine resolution, a fixed point in time must be chosen as the starting point. It is expected that follow-up or subsequent inspections of that facility should show correction of the violations documented at the starting point. The Standard 6 measure uses a concept called the ‘start-point inspection.’

The ‘start-point inspection’ will be the third oldest routine inspection in the establishment’s file if it shows a violation of one of the risk factors or Food Code interventions. If no risk factor or Food Code intervention violation is shown on that inspection, then the fourth oldest routine inspection may be used if it shows a risk factor or Food Code intervention violation. The third oldest routine inspection is determined by starting from the most recent routine inspection in the establishment’s file and working backward chronologically. The fourth oldest routine inspection would be the one prior to the third oldest. If no violation of a risk factor or Food Code intervention is documented on the third or fourth oldest routine inspection, then no ‘start-point inspection’ exists for that establishment.

A sampling of files will be reviewed for compliance and enforcement performance based on the ‘start-point inspection’ concept. The following section provides instructions for the proper construction of a list of sample files and a required alternate list of sample files.
SELECTING THE SAMPLE

Jurisdictions with under 800 total establishments will select 40 files for review, or if they have less than 40 establishments in the inventory, then all files are to be reviewed. Jurisdictions with 800 or more establishments will select a sample equal to 5% of the total establishments up to a maximum of 70 files. This initial selection of sample files will be the initial sample and will be the first files reviewed. Sample selection using a table of random numbers or a random number generator is the preferred method of sample selection and can be used with a card file, ledger, list, or automated data system. However, two alternative sample selection techniques acceptable for retail food program self-assessments are presented here.

1. Method 1. The first alternative technique to the use of a random number generator requires that each establishment be identified by a card or strip of paper having the establishment’s name and address, permit number, file number, or other means of positive identification. These identifying cards or slips of paper are thoroughly mixed and the establishment files to be reviewed are drawn one at a time until the required number is obtained.

2. Method 2. The second alternative technique to the use of a random number generator utilizes a card file, ledger, list or data processing record system. When this procedure is used, all the establishments in the program must be subject to sampling. The frequency interval may be determined by dividing the total number of retail food establishments by the number of files needed in the sample. (For example, if there are 800 establishments within the jurisdiction, a sample of 40 would be needed (5% of 800). The frequency interval would be 800 divided by 40, or 20. Thus every 20th establishment shall be selected to make up the initial sample.) To establish a starting point when using a frequency interval of 20, write numbers 1 – 20, inclusive, on separate strips of paper and draw one slip at random. The number appearing on that strip of paper represents the first establishment to be drawn. If a ledger or list is being used for sampling and the number drawn is 7, then the seventh entry in the ledger or list would be the first establishment in the sample. The second establishment would be the 27th entry, the third would be the 47th entry and so forth, until the sample of 40 is drawn.

ALTERNATE SAMPLE LIST

Deletion of an establishment from the sample of files to be reviewed will be limited to those establishments which have not been in business long enough to have at least three regularly scheduled inspections or those files where no risk factor or Food Code intervention violation is documented on the ‘start-point inspection.’

When an establishment file is eliminated from the initial random draw, a new establishment file will be drawn from a pre-determined alternate sample list. Alternate files will be drawn in the same manner as the original sample and at the same time as the original sample selection. It is suggested that the number of alternate files selected be at least 30 percent of the original sample size. If a large number of files selected in the
initial draw do not have risk factor or Food Code intervention violations on the ‘start-point inspection,’ then a larger alternate sample will be needed.

The sample list of alternate file files shall be kept separate from the original sample list. When an original selected file cannot be rated because it has not been in business long enough to have received at least three routine inspections or because it has no risk factor/intervention violation on the start-point inspection, a substitute file from the pre-selected alternate list will be reviewed. Substitute files from the alternate list will be used in the order in which the files were drawn.

If a random number generator or a table of random numbers is used for the initial sample selection, then this same method should be used to select the appropriate number of files for the alternate sample list. Again, this is the easiest and preferred method of sample selection.

If method 1 is used for the random selection, the alternate sample files will be the last files drawn. For example, if the sample size required is 40, then 52 files will be selected, and the last 12 files drawn will be designated as alternative files.

If method 2 is used for the random selection, a separate drawing of the alternate files will be made using an interval determined as follows: the number of establishments in the inventory, minus the number of files drawn for the original sample, divided by the number of alternate files needed. Using our example from method 2 above:

\[ 800 \text{ (inventory)} - 40 \text{ (files drawn in the original sample)} / 12 \text{ (30% of the original sample)} = 63 \]

To establish a starting point for the new interval of 63, write the numbers 1 – 63 inclusively on separate slips of paper and draw one at random. The number drawn will be the first file selected for the alternate sample and every 63rd file afterward until 12 files are drawn.

**Reviewing and Rating the Files**

**Step 1.** Identify the items on the local inspection report that correspond to each of the risk factors and interventions on the worksheet. Record the local item numbers on the “reference key” line of the worksheet. If there is no corresponding local requirement for a particular FDA Code risk factor or intervention, record “NA” for not applicable. You may find the Standard No. 1, Appendix A Worksheets, helpful in making this comparison. Note that the program is not penalized under Standard No. 6 for sections of the Food Code that have not been adopted.

**Step 2.** Open the first establishment inspection file that was randomly selected in Step 1 above. Identify the third oldest routine inspection report in the file, starting at the current date and working back chronologically. This inspection will be the “start-point inspection” for the review of this file. Using the reference key line on the worksheet,
determine which risk factors and interventions were out of compliance at the time of this ‘start-point inspection.’ Place a check under each item that is out of compliance on the horizontal status line. If there is no risk factor/intervention that was out of compliance on the third oldest inspection in the file, you may move to the fourth oldest inspection in the file and use it for the ‘start-point inspection’ if it contains a risk factor/intervention that was out of compliance. If there is no risk factor/intervention that was out of compliance on the third or fourth oldest inspection, eliminate this file from the review and select a substitute file from the alternate list. [NOTE: Be sure to indicate the date of the start-point inspection on the Appendix F worksheet for each reviewed file. This will aid the reviewer during a validation audit.]

Step 3. Review all of the documentation in the establishment file from the start-point inspection forward to the current date and determine whether follow-up action was taken and documented for each of the out-of-compliance risk factors and interventions that were out of compliance on the start-point inspection. Determine whether there was at least one type of follow-up activity for each item that was marked out of compliance. Place “Yes” in the appropriate line and column to indicate that follow-up action was documented in the establishment file. Make a notation below each “Yes” to indicate the type of action taken such as “RH” for Reheat, “WL” for warning letter or “RCP” for risk control plan. If there is no documentation in the establishment file to indicate that follow-up action was taken for each specific risk factor or intervention that was out of compliance, the presumption is that follow up did not occur. Indicate by “yes” or “no” in the last column whether follow-up actions complied with the jurisdiction's written step-by-step procedure for compliance and enforcement.

In order for an individual establishment file to pass, each column marked with a violation at the start-point inspection must have a subsequent “yes” answer to indicate that at least one type of follow-up action was taken. Actions must have complied with the jurisdiction's written step-by-step procedure for compliance and enforcement. A single start-point violation without a final resolution, either correction or a compliance/enforcement activity causes the file to fail. A single failure to follow the jurisdiction’s written procedures also causes the file to fail. Circle the appropriate “pass” or "fail” notation at the bottom of the work sheet.

Repeat Steps 2 and 3 with each of the randomly selected establishment files. When all of the files have been reviewed, total the number of files that passed and divide by the total number of files that met the sample selection criteria that were reviewed. To meet Standard No. 6, eighty percent (80%) of the files must pass.

See the following example and blank Worksheet.
### SAMPLE WORK SHEET - COMPLIANCE AND ENFORCEMENT

**File No:** 1

<table>
<thead>
<tr>
<th>Establishment Name</th>
<th>Risk Factors and Food Code Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seafood Palace</td>
<td>Inadequate Cooking</td>
</tr>
<tr>
<td></td>
<td>Hot &amp; Cold temperature improper holding</td>
</tr>
<tr>
<td></td>
<td>Time/temperature parameters not met</td>
</tr>
<tr>
<td></td>
<td>Food Contact Surfaces &amp; Equipment</td>
</tr>
<tr>
<td></td>
<td>Poor Personal Hygiene</td>
</tr>
<tr>
<td></td>
<td>Food Contact Surfaces &amp; Equipment</td>
</tr>
<tr>
<td></td>
<td>(when required)</td>
</tr>
<tr>
<td></td>
<td>Demonstration of Knowledge by PH</td>
</tr>
<tr>
<td></td>
<td>Implemented Employee Health Control</td>
</tr>
<tr>
<td></td>
<td>System or policy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Permit Number</th>
<th>339</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inspection Date</td>
<td>3 May 2000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reference Key to local inspection items</th>
<th>Circle One</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2,3,4,5</td>
</tr>
<tr>
<td>6,7</td>
<td>8,11</td>
</tr>
<tr>
<td>13</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>NA NA</td>
</tr>
<tr>
<td>16</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Point Inspection Violations</th>
<th>YES or NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
<tr>
<td>X</td>
<td></td>
</tr>
<tr>
<td>X</td>
<td></td>
</tr>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Was on site corrective action taken?</th>
<th>Yes</th>
<th>RH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
<td>EM</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>Glove</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Was follow up corrective action taken?</th>
<th>Yes</th>
<th>RCP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>TR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Was enforcement action taken?</th>
<th>Yes</th>
<th>WL</th>
</tr>
</thead>
</table>

Each column in which a violation is noted must receive a yes response to one of the three questions in order for the file to pass. Additionally, written procedures must have been followed.

In this example, the file passes because each of the violations noted on the start point inspection, dated 3 May 2000, has documented follow-up action in the file. The "NA" under Consumer Advisory indicates that the jurisdiction does not have a requirement for
this intervention. The "yes" in the last column indicates that the compliance and enforcement procedure of the jurisdiction was followed.

*Define the acronyms and notations used to reflect follow up action. RH = Reheat to safe temperature, RCP = risk control plan successfully completed, WL = warning letter sent, EM = embargo, TR = training required

WORK SHEET - COMPLIANCE AND ENFORCEMENT

File No.______

<table>
<thead>
<tr>
<th>Establishment Name</th>
<th>Unsafe Source</th>
<th>Inadequate Cooking</th>
<th>Hot &amp; Cold Temperature</th>
<th>HACCP</th>
<th>Temperature Parameters not met</th>
<th>Time/temperature</th>
<th>Raw Hand Contact for ready-to-eat PHF</th>
<th>Food Contact Surfaces &amp; Equipment Contaminates</th>
<th>Food Safety Program</th>
<th>Was the Written Procedure Followed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permit Number</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inspection Date (Start Point)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reference Key to local inspection items

Start Point Inspection Violations

Was on-site corrective action taken?

Was follow up corrective action taken?

Was enforcement action taken?

Each column in which a violation is noted must receive a yes response to one of the three questions in order for the file to pass. Additionally, written procedures must have been followed.

Circle One

YES

or

NO

*Define the acronyms and notations used to reflect follow up action.
Title:

Report - Constitution and Bylaws Committee

Issue you would like the Conference to consider:

The 2008-2010 Constitution and Bylaws/Procedures Committee has addressed recommendations from the 2008 Biennial Meeting and 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 Committee members.

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.

Submitter Information:

Name: Ruth N. Hendy, Chair
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Telephone: 512-834-6753  Fax: 512-834-6683  
E-mail: ruth.hendy@dshs.state.tx.us 

Attachments: 
• "Final Report Constitution and Byaws Committee"

*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

Council: Executive Board

Date of Report: December 4, 2009

Submitted by: Ruth N. Hendy, Chair

Committee Charges:
The duties of the Constitution and Bylaws/Procedures Committee, as stated in Article XV, Section 3 of the CFP Constitution are to:

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 to the Committee, as presented in final issues from the 2008 Biennial Meeting (Issue 2008 II-001) are to:

1. Renumber, as necessary, the Constitution, Bylaws and Conference Procedures as accepted by the Assembly of Delegates.

Charges to the Committee from the Executive Board during the 2008-2010 biennium are to:

1. Review the Constitution and Bylaws provisions concerning definitions of membership categories.
2. Review Conference Procedures concerning voting rights of federal agency members of committees.

Committee Activities and Recommendations:
Specific Outcomes for Each Assigned Charge

1. Recommendations to improve Conference administrative functions:
   A. Proposals to amend the Constitution and Bylaws:
      1) Parliamentary Authority. The Committee proposes a new article, to be inserted before the current Article XIX of the Constitution, to be entitled Parliamentary Authority that would read as follows:
“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.”

The Executive Board, at the August 25, 2009 Executive Board meeting, approved the wording for the amendment to the Constitution.

2) Establishment of a quorum for Executive Board meetings. The Committee recommends that the quorum for Executive Board meetings remain at a majority (half plus one). No action necessary by the Executive Board or the Conference.

3) Constitutional article concerning the name of the organization. The Conference for Food Protection Constitution does not have an article that specifies the name of the organization, although the name is mentioned in the Preamble. The Committee voted to take no action on the question.

B. Recommendations concerning Conference policies:

1) The Executive Board, at the April 30, 2009 Executive Board meeting, directed the Constitution/Bylaws Committee review and make recommendations for changes to the Conference Audit Policy. The Committee recommended to the Executive Board that the Conference Audit Policy be re-written as follows:

   **Purpose:** Remain as currently written

   **Policy:**
   - The CFP Audit Committee, a standing committee, shall conduct an annual review of the CFP financial records and report their findings to the Executive Board.
   - The CFP Executive Board, at the discretion of the Board, may request an external review of the CFP financial records, at the expense of the CFP.

   The Executive Board, at the August 2009 meeting, adopted the Committee recommendation.

2. Review Proposed Memorandums of Understanding

   There were no Memorandums of Understanding submitted to the Committee for review.

3. Renumber, as necessary the Constitution, Bylaws and Conference Procedures.

   This was done by the CFP Executive Director.

4. Review Conference Procedures concerning the voting rights of federal agency members of committees.

   The Executive Board, at the April 30, 2009 Executive Board meeting, directed the Constitution/Bylaws committee review the question of voting rights of federal agency members of committee. The Committee discussed whether standing committees with their own bylaws would be able to vary from Section VIII(D)(2) of the Conference
Procedures. The Committee’s conclusion was that a federal agency can set its own policy of whether their employee could be a voting member. The Committee has not made a recommendation concerning clarification of the wording in the Procedures or the Constitution and Bylaws on voting rights of committee members.

5. Review the Constitution and Bylaws concerning definitions of membership categories. The Committee held several discussions on the question of definition of membership categories. Currently:
   1) The Constitution and Bylaws refers to members by their constituency (federal regulatory, state regulatory, local regulatory, academia, consumer, and food industry);
   2) Food industry is further delineated into food processing, food service, retail food stores and food vending;
   3) An element of the food industry not included in these categories is the food service support industry, currently addressed as “other”;
   4) There is not a category for retiree, other than moving from regulatory, academia or industry to consumer.

The Committee has no recommendations on this charge at this time.

Specific Recommendations
1. The Committee continues discussions on membership categories.

Requested Action:
Listing of all Committee-Submitted Issues
- Report — Constitution and Bylaws Committee
- CB2—CFP Constitution—Add a new article to be entitled “Parliamentary Authority”

Committee Member Roster
- Committee roster attached to this report
<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Position (Chair/Member)</th>
<th>Constituency</th>
<th>Employer</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</tbody>
</table>

1/7/2010
Title:
Constitution - new article titled "Parliamentary Authority"

Issue you would like the Conference to consider:
Add a new article to the Constitution, titled "Parliamentary Authority", to be inserted before the current Article XIX of the Constitution

Public Health Significance:
The Constitution and Bylaws/Procedures Committee would like to clarify the parliamentary authority by which the Conference conducts its business.

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.

Submitter Information:
Name: Ruth N. Hendy, Chair
Organization: Constitution and Bylaws/Procedures Committee
Address: Texas DSHS Food Establishments GroupPO Box 149347 Mail Code
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.
Title:
Expand archive & posting capabilities of CFP approved documents

Issue you would like the Conference to consider:

To expand archive and posting capabilities to include Portable Document Format (PDF) and the original editable format of all Conference approved documents, guides and presentations; and modifications of documents or attachments that occur after Issue packets are posted, including changes made during and after Council deliberations at the Biennial Meetings.

Public Health Significance:

Conference committees made up of all stakeholders have produced excellent educational products through various guidelines, documents and presentations throughout the years. Unfortunately, because of the complexity of the review, deliberation, and approval process, many of those very tools have been under utilized because the Conference has only captured information as a PDF file. Presentations are difficult to use in PDF format and speaker notes are lost completely leaving the user to either re-create the presentation and notes that may fail to capture the intent of the original; or users spend valuable time trying to track down the original creators of the presentation or document in question. For example: original authors (e.g., committee chairs) may no longer be involved with the Conference and the original editable or readily usable presentation or document can no longer be located.

It is important to be able to capture not only Conference approved guidance documents in both PDF and an editable format (e.g., Word), but to also capture and archive the final version of documents modified during and after deliberation at the Biennial Meetings. It is often confusing after the Biennial Meeting as to what the final outcome was of a particular document.
The process currently does not accommodate revisions made to documents after issues have been submitted to Council. For example, if an attachment is revised during a Committee meeting immediately preceding the Biennial Meeting, the revised documents are NOT formally captured anywhere by the Conference. Currently, the ONLY documentation retained from the deliberation process is the final wording within an "Issue Recommendation" and does not include attachments referenced in that recommendation. Because the revised documents do not currently become part of the CFP archives, confusion results when revisions have been made to Issue content attachments.

**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.

**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
2010 Issue Form

Title:

Coordination of the two current FDA food program standards

Issue you would like the Conference to consider:

Harmonization of the 1) FDA Voluntary National Retail Food Regulatory Program Standards and the 2) FDA Manufactured Food Regulatory Program Standards.

Public Health Significance:

The goal in setting program standards is to provide a "standard" where all regulatory jurisdictions throughout the nation have the opportunity to enroll in a program that follows a structure, promotes uniformity, and provides best practice principles in food safety.

Currently, the FDA has created two sets of program standards: one for retail food programs and one for manufactured foods. While, each set of standards are designed for a specific segment of the food chain and there are differences integral to each process; there are areas that can be coordinated. There are jurisdictions that regulate both retail and manufacturing within the same inspection framework. For those jurisdictions, complying with and maintaining two distinct and separate sets of standards is proving to be labor intensive and not cost effective. There are components in each set of standards that can benefit the other and there are components in each set of standards that can be captured in the same format.

Although the Conference for Food Protection has placed emphasis in the retail arena, the Conference recognizes the need to promote food safety and food safety programs throughout the food chain. There already is recognition and inclusion within the CFP governing documents of food processing and manufacturing and the impact manufacturing has on retail food.

The Constitution and By-laws of the Conference for Food Protection state the following:
"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;...."

**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;

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

Six (6) members from the food industry with at least one (1) each representing food processing, food service, retail food stores and food vending;

**Recommended Solution: The Conference recommends...:**

that a work group be created within the Program Standards Committee to:

1. Work with the FDA and the Association of Food and Drug Officials Manufactured Food Regulatory Program Standards Workgroup to study the differences and likenesses of both the Retail Food Regulatory Program Standards and the Manufactured Food Regulatory Program Standards,
2. identify areas where harmonization can be achieved,
3. make recommendations based on their findings, and
4. report back to the 2012 Biennial Meeting.

**Submitter Information:**

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**Attachments:**

- "A - Manufactured Food Regulatory Program Standards"
- "B. Part 1 Voluntary National Retail Food Regulatory Program Standards"
- "B. Part 2 Voluntary National Retail Food Regulatory Program Standards"
- "B. Part 3 Voluntary National Retail Food Regulatory Program Standards"
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.
The collection of information has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 and has been assigned OMB control number 0910-0601.

The document can be viewed at:

http://www.fda.gov/ora/fed_state/default.htm

For more information contact:

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U.S. Department of Health and Human Services
Food and Drug Administration
Office of Regulatory Affairs

May 2007

INTRODUCTION
The Manufactured Food Regulatory Program Standards (program standards) establish a uniform foundation for the design and management of State programs' responsible for the regulation of food plants. The elements of the program standards describe best practices of a high-quality regulatory program. Achieving conformance with them will require comprehensive self-assessment on the part of a State program and will encourage continuous improvement and innovation.

The program standards are comprised of ten standards that establish requirements for the critical elements of a regulatory program designed to protect the public from foodborne illness and injury. These elements include the program’s regulatory foundation, staff training, inspection, quality assurance, food defense preparedness and response, foodborne illness and incident investigation, enforcement, education and outreach, resource management, laboratory resources, and program assessment. Each standard has corresponding self-assessment worksheets and certain standards have supplemental worksheets and forms for determining a level of conformance with such standards. The State program is not required to use the forms and worksheets contained herein; however, alternate forms should be comparable to the forms and worksheets for program standards. These program standards do not address the performance appraisal processes that a State agency may use to evaluate individual employee performance.

FDA will use the program standards as a tool to improve contracts with States. The program standards will assist both FDA and the States in fulfilling their regulatory obligations. The implementation of the program standards will be negotiated as an option for payment under the State contract. States that are awarded this option will be expected to implement the program standards to evaluate and improve their manufactured food program. FDA recognizes that full use and implementation of the program standards by those States will take several years. Such States will, however, be expected to implement improvement plans to demonstrate that they are moving toward full implementation.

The goal is to implement a risk-based food safety program by establishing a uniform basis for measuring and improving the performance of manufactured food regulatory programs in the United States. The development and implementation of these program standards will help Federal and State programs better direct their regulatory activities at reducing foodborne illness hazards in food plants. Consequently, the safety and security of the United States food supply will improve.

The collection of information has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 and has been assigned OMB control number 0910-0601.

BACKGROUND

The food safety regulatory system in the United States is a tiered system that involves Federal, State, and local governments. The Food and Drug Administration (FDA) is responsible for ensuring that all foods moving in interstate commerce, except those under United States Department of Agriculture jurisdiction, are safe, wholesome, and labeled properly. State agencies conduct inspection and regulatory activities that help ensure that safe food is produced, processed, or sold within their jurisdictions. Many State agencies also conduct food plant inspections under contract with the FDA. These inspections are performed under the States’ laws and authorities or the provisions of the Federal Food, Drug, and Cosmetic Act (FD&C Act) or both. To maximize

---

1 Program defined as an operational unit(s) that is responsible for the regulatory oversight of food plants.
the use of resources among the FDA and the State governments, particularly when their jurisdictions overlap, their inspection programs should be equivalent in effect.

In June 2000, the Department of Health and Human Services’ Office of the Inspector General (OIG) released a report of FDA’s oversight of State contracts. In this report, the OIG recommended that [FDA] take steps to promote “equivalency among Federal and State food safety standards, inspection programs, and enforcement practices.” In response to their findings, FDA established a committee to develop a set of quality standards for manufactured food regulatory programs. The committee was comprised of officials from FDA and from State agencies responsible for the regulation and inspection of food plants.

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3 A building or facility or parts thereof, used for or in connection with the manufacturing, packaging, labeling, or holding of human food as defined by 21 CFR Part 110.3(k).

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1.1 Purpose

This standard describes the elements of the regulatory foundation used by a State program to regulate food plants.

1.2 Requirement Summary

The State program has the legal authority and regulatory provisions to perform inspections and investigations, gather evidence, collect samples, and take enforcement actions under Federal and State laws.

1.3 Program Elements

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4 Laws, regulations, rules, ordinances, or other regulatory requirements that govern the operation of a food plant or manufacturing establishment.
a. The State program has the legal authority to inspect food plants, gather evidence, collect and analyze samples, and take enforcement actions for adulteration or misbranding of foods equivalent in effect to sections of the FD&C Act specified in appendix 1.

b. The State program enforces regulatory provisions equivalent in effect to the corresponding Federal regulations specified in appendix 1. In the absence of a corresponding law or regulation, the State program will explain how equivalent regulatory authority is met in appendix 1.

c. The State program uses its laws and regulations to broaden its scope of regulatory authority.

1.4 Outcome

The State program has the legal authority and regulatory provisions to protect the public health by ensuring the safety and security of the food supply.

1.5 Documentation

The State program maintains the records listed here.

- Appendix 1 Self-assessment worksheet
- The statutes, regulations, rules, ordinances, and other prevailing regulatory requirements that: (1) apply to the operation of food plants, (2) delegate authority to the State agency, and (3) stipulate the process by which the State agency establishes its authority, for example, the administrative rulemaking process
STANDARD No. 2
Training Program

2.1 Purpose

This standard defines the essential elements of a training program for inspectors.

2.2 Requirement Summary

The State program has a training plan that ensures all inspectors receive training required to adequately perform their work assignments. The plan provides for basic and advanced food inspection training as well as continued training for professional development in the field of food processing.

2.3 Program Elements

The State program maintains a history of the training provided to all inspectors. Appendix 2.1 may be used to document all training provided to inspectors. Or, the training history may be recorded and retained electronically.

The State program provides, or otherwise makes available, inspection training for all inspectors. A training record similar to appendix 2.2 is maintained.

a. Basic Food Inspection Training

The State program requires that each inspector complete a basic food inspection training curriculum that consists of coursework and field training described here.

Coursework

The State program requires each inspector to complete coursework in the following areas within 24 months of his or her start date with the State program.

- Prevailing statutes, regulations, and ordinances
- Public health principles
- Food defense awareness training
- Communications skills
- Microbiology
- Epidemiology
- Basics of HACCP
- Basic labeling
- Control of allergens
Coursework is obtained from sources listed here.

- In-house training provided by a government agency
- Distance learning, for example, satellite downlinks or web-based training
- Colleges, schools, and research centers

Field training

The State program requires that each inspector participate in a minimum of ten joint inspections with a qualified trainer and receive a minimum of two acceptable evaluations from the trainer. Joint inspections are conducted in firms that are representative of the food plants in the State program’s establishment inventory. Each inspector will complete the minimum field training requirements within 18 months of his or her start date with the State program and prior to conducting independent inspections.

b. Advanced Food Inspection Training

The State program requires each inspector who will conduct specialized food inspections to complete an advanced inspection training curriculum that consists of relevant coursework and field training as described here.

Coursework

The State program requires each inspector who will perform specialized food inspections to complete coursework listed here for such inspections.

- Applications of epidemiology & foodborne illness investigations
- Traceback investigations
- Nutrition labeling
- Acidified foods
- Low acid canned foods
- Principles of juice HACCP
- Principles of seafood HACCP

Field training

The State program requires that each inspector who will conduct specialized food inspections participate in three joint inspections with a qualified trainer and receive a minimum of two acceptable evaluations from the trainer. The joint inspections are conducted in food plants representative of the specialty area. The inspector will complete the minimum field training requirements prior to performing independent inspections.

c. Continuing education

The State program requires that each inspector participate in continuing education that includes coursework and inspections. Every 36-month interval, each inspector is required to receive 36 contact hours of classroom training and participate in at least two joint inspections with a qualified trainer. These joint inspections are

---

5 FDA/ORA U classroom and long distance learning courses are listed at: http://www.fda.gov/ora/training/course_ora.html
intended to assist the inspector with applying what was learned in the classroom to what should be covered during an inspection.

[Note: The 36-month continuing education interval starts when the basic training cycle is complete -- 24 months after the employee’s start date.]

One contact hour is earned for each hour of participation in the continuing education activities from sources described in Section 2.3a.

### 2.4 Outcome

The State program has trained inspectors with the knowledge, skills, and abilities to competently inspect food plants.

### 2.5 Documentation

The State program maintains the records listed here.

- Appendix 2.1 Self-assessment worksheet
- Appendix 2.2 Individual training record
- Documents verifying successful completion of required courses
- Course description, if necessary
- Field training and evaluations
- Continuing education certificates
STANDARD No. 3
Inspection Program

3.1 Purpose

This standard describes the elements of an effective inspection program for food plants.

3.2 Requirement Summary

The State program has an inspection system. This system provides the foundation for inspection of food plants to determine compliance with the laws administered by Federal, State, and local governments. In addition, the State program has: (1) an established recall system, (2) a system to respond appropriately to consumer complaints, (3) a system to resolve industry complaints about inspections, and (4) a recordkeeping system for all elements of the inspection program.

3.3 Program Elements

a. Risk-based inspection program

The State program maintains an accurate inventory of its food plants. The inventory is categorized by the degree of risk associated with the likelihood that a food safety or defense incident will occur. Inspections are prioritized, frequencies assigned, and resources allocated based on risk categories assigned to a food plant or product, the manufacturing processes, and the inspection history of the food plant. Appendix 3.2 contains examples of factors that may be considered in defining risk categories.

b. Inspection protocol

The State program has written policies and procedures for inspecting food plants that require the inspectors to:

1. Review the previous inspection report and consumer complaints
2. Have appropriate equipment and forms needed to conduct inspections
3. Establish [FDA] jurisdiction
4. Select an appropriate product for the inspection and, if necessary, make appropriate adjustments based on what the plant is producing
5. Assess employee activities critical to the safe and sanitary production and storage of food
6. Properly evaluate the likelihood that conditions, practices, components, and/or labeling could cause the product to be adulterated or misbranded
7. Recognize significant violative conditions or practices if present and record findings consistent with State program procedures
8. Distinguish between significant and insignificant observations, and isolated incidents versus trends
9. Review and evaluate the appropriate records and procedures for the establishment’s operation and effectively apply the information obtained from this review [during the inspection]
10. Collect adequate evidence and documentation to support inspection observations in accordance with State program procedures
11. Verify correction of deficiencies identified during the previous inspection
12. Behave professionally and demonstrate proper sanitary practices during the inspection

---

6 Standard number 8, appendix 8.3 Inspection Equipment
As appropriate for seafood and juice processors subject to HACCP regulations:

13. Use the *Fish and Fishery Products Hazards and Controls Guide* or the *Juice HACCP Hazards and Controls Guide*, when and as appropriate, to identify and evaluate the hazards associated with the product and process

14. Assess the firm’s implementation of sanitation monitoring for the applicable eight key areas of sanitation

15. Review the firm’s HACCP plan (or necessary process controls in the absence of a HACCP plan) and applicable monitoring verification and corrective action records, including those related to sanitation

16. Recognize deficiencies in the firm’s monitoring and sanitation procedures through in-plant observations

17. Make appropriate introductions, and explain the purpose and scope of the inspection

18. Use suitable interviewing techniques

19. Explain findings clearly and adequately throughout the inspection

20. Alert the firm’s person in charge when an immediate corrective action is necessary

21. Answer questions and provide information in an appropriate manner

22. Write findings accurately, clearly, and concisely on the State document and provide a copy to the firm’s person in charge

c. Food recalls

The State program has a food recall system.

The State program has written recall procedures for:

1. Sharing information about recalls with affected government agencies

2. Promptly removing recalled food products from the market

3. Performing recall audit checks

4. Identifying and maintaining records about essential recall information
d. Consumer complaints

The State program has a system for handling consumer complaints. The system contains written procedures for receiving, tracking, evaluating, answering, closing, and maintaining records of consumer complaints.

e. Food industry inspection complaints

The State program has a system to resolve industry complaints about inspections. The system contains written procedures for receiving, evaluating, answering, and maintaining records of industry complaints about inspections.

3.4 Outcome

The State program has an inspection program that reduces the occurrence of foodborne illness, injury, or allergic reaction by:

1. Focusing inspection resources on high risk plants, products, and processes
2. Obtaining immediate corrections and long-term improvements by manufactured food processors
3. Responding efficiently to prevent unsafe products from reaching consumers or to remove unsafe food from the human food system

3.5 Documentation

The State program maintains the records listed here.

- Appendix 3.1 Self-assessment worksheet
- An official establishment inventory of food plants
- Written procedures and rationale used for grouping establishments based on food safety risk, including the inspection frequency assigned to each defined risk-based establishment category
- Inspection policies and procedures including guidelines for performing inspections that require immediate corrective action and re-inspection
- Written procedures for food recalls, consumer complaints, and industry complaints about inspections
- Records for the three previous years, including inspection reports and reports pertaining to food recalls and follow-up activities, consumer complaints, and industry complaints about inspections
4.1 Purpose

This standard describes the basic quality assurance reviews necessary to: (1) evaluate the effectiveness of the inspection program, (2) recognize trends in inspectional coverage, and (3) identify best practices used to achieve quality inspections and sample collections.

4.2 Requirement Summary

The State program conducts quality assurance reviews to assess the effectiveness of its inspections and sample collections. The data used to determine such performance is obtained from observing an inspector conducting an inspection and the inspector’s written reports. This standard is not intended, however, to evaluate individual performance.

4.3 Program Elements

The State program implements a quality assurance program (QAP) that identifies elements of its inspection and sample collection processes that need improvement. The QAP has two components: (1) a field audit component, which is an on-site performance evaluation of inspections and (2) a desk audit component, which is a performance review of the written reports of inspections and sample collections. Worksheets 4.2, 4.3, and 4.4 will be used to: (1) calculate an overall audit rating for each review (field inspection performance and written reports of inspections and samples collections) and (2) evaluate ratings for a single performance factor. Managers use the ratings to identify specific aspects of its inspection program that need improvement. Performance ratings that fall below 80 percent indicate a need for improvement and require corrective action.

The State program compiles and summarizes the results of the field and desk audits annually and determines an overall performance rating, which is reported on the self-assessment worksheet (appendix 4.1). The results of the audits are evaluated every 36 months to: (1) determine the effectiveness of the food inspection program, (2) recognize trends in inspectional coverage, and (3) identify best practices used to achieve quality inspections and sample collections.

The worksheets in appendices 4.1-4.8 are used to record and summarize audit findings. Or, the State program may use comparable worksheets to record audit findings.
a. Field Inspection Audit

Supervisory inspector, senior inspector, or team leader conducts field inspection audits to verify that inspections are consistently performed according to the established policies and procedures. The quality of each inspection is audited using the performance factors identified on appendix 4.5. An overall rating for field inspection performance is calculated using worksheet 4.2.

**Frequency**
The QAP requires a minimum of two field inspection audits of each inspector be conducted every 36 months. Inspections selected for audit should include high-risk food firms such as seafood facilities, juice processors, and low-acid canned food operations.

**Performance Documentation**
Appendices 4.5 and 4.2 (including worksheet 4.2)

**Performance Factors**
Inspection procedures and policies described in standard number 3 and appendix 4.5

b. Inspection Report Audit

The QAP requires periodic review of inspection reports to verify that inspectional findings are obtained and reported according to established procedures and policies. The quality of each inspection report is audited using the performance factors listed in appendix 4.6. An overall inspection report rating is calculated using worksheet 4.3.

**Frequency**
The State program determines the number of reports for review based on its inventory of food plants and the number of inspections completed in the past 12 months. At least 75 reports are randomly selected across inspectors and supervisors, and geographical locations. If less than 75 inspections were conducted, all inspection reports will be reviewed.

**Performance Documentation**
Appendices 4.6 and 4.3 (including worksheet 4.3)

**Performance Factors**
Performance factors listed on appendix 4.6, and policies and procedures established by the State program.
c. Sample Report Audit

The QAP requires periodic review of sample reports to verify that samples were properly collected, identified, and submitted according to established procedures and policies and that appropriate information was recorded. The quality of each sample report is audited using the performance factors listed in appendix 4.7. An overall sample report rating is calculated using worksheet 4.4.

**Frequency**

The State program determines the number of reports for review based on the number of samples collected in the past 12 months. At least 75 reports are randomly selected across inspectors and supervisors, and according to sample type, for example, microbiology, aflatoxin, or low-acid canned foods. If less than 75 samples were collected, all reports will be reviewed.

**Performance Documentation**

Appendices 4.7 and 4.4 (including worksheet 4.4)

**Performance Factors**

Performance factors listed in appendix 4.7, and policies and procedures established by the State program.

d. Corrective Action Plan

A corrective action plan is required when an overall audit rating or the rating for an individual performance factor falls below 80 percent. Appendix 4.8 is used to document how the deficiency was corrected.

4.4 Outcome

The State program systematically evaluates and improves its inspection and sample collection systems to ensure that activities and information are accurate, complete, and comply with the jurisdiction’s procedures and policies.

4.5 Documentation

The State program maintains the records listed here.

- Written procedures that describe the quality assurance program
- Appendix 4.1 Self-assessment worksheet
- Appendix 4.2 Summary of field inspection audit findings (includes worksheet 4.2)
- Appendix 4.3 Summary of inspection report audit findings (includes worksheet 4.3)
• Appendix 4.4 Summary of sample report audit findings (includes worksheet 4.4)
• Appendix 4.5 Contract Audit - FDA Form 3610
• Appendix 4.5a Guidance for completing contract audit form
• Appendix 4.6 Inspection report audit form
• Appendix 4.7 Sample report audit form
• Appendix 4.8 Corrective action plan (includes table 4.8)
STANDARD No. 5
Food-related Illness and Outbreaks
And
Food Defense Preparedness and Response

5.1 Purpose

This standard applies to the surveillance, investigation, response, and subsequent review of alleged food-related incidents and emergencies, either unintentional or deliberate that may result in illness, injury, and outbreaks. It also applies to the collection, analysis, and dissemination of information that may prevent their recurrence.

5.2 Requirement Summary

The State program establishes systems to:

a. Use epidemiological information supplied by local, State, or Federal agencies to detect incidents or outbreaks of foodborne illness or injury
b. Investigate reports of illness, injury, and suspected outbreaks
c. Correlate and analyze data
d. Disseminate public information
e. Distribute outbreak reports and surveillance summaries to relevant agencies
f. Disseminate current guidance to industry on food defense
g. Provide guidance for immediate notification of law enforcement agencies when intentional food contamination or terrorism is suspected or threatened
h. Collaborate as necessary with FDA and other Federal authorities under conditions of increased threat of intentional contamination

5.3 Program Elements

A State program complies with this standard either by performing all of the required elements or by contracting (or signing a memorandum of understanding) with another State agency to perform, coordinate, and/or communicate foodborne illness support activities.

If a State program contracts for support of foodborne illness or injury investigations, it will:

a. Develop and coordinate the operation of written support service agreements between the food program and the epidemiology support program.
b. Ensure the support service contract or agreement identifies and describes the roles, duties, and responsibilities of each program for: (1) receiving reports of foodborne illness or injury, (2) performing investigational activities to identify the source of the problem, (3) reporting and recording the results of the investigations, (4) containing or mitigating the incident, and (5) preventing recurrence.
Whether foodborne illness support activities are performed by the State program or under a contractual agreement, it must have [or contract for] a system to:

a. Conduct illness or injury investigations and collect information using established epidemiology procedures similar to those found in the “International Association for Food Protection Procedures to Investigate a Foodborne Illnesses, Fifth Edition”
b. Provide laboratory support\(^7\) for investigations of illness, injury, or outbreaks
c. Maintain a current list of relevant agencies and emergency contacts
d. Coordinate the traceback and trace-forward of food implicated in an illness, injury, or outbreak
e. Identify contributing factors for reports of illness, injury, or incidents implicating food
f. Maintain investigational findings
g. Distribute the final report of illness or injury implicating food to relevant agencies, e.g. the State epidemiologist and Centers for Disease Control
h. Immediately notify all relevant agencies if intentional contamination is suspected or threatened, e.g. tampering or terrorism
i. Establish criteria for releasing information to the public (includes identifying a media person and developing guidelines for coordinating media information with other jurisdictions)
j. Mitigate and contain food-related illness and injury using enforcement activities and public awareness programs
k. Provide guidance to prevent or reduce the incidence of food-related illness, injury, and intentional contamination, e.g. tampering or terrorism
l. Collaborate as necessary with FDA and other Federal authorities under conditions of increased threat or intentional contamination

5.4 Outcome

The State program has a system for surveillance, investigation, response, documentation, analysis, and communication of alleged food-related illnesses, injuries, and unintentional or deliberate food contamination.

5.5 Documentation

The program maintains the records listed here.

- Appendix 5.1 Self-assessment worksheet
- A written description of epidemiology support available or an agreement\(^8\) that outlines epidemiology support
- A complaint log or database
- Current emergency contact list for communicating with all relevant agencies
- Procedure and contact person for releasing information to the public
- Documented timeframes for responding to complaints
- The illness, injury, or outbreak response procedures and the data collection forms
- Policies and procedures for handling incidents and threats of deliberate contamination and for collaborations with FDA and other Federal authorities under conditions of increased threat or intentional contamination

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\(^7\) Specific requirements for laboratory support are contained in standard number 10.

\(^8\) Appendix 5.2 is an example of an agreement for epidemiology support between a State department of agriculture and the State health department.
Appendix 2.2

- Written agreements that identify and describe sources of supplemental laboratory capacity and expertise including laboratory support\(^9\) to detect contaminants not normally found in food
- Investigation reports and summaries

\(^9\) Standard number 10 describes the elements of laboratory support for a manufactured food regulatory program.
STANDARD No. 6
Compliance and Enforcement Program

6.1 Purpose

This standard describes the State agency’s strategies, procedures, and actions to enforce the laws and regulations to achieve compliance and to evaluate the effectiveness of its compliance and enforcement program.

6.2 Requirement Summary

The State program has a compliance and enforcement program, which describes its compliance strategy and procedures. It also audits its conformance to established compliance procedures and identifies areas that need improvement and may require procedural changes.

6.3 Program Elements

The State program has a compliance and enforcement program that: (1) contains enforcement strategies, (2) tracks critical and chronic violations and violators, (3) uses a risk-based system to determine when a directed investigation, follow-up, or re-inspection is needed, (4) establishes a timeline for progressive actions, and (5) has a system to communicate verbal and written policy and guidance to managerial and non-managerial staff. Appendix 6.1 is used to describe the compliance and enforcement program.

The State program conducts a performance review of enforcement actions. A summary of enforcement actions\(^\text{10}\) is compiled and an overall rating is calculated using worksheet 6.2. Performance ratings that fall below 80 percent indicate a need for improvement and require corrective action.

**Frequency**

The audit is conducted every 12 months. The results of the audit will be included in the 36 month overall assessment of the State program’s performance vis-à-vis the program standards.

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\(^{10}\) Actions in the enforcement strategy may include, but are not limited to:

- Preventive actions such as promoting voluntary compliance through education program and consultation;
- Field actions such as verbal warnings, documented warnings, re-inspections, and product embargos;
- Supervisory/management actions such as warning letters or informal hearings;
- Administrative actions such as complaints and evidentiary hearings to suspend or revoke a business license; and
- Civil or criminal sanctions.
Appendix 2.2

Performance Documentation

Performance Factors

Appendix 6.2 (including worksheet 6.2) or equivalent form.

Performance factors listed in appendix 6.1 and policies and procedures established by the State program.

6.4 Outcome

The State program has a compliance and enforcement program that provides procedures to ensure that compliance actions are supported by sound judgment, adequate evidence, and appropriate documentation that is submitted in program-prescribed formats and timeframes.

6.5 Documentation

The State program maintains the records listed here.

- Appendix 6.1 Self-assessment worksheet
- Appendix 6.2 Summary of compliance and enforcement activities (includes worksheet 6.2)
- Applicable laws, regulations, and guidance documents referenced in standard number 1
- Written procedures that describe the compliance and enforcement program
- Written enforcement strategy and/or procedures
STANDARD No. 7
Industry and Community Relations

7.1 Purpose

This standard describes the elements of industry and community outreach activities developed and accomplished by the State program.

7.2 Requirement Summary

The State program participates in activities that foster communication and information exchange among the regulators, industry, academia, and consumer representatives.

The State program coordinates or participates in outreach activities that provide educational information on food safety and defense issues.

7.3 Program Elements

The State program interacts with industry and consumers by sponsoring or actively participating in meetings such as task forces, advisory boards, or advisory committees. Topics at such outreach efforts may include food defense, investigation strategies, and regulatory requirements. Representatives from affected food industries, consumers, academia, and other Federal, State, and local food protection agencies are invited to these meetings.

Outreach efforts are tailored to a target population and may include dissemination of information using electronic sources and traditional methods such as mailings.

7.4 Outcome

The State program uses outreach activities to inform varied populations about food-related issues.

7.5 Documentation

The State program maintains the records listed here.

- Appendix 7 Self-assessment worksheet
- Meeting summaries, agendas, or other records documenting interaction with food industries and consumers
STANDARD No. 8
Program Resources

8.1 Purpose

This standard describes the elements for assessing the adequacy of the resources (staff, equipment, and funding) needed to support a manufactured food regulatory program.

8.2 Requirement Summary

Staff, equipment, and funding are managed to accomplish the elements detailed in these standards.

8.3 Program Elements

Staffing

a. General Administration and Management
   The State program has adequate staff to provide the direction, support, and oversight needed to achieve conformance with the program standards. These activities include program management and direction, general administration, clerical support, office services, and coordination with laboratories.

b. Training Program (standard number 2)
   The State program has adequate staff to coordinate a training curriculum and ensure it is properly delivered and tracked.

c. Inspection Program (standard number 3)
   The State program has adequate staff to inspect all food plants in its establishment inventory at an adequate frequency that is based on the plant’s risk classification and the necessary inspection and travel time. Appendix 8.2 provides formulas for calculating an adequate number of inspection staff.

d. Inspection Audit Program (standard number 4)
   The State program has adequate staff to administer and monitor its inspection quality assurance program.

e. Food-related Illness and Outbreaks and Food Defense Preparedness and Response (standard number 5)
   The State program has adequate staff to prepare for and respond to emergency situations.

f. Compliance and Enforcement Program (standard number 6)
   The State program has adequate staff to implement compliance and enforcement strategies.

g. Industry and Community Relations (standard number 7)
   The State program has adequate staff to participate in outreach and education activities.

h. Program Assessment (standard number 9)
   The State program has adequate staff to conduct self-assessments of the manufactured food regulatory program.

Equipment
a. Program administration and recordkeeping
The State program has computers, software, and equipment necessary to maintain and secure records.

b. Communication systems and equipment
The State program has equipment needed for routine and emergency communications.

c. Inspections
The State program provides inspectors with equipment needed to conduct quality inspections. Appendix 8.3 is a list of inspection equipment.

**Program funding**

The State program is adequately funded to cover the following expenses:

a. Salary and benefits
b. Training costs
c. Travel-related expenses
d. Equipment and supplies
e. Industry and community outreach expenses
f. Laboratory expenses
g. Legal services fees
h. Indirect costs
i. Overhead costs

**8.4 Outcome**

The State program has the resources needed to support a manufactured food regulatory program.

**8.5 Documentation**

The State program maintains the records listed here.

- Appendix 8.1 Self-assessment worksheet
- Document showing the calculations used to determine an adequate number of inspectors such as appendix 8.2
- Inventory of assigned and available inspection equipment similar to appendix 8.3
- Document containing the number and function of administrative support staff
9.1 Purpose

This standard describes the process a State program uses to assess and demonstrate its conformance with each of the program standards.

9.2 Requirement Summary

Managers conduct periodic self-assessments of its manufactured food regulatory program against the criteria established in each program standard. These self-assessments are designed to identify the strengths and weaknesses of the State program by determining the level of conformance with the program standards. Self-assessments are independently verified using an audit process.

The results of the self-assessments are used to determine areas or functions of the State program that need improvement. The results of the initial self-assessments are used to develop an improvement plan that moves the State program toward conformance with each of the program standards and establishes timeframes for making improvements. Subsequent self-assessments are used to track progress toward meeting and maintaining conformance with the program standards.

9.3 Program Elements

a. The State program conducts an initial self-assessment of its conformity with each standard. A subsequent self-assessment is conducted every 36 months or less after completion of the initial self-assessment.

b. When conducting a self-assessment, the State program uses worksheets comparable to those contained in the appendices of each standard.

c. The State program uses the results of its self-assessments to develop or update an improvement plan. If the elements of the standard are not met, the improvement plan contains specific strategies and timeframes for achieving conformance and maintaining an acceptable level of performance. The improvement plan also contains reviews of the State program’s progress in implementing the plan.
d. The State program arranges for a verification audit to confirm and validate the accuracy of each self-assessment. During the verification audit, an auditor reviews the records required by each standard to determine if the self-assessment accurately reflects the State program’s level of conformance with each of the standards. Verification audits are conducted within six months of completion of the self-assessment. Audits conducted by FDA for contract purposes satisfy this requirement.

e. The State program maintains the records required by each standard and records of all self-assessments, improvement plans, and verification audits until superseded.

9.4. Outcome

The State program conforms to the program standards through well-defined evaluation activities and a process for continuous improvement.

9.5. Documentation

The State program maintains the records listed here.

- Worksheet 9 Self-worksheet assessment and improvement tracking
- Completed appendices 1, 2.1-6.1, 7, 8.1, 10
- Supporting operational documents required for each standard
- Verification audit report
- Program improvement plan
10.1 Purpose

This standard describes the elements of laboratory support for a manufactured food regulatory program.

10.2 Requirement Summary

The State program has access to the laboratory services needed to support program functions and documents its laboratory capabilities including agreements with external laboratories.

10.3 Program Elements

a. The State program has access to a laboratory that is capable of analyzing a variety of samples including food, environmental, and clinical samples.

b. The State program maintains a record of services for routine and non-routine analyses such as biological hazard determinations.

c. The State program has a contract or written agreement with its servicing laboratories.

d. The State program utilizes laboratories that are accredited or certified or that have a written QAP. The QAP will require:

- Calibration, verification, and maintenance of equipment
- Documentation of analytical results
- Control and maintenance of documents
- Sample accountability
- Sample integrity and chain of custody
- Qualifications and training of analysts
- Audit procedures such as scheduled performance reviews of staff and instrument checks

10.4 Outcome

The State program has access to laboratory services described in this standard.
10.5 Documentation

The State program maintains records listed here.

- Appendix 10  Self-assessment worksheet
- A list of servicing laboratories used by the State program
- Contracts or written agreements with servicing laboratories
Appendix 2.2

Appendix 1
Self-Assessment Worksheet

The State program describes how equivalency is accomplished when it lacks authority to enforce the sections of the FD&C Act and the parts of the CFR listed in the following tables. For example, the State program may comply with standard number 1 either by identifying its equivalent State authorities or by describing how equivalency is attained through alternative procedures or agreements.


The State law must be equivalent in effect to the sections of the FD&C Act. The language used does not have to be identical if the same outcome is achieved.

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>State equivalent or alternate provision</th>
<th>“✓” if full intent is met</th>
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</thead>
<tbody>
<tr>
<td>201</td>
<td>Definitions (f), (k), (m), and (ff)</td>
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<tr>
<td>301</td>
<td>Prohibited acts (a), (b), (c), (d), (e), (f), (k), and (v)</td>
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<tr>
<td>303*</td>
<td>Penalties</td>
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<td>304**</td>
<td>Seizure</td>
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<td>401</td>
<td>Definitions and standards for food</td>
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<td>Adulterated food</td>
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<td>403</td>
<td>Misbranded food (a)-(s)</td>
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<td>413</td>
<td>New dietary ingredients</td>
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<tr>
<td>701</td>
<td>Regulations and hearings</td>
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<td>703***</td>
<td>Records of interstate shipments</td>
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<td>704</td>
<td>Factory inspection</td>
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*Penalties may vary from Federal statute.
**Seizure authority is not required under this standard. The agency, however, should have legal authority to stop adulterated and misbranded products from moving in commerce, for example, detention, stop-sale orders, and embargoes.
***This section covers records in interstate commerce. State law should include intrastate records.

b. Code of Federal Regulations (CFR)

The State regulation must be equivalent in effect to the sections listed in the CFR. The language used does not have to be identical if the same outcome is achieved. States may have more stringent regulations unless preempted.

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<tr>
<th>Part</th>
<th>Title</th>
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<td></td>
<td>(ONLY § 1.20-1.24)</td>
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<td>7</td>
<td>Enforcement policy</td>
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<td>70</td>
<td>Color additives (ONLY § 70.20-70.25)</td>
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<td></td>
<td>(ONLY § 100.155  and § 101.100)</td>
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<td>102</td>
<td>Common or usual name for nonstandardized foods</td>
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<td>Nutritional quality guidelines for foods</td>
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<td>Foods for special dietary use</td>
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<td>Infant formula quality control procedures</td>
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<td>Unavoidable contaminants in food for human consumption and food-packaging materials</td>
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<td>110</td>
<td>Current good manufacturing practice in manufacturing, packing, or holding human food</td>
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<td>111</td>
<td>Current good manufacturing practice for dietary supplements</td>
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<td>Thermally processed low-acid foods packaged in hermetically sealed containers</td>
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<td>Acidified foods</td>
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<tr>
<td>120</td>
<td>Hazard Analysis and Critical Control Point (HACCP) systems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>123</td>
<td>Fish and fishery products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>129</td>
<td>Processing and bottling of bottled drinking water</td>
<td></td>
<td></td>
</tr>
<tr>
<td>130</td>
<td>Food standards: general</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(EXCEPT § 130.5-6 and § 130.17)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>131</td>
<td>Milk and cream</td>
<td></td>
<td></td>
</tr>
<tr>
<td>133</td>
<td>Cheeses and related cheese products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>135</td>
<td>Frozen desserts</td>
<td></td>
<td></td>
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<tr>
<td>136</td>
<td>Bakery products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>137</td>
<td>Cereal flours and related products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>139</td>
<td>Macaroni and noodle products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>145</td>
<td>Canned fruits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>146</td>
<td>Canned fruit juices</td>
<td></td>
<td></td>
</tr>
<tr>
<td>150</td>
<td>Fruit butters, jellies, preserves, and related products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>152</td>
<td>Fruit pies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>155</td>
<td>Canned vegetables</td>
<td></td>
<td></td>
</tr>
<tr>
<td>156</td>
<td>Vegetable juices</td>
<td></td>
<td></td>
</tr>
<tr>
<td>158</td>
<td>Frozen vegetables</td>
<td></td>
<td></td>
</tr>
<tr>
<td>160</td>
<td>Eggs and egg products</td>
<td></td>
<td></td>
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<tr>
<td>161</td>
<td>Fish and shellfish</td>
<td></td>
<td></td>
</tr>
<tr>
<td>163</td>
<td>Cacao products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>164</td>
<td>Tree nut and peanut products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>165</td>
<td>Beverages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>166</td>
<td>Margarine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>168</td>
<td>Sweeteners and table syrups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>169</td>
<td>Food dressings and flavorings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>170</td>
<td>Food additives (EXCEPT § 170.6, § 170.15, and § 170.17)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>172</td>
<td>Food additives permitted for direct addition to food for human consumption</td>
<td></td>
<td></td>
</tr>
<tr>
<td>173</td>
<td>Secondary direct food additives permitted in food for human consumption</td>
<td></td>
<td></td>
</tr>
<tr>
<td>174</td>
<td>Indirect food additives: general</td>
<td></td>
<td></td>
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<tr>
<td>175</td>
<td>Indirect food additives: adhesives and components of coatings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>176</td>
<td>Indirect food additives: paper and paperboard components</td>
<td></td>
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<tr>
<td>177</td>
<td>Indirect food additives: polymers</td>
<td></td>
<td></td>
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<tr>
<td>178</td>
<td>Indirect food additives: adjuvants, production aids, and sanitizers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>180</td>
<td>Food additives permitted in food or in contact with food on an interim basis pending additional study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>181</td>
<td>Prior-sanctioned food ingredients</td>
<td></td>
<td></td>
</tr>
<tr>
<td>182</td>
<td>Substances generally recognized as safe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>184</td>
<td>Direct food substances affirmed as generally recognized as safe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>186</td>
<td>Indirect food substances affirmed as generally recognized as safe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>189</td>
<td>Substances prohibited from use in human food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>190</td>
<td>Dietary supplements</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

c. State law and regulations

State laws and regulations used by the program to broaden its scope of regulatory authority are listed below.
Appendix 2.1  
Self-Assessment Worksheet

State agency: __________________________________________  State program: __________________________________________ Year ______

Instructions: Record the name of the employee and the completion date for each training component. Use additional sheets as needed.

<table>
<thead>
<tr>
<th>Employee name</th>
<th>Start Date</th>
<th>Basic Food Inspection Curriculum</th>
<th>Advanced Food Inspection Curriculum</th>
<th>Continuing Education</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Course work</td>
<td>Field work</td>
<td>Course work</td>
</tr>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

Name/title of auditor: ____________________________________________________________

Signature: ___________________________  Date: _______________
## Individual Training Record

State agency ________________________________

Name of inspector ___________________________  Inspector’s start date ________________

### Basic Food Inspection Curriculum

<table>
<thead>
<tr>
<th>Coursework</th>
<th>Completion Date</th>
<th>Inspector’s Initials</th>
<th>Supervisor’s Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevailing statutes, regulations, and ordinances</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Public health principles</td>
<td></td>
<td></td>
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<tr>
<td>Communication skills</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Microbiology</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Epidemiology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basics of HACCP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control of allergens</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic food labeling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint Inspections</td>
<td>Completion Date</td>
<td>Inspector’s Initials</td>
<td>Supervisor’s Initials</td>
</tr>
<tr>
<td>-------------------</td>
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</tr>
<tr>
<td>Please provide the name of the food plant and identification number.</td>
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<tr>
<td>1.</td>
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<td>6.</td>
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<td>7.</td>
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<td>8.</td>
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<td>9.</td>
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<tr>
<td>10.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Evaluations</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
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<td></td>
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<td>2.</td>
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</tbody>
</table>
### Advanced Food Inspection Curriculum

#### Coursework

<table>
<thead>
<tr>
<th>Please provide the name and location of the course. Note: <strong>Only</strong> the juice and seafood HACCP courses listed on this form will meet the training requirement.</th>
<th>Completion Date</th>
<th>Inspector’s Initials</th>
<th>Supervisor’s Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applications of foodborne illness investigations</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Traceback investigations</td>
<td></td>
<td></td>
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<tr>
<td>Nutrition labeling</td>
<td></td>
<td></td>
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<tr>
<td>Acidified foods</td>
<td></td>
<td></td>
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<tr>
<td>Low acid canned foods</td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Principles of Juice HACCP</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Juice HACCP Alliance Training</td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>Or comparable training</strong></td>
<td></td>
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</tr>
<tr>
<td>Juice HACCP for Regulators (FDA video)</td>
<td></td>
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</tr>
<tr>
<td><strong>Principles of Seafood HACCP</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic Seafood HACCP Class (classroom)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Or internet and one day</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seafood HACCP Regulators Course (FDA video)</td>
<td></td>
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<tr>
<td>------------------------------------------</td>
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<td></td>
</tr>
<tr>
<td>Seafood HACCP Encore (video)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seafood HACCP The Sequel (video)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seafood HACCP Hazard Guide Update, 3rd Edition (video)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint Inspections</td>
<td>Completion Date</td>
<td>Inspector’s Initials</td>
<td>Supervisor’s Initials</td>
</tr>
<tr>
<td>-------------------</td>
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</tr>
<tr>
<td>Please provide the name of the food plant and identification number.</td>
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<td>1.</td>
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<td>3.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Evaluations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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</table>

<table>
<thead>
<tr>
<th>Joint Inspections</th>
<th>Completion Date</th>
<th>Inspector’s Initials</th>
<th>Supervisor’s Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide the name of the food plant and identification number.</td>
<td></td>
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<td>1.</td>
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<td>3.</td>
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</table>

<table>
<thead>
<tr>
<th>Evaluations</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>Please provide the name and location of the course.</td>
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</table>

**Continuing Education Fieldwork**

<table>
<thead>
<tr>
<th>Joint Inspections</th>
<th>Completion Date</th>
<th>Inspector’s Initials</th>
<th>Supervisor’s Initials</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<sup>11</sup> The inspector will earn contact hours at a rate of one contact hour for every course hour.
Please provide the name of the food plant and identification number.

<p>| | | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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</tbody>
</table>
#### Appendix 3.1
Self-Assessment Worksheet

State agency: ________________________________  State program: ___________________________

Does the State program meet the criteria contained in section 3.3 of the standard number 3?

<table>
<thead>
<tr>
<th>Program Elements</th>
<th>Yes/No</th>
<th>If no, please specify why criteria are not met.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a. Risk-based inspection system</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is the establishment inventory complete and accurate?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are establishments grouped based on identified risk factors?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are risk categories used to prioritize inspections, assign routine inspection frequencies, and allocate resources?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b. Inspection protocol</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the program’s inspection protocol require inspectors to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Review the establishment file, consumer complaints, and other relevant documents prior to inspection?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Use appropriate equipment and forms?</td>
<td></td>
<td></td>
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<tr>
<td>3. Establish jurisdiction?</td>
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</tr>
<tr>
<td>4. Select appropriate product/process (high risk products and processes)?</td>
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<tr>
<td>5. Assess employee practices critical to the safe production and storage of food?</td>
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<tr>
<td>6. Properly evaluate the likelihood that conditions, practices, components, and labeling could cause the product to be adulterated or misbranded?</td>
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<tr>
<td>7. Recognize significant violative conditions or practices, and record findings consistent with program procedures?</td>
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<tr>
<td>8. Distinguish between significant and insignificant observations, and isolated incidents and trends?</td>
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</tr>
<tr>
<td>9. Review and evaluate the appropriate operational records and procedures and apply the information obtained from this review?</td>
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</tr>
<tr>
<td><strong>10.</strong> Collect adequate evidence and documentation in accordance with program procedures given the nature of the inspectional findings?</td>
<td></td>
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</tr>
<tr>
<td><strong>11.</strong> Verify correction of deficiencies from a previous inspection?</td>
<td></td>
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</tr>
<tr>
<td><strong>12.</strong> Behave professionally and demonstrate proper sanitary practices during the inspection?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13. Use the “Fish and Fishery Products Hazards and Controls Guide” or the “Juice HACCP Hazards and Controls Guide,” to identify and evaluate the hazards associated with the product and process?

14. Assess the firm’s implementation of sanitation monitoring for the applicable eight key areas of sanitation?

15. Review the firm’s HACCP plan (or necessary process controls in the absence of a HACCP plan) and applicable monitoring verification and corrective action records, including those related to sanitation?

16. Recognize deficiencies in the firm’s monitoring and sanitation procedures through in-plant observations?

17. Identify himself/herself, present credentials, and make appropriate introductions, including explaining the purpose and scope of the inspection?

18. Use suitable interviewing techniques?

19. Explain findings clearly and adequately throughout the inspection?

20. Alert the firm’s appropriate management when an immediate corrective action is necessary?

21. Write findings accurately, clearly, and concisely on the State document?

22. Answer questions and provide information in an appropriate manner?

23. And, does the program have an adequate recordkeeping system and does this system contain prescribed records associated with inspections?

c. **Food recalls**
   Does the recall system include:
   
   1. Guidance for sharing information?
   2. Procedures for prompt removal of recalled products?
   3. Procedures for recall audit checks?
   4. And, does the program have an adequate recordkeeping system and does this system contain prescribed records associated with food recalls?

d. **Consumer complaints**
   1. Does the program have procedures for
### Appendix 4.5a

May 2007

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<table>
<thead>
<tr>
<th>receiving, tracking, evaluating, responding to, and closing consumer complaints?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Does the program have a recordkeeping system and are records associated with consumer complaints retained?</td>
<td></td>
</tr>
</tbody>
</table>

#### e. Food industry inspection complaints

<table>
<thead>
<tr>
<th>1. Does the program have procedures for receiving, evaluating, responding to, and recording food industry complaints about inspections?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Does the program have a recordkeeping system and are records associated with food industry inspection complaints retained?</td>
<td></td>
</tr>
</tbody>
</table>

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**Name/title of auditor:**

__________________________

__________________________

**Signature:**

__________________________

**Date:**

__________________________
Appendix 3.2
Risk Classification Criteria for Food Plants

Risk management is prioritizing opportunities to reduce risk and allocate food safety efforts and resources. Policymakers must consider the entire production-to-consumption chain and all of the participants (regulators, industry, researchers, health care providers, and consumers) when deciding how to best utilize resources to maximize food safety and reduce costs.

Standard number 3 focuses on one segment of the total food safety system – inspection of food plants. A key requirement of this standard is that the State program uses a science-based and risk-based method for classifying food plants into at least three risk categories with a baseline inspection frequency specified for each category. Although this standard does not prescribe a classification scheme or inspection frequency, frequencies could be established through: (1) risk-based assessment of foodborne hazards, (2) ranking the public health impacts of specific hazards, (3) measurement and valuation of the benefits of reducing risk, (4) evaluation of the effectiveness and cost of risk reduction intervention options, and (5) integration of these analyses to allocate resources.

When categorizing establishments by risk, State programs may consider several factors including: (1) the type of food and ingredients, (2) processing requirements, (3) volume of product manufactured or distributed, (4) intended consumer, and (5) compliance history of the food plant. The factors may be assigned numerical values that are tabulated to rank the food plants and prioritize inspections.

Foods with microbial hazards, especially those that require stringent temperature controls, are usually deemed high risk. Other foods such as unpasteurized juices may be classified as high risk based on epidemiologic implication in foodborne disease outbreaks. In addition to microbial hazards, chemical hazards should also be evaluated.

Complex manufacturing processes with many critical control points such as commercial sterilization, acidification, dehydration, formulation control, or mandatory HACCP systems are generally considered high risk. These operations must be properly controlled to prevent, eliminate, or reduce food safety hazards to acceptable levels. Reconditioning operations including food salvage are often
ranked as high risk because improper reconditioning could result in distribution of adulterated or misbranded products to consumers.

High volume manufacturers and distributors have the potential to expose more consumers to food safety hazards if product or process controls fail. When combined with other factors, they may be classified as high risk.
### Risk Classification Criteria for Food Plants

Many classification schemes prioritize products intended for use by highly-susceptible populations\(^{12}\) because these populations are more likely to experience foodborne illnesses compared to the general population.

Inspection or compliance history is commonly considered when establishing inspection frequencies. It is reasonable to expect those firms with a history of compliance to be inspected less frequently than those firms with a history of non-compliance. Some State programs factor the compliance history directly into the risk ranking while others use performance criteria to adjust the inspection frequency from a baseline established by other criteria.

Standard number 3 requires a State program to categorize food plants based on risk and to allocate resources and establish inspection frequencies based on that categorization. Standard number 3 does not prescribe how this must be done. State programs should document their classification system and inspection frequencies. Differences between agencies will exist for many reasons including variable resources, legislative mandates, localized industries and practices, and competing priorities.

The risk classification criteria listed on the next page are intended solely to assist State programs with establishing their own classification system.

---

\(^{12}\) Highly-susceptible populations include immuno-compromised persons, preschool age children, or older adults; and persons who obtain food at a facility that provides services such as custodial care, health care, assisted living, a child or adult day care center, kidney dialysis centers, hospital or nursing home, or nutritional or socialization services (senior citizen centers).
# Risk Classification Criteria for Food Plants

<table>
<thead>
<tr>
<th>Risk</th>
<th>Type of processing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High</strong></td>
<td>Canning low acid foods, acidifying foods, vacuum packaging, salvaging, smoking for</td>
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<td>preservation, curing</td>
</tr>
<tr>
<td><strong>Medium</strong></td>
<td>Cooking, cooling, holding under controlled temperatures, pasteurization</td>
</tr>
<tr>
<td><strong>Low</strong></td>
<td>Temperature control not required</td>
</tr>
</tbody>
</table>

## Type of foods

<table>
<thead>
<tr>
<th>Risk</th>
<th>Type of foods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High</strong></td>
<td>Potentially hazardous foods frequently implicated in foodborne illness (sprouts,</td>
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<tr>
<td></td>
<td>unpasteurized juices, raw shellfish, cream-filled pastries, filled macaroni</td>
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<tr>
<td></td>
<td>products)</td>
</tr>
<tr>
<td><strong>Medium</strong></td>
<td>Potentially hazardous foods not typically implicated in foodborne illness</td>
</tr>
<tr>
<td><strong>Low</strong></td>
<td>Non-potentially hazardous foods</td>
</tr>
</tbody>
</table>

## Volume of product manufactured/distributed

<table>
<thead>
<tr>
<th>Risk</th>
<th>Type of product manufactured/distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Higher</strong></td>
<td>High volume operations with broad distribution</td>
</tr>
<tr>
<td><strong>Lower</strong></td>
<td>Low volume operations or operations with localized distribution</td>
</tr>
</tbody>
</table>

## Target population

<table>
<thead>
<tr>
<th>Risk</th>
<th>Type of population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Higher</strong></td>
<td>Foods consumed by susceptible populations</td>
</tr>
<tr>
<td><strong>Lower</strong></td>
<td>Foods consumed solely or primarily by the general population</td>
</tr>
</tbody>
</table>

## Compliance history
<table>
<thead>
<tr>
<th>Higher</th>
<th>Businesses with an inconsistent or poor history of compliance with food safety requirements</th>
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</thead>
<tbody>
<tr>
<td>Lower</td>
<td>Businesses routinely in compliance with food safety requirements</td>
</tr>
</tbody>
</table>
Appendix 4.1
Self-Assessment Worksheet

State agency: _________________________________  State program: __________________

The results of the field inspection and desk audits are summarized below. Performance ratings that fall below 80 percent indicate a need for improvement and require corrective action. Worksheets 4.2 – 4.4 can be used to identify the specific aspects of the inspection program that need improvement.

<table>
<thead>
<tr>
<th>Overall Audit Rating</th>
<th>Performance rating criteria:</th>
</tr>
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<tbody>
<tr>
<td>Circle one:</td>
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<tr>
<td>Acceptable</td>
<td>All performance rating averages ≥ 80 percent.</td>
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<tr>
<td>Needs improvement</td>
<td>One or more performance rating averages &lt; 80 percent.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Audits</th>
<th>Field inspection</th>
<th>Inspection report</th>
<th>Sample report</th>
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<tbody>
<tr>
<td>Year _______</td>
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<td>Three-year average</td>
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Recommendations:
Worksheet 4.2  Calculation of the performance rating for the field inspection audits.

<table>
<thead>
<tr>
<th>Performance factors (5)</th>
<th>Auditor’s initials and date of audit (1)</th>
<th>A.  (3)</th>
<th>NI. (3)</th>
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<td>Subtotal</td>
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<td>Total</td>
<td>Enter the final sums (subtotal + sums of (3) on this form).</td>
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</table>
(5) USE THIS SPACE TO IDENTIFY AND MAKE NOTES ABOUT SINGLE PERFORMANCE FACTORS RATED AS “NEEDS IMPROVEMENT” IN MULTIPLE AUDITS.
Worksheet 4.2
Continuation sheet

State program: ____________________________ Performance period: ______________________

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</table>

(5) USE THIS SPACE TO IDENTIFY AND MAKE NOTES ABOUT SINGLE PERFORMANCE FACTORS RATED AS “NEEDS IMPROVEMENT” IN MULTIPLE AUDITS.
Appendix 4.2
Summary of Field Inspection Audit Findings

The summary of the performance factor ratings for all field inspection audits allows FDA and the State program to recognize trends in inspectional coverage and identify specific areas in the inspection program that may need improvement.

Worksheet 4.2 is used to calculate an overall rating for the performance period and identify single performance factors rated as “needs improvement” in multiple audits. The performance factors are described in appendix 4.5. A rating below 80 percent indicates a need for improvement and requires corrective action.

INSTRUCTIONS:
(1) For each field inspection audited, record the auditor’s initials and date of audit in the box.

(2) For each field inspection audited, record the rating for each performance factor listed in appendix 4.5.
A = acceptable; NI = needs improvement.

(3) Record the $A_t$ and $NI_t$ for each performance factor.
\[ A_t = \text{horizontal total of acceptable ratings.} \]
\[ NI_t = \text{horizontal total of needs improvement ratings.} \]

(4) Calculate the overall rating for the field inspection audits.
Record the rating in the space provided in the box located at the top of worksheet 4.2.

FORMULA:

Field inspection audit performance rating = 
\[ \left[ \frac{\sum A_t}{\sum A_t + \sum NI_t} \right] \times 100 \]
NOTE: $\sum$ is the statistical symbol for the sum of all numbers.

$\sum A_t =$ vertical sum of acceptable ratings.  
$\sum NI_t =$ vertical sum of needs improvement ratings.

(5) Evaluate audit ratings for a single performance factor. Use the space at the bottom of worksheet 4.2 to identify and make notes about single performance factors rated as “needs improvement” in multiple audits.
Worksheet 4.3  Calculation of the performance rating for the inspection report audits.

State program: ________________________________  Performance period: ________________________________

Inspection report audit performance rating (4): ___________

Name/title of reviewer: ________________________________  Office: ________________________________  Date: ___________

<table>
<thead>
<tr>
<th>Performance factors (5)</th>
<th>Firm identification number and date of inspection (1)</th>
<th>(A_i) ((3))</th>
<th>NI ((3))</th>
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<td><strong>Subtotal</strong></td>
<td>Enter the sum of the totals from all continuation sheets.</td>
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<tr>
<td><strong>Total</strong></td>
<td>Enter the final sums (subtotal + sums of (3) on this form).</td>
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</table>
Worksheet 4.3
Continuation sheet

State program: ____________________________ Performance period: ____________________________

<table>
<thead>
<tr>
<th>Performance factors (5)</th>
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<th>A_i (3)</th>
<th>N_i (3)</th>
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Worksheet 4.3

(5) USE THIS SPACE TO IDENTIFY AND MAKE NOTES ABOUT SINGLE PERFORMANCE FACTORS RATED AS “NEEDS IMPROVEMENT” IN MULTIPLEaudits.
Appendix 4.3
Summary of Inspection Report Audit Findings

The summary of the performance factor ratings for all inspection report audits allows FDA and the State program to recognize trends in inspectional coverage and identify specific areas in the inspection program that may need improvement.

Worksheet 4.3 is used to calculate an overall rating for the performance period and identify single performance factors rated as “needs improvement” in multiple audits. The performance factors are described in appendix 4.6. A rating below 80 percent indicates a need for improvement and requires corrective action.

INSTRUCTIONS:  
(1) For each inspection report audited, record the firm identification number and date of the inspection in the box.

(2) For each inspection report audited, record the rating for each performance factor listed in appendix 4.6.
A = acceptable; NI = needs improvement.

(3) Record the $A_i$ and $NI_i$ for each performance factor.

\[ A_i = \text{horizontal total of acceptable ratings.} \]
\[ NI_i = \text{horizontal total of needs improvement ratings.} \]

(4) Calculate the overall rating for the inspection report audits.
Record the rating in the space provided in the box located at the top of worksheet 4.3.

FORMULA:
Inspection report audit
performance rating =
[ \sum A_t / ( \sum A_t + \sum NI_t ) ] x 100

NOTE: \( \sum \) is the statistical symbol
for the sum of all numbers.

\( \sum A_t = \) vertical sum of acceptable
ratings.
\( \sum NI_t = \) vertical sum of needs
improvement ratings.

(5) Evaluate audit ratings for a single
performance factor. Use the blank page
of worksheet 4.3 to identify and make
notes about single performance factors
rated as “needs improvement” in multiple
audits.

Worksheet 4.4 Calculation of the performance rating for the sample report audits.

| State program: ________________________________ | Performance period: ________________________________ |
| Sample report audit performance rating (4): __________ |
| Name/title of reviewer: ________________________________ | Office: ________________________________ | Date: ______________ |

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<th>Performance factors (5)</th>
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Subtotal | Enter the sum of the totals from all continuation sheets.
Total    | Enter the final sums (subtotal + sums of (3) on this form).

(5) USE THIS SPACE TO IDENTIFY AND MAKE NOTES ABOUT SINGLE PERFORMANCE FACTORS RATED AS “NEEDS IMPROVEMENT” IN MULTIPLE AUDITS.
Worksheet 4.4  
Continuation sheet

State program: ___________________________________________  Performance period: ________________________________

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<tr>
<td><strong>Total</strong></td>
<td><strong>Enter the sums of (3).</strong></td>
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5) USE THIS SPACE TO IDENTIFY AND MAKE NOTES ABOUT SINGLE PERFORMANCE FACTORS RATED AS “NEEDS IMPROVEMENT” IN MULTIPLE AUDITS.
Appendix 4.4
Summary of Sample Report Audit Findings

The summary of the performance factor ratings for all sample report audits allows FDA and the State program to recognize trends in inspectional coverage and identify specific areas in the inspection program that may need improvement.

Worksheet 4.4 is used to calculate an overall rating for the performance period and identify single performance factors rated as “needs improvement” in multiple audits. The performance factors are described in appendix 4.7. A rating below 80 percent indicates a need for improvement and requires corrective action.

INSTRUCTIONS:

(1) For each sample report audited, record the sample report identification number and date of sample collection in the box.

(2) For each sample report audited, record the rating for each performance factor listed in appendix 4.7. A = acceptable; NI = needs improvement.

(3) Record the $A_t$ and $NI_t$ for each performance factor.

$A_t =$ horizontal total of acceptable ratings.

$NI_t =$ horizontal total of needs improvement ratings.

(4) Calculate the overall rating for the sample report audits.

Record the rating in the space provided in the box located at the top of worksheet 4.4.

FORMULA:

Sample report audit performance rating =

$\left[ \frac{\sum A_t}{\sum A_t + \sum NI_t} \right] \times 100$

NOTE: $\sum$ is the statistical symbol for the sum of all numbers.
\[ \sum A_t = \text{vertical sum of acceptable ratings.} \]
\[ \sum NI_t = \text{vertical sum of needs improvement ratings.} \]

(5) Evaluate audit ratings for a single performance factor. Use the space at the bottom of worksheet 4.4 to identify and make notes about single performance factors rated as “needs improvement” in multiple audits.
Appendix 4.5a
Guidance for Completing the Contract Audit Form (FDA Form 3610)

This document provides guidance on assigning ratings during an audit for each of the performance factors listed on the Contract Audit Form. For each performance factor examples of actions and observations that would likely result in a “needs improvement” rating are provided.

I. Pre Inspection Assessment

1. Did the inspector review the State’s establishment file for the previous inspection report and possible complaints or access other available resources in preparation for the inspection?

I. References:
- State program’s establishment files
- FDA compliance programs referenced in the contract

II. Examples of a “needs improvement” rating

a. The inspector does not review the State’s previous inspection report and follow-up on previously cited deficiencies.

b. The inspector does not review a firm’s response letter to the State’s previous establishment inspection where corrective actions were promised.

c. The inspector does not verify the firm’s normal days of operation or seasonal hours.

d. The inspector does not follow-up on a consumer complaint contained in the State's establishment file.

2. Did the inspector have the appropriate equipment and forms to properly conduct the inspection?

References:
- FDA compliance programs referenced in the contract
- FDA inspection guides
EXAMPLES OF A “NEEDS IMPROVEMENT” RATING:

   a. During an inspection of a cream-filled pie manufacturer, the inspector does not have a calibrated thermometer to check the temperature of the pie.

   b. During an inspection of a cooked, ready-to-eat food processor, the inspector does not have a method to test the concentration of iodine sanitizer in the hand dip station.

   c. The inspector does not have a flashlight to examine poorly lit raw material storage areas in the plant.

II. Inspection Observations and Performance

1. Was FDA jurisdiction established?

References:
   • FDA Investigations Operations Manual (IOM), subchapter 432 - Documenting Interstate Shipments
   • IOM, subchapter 701 – Statutory Authority

Examples of a “needs improvement” rating

   a. The inspector fails to confirm interstate movement of a product or ingredients.

   b. The inspector fails to verify interstate shipment of food by a manufacturer that has not shipped product in interstate commerce during the past 24 months nor has the manufacturer received interstate shipments of ingredients or packaging components.

2. Did the inspector select an appropriate product for the inspection and, if necessary, make appropriate adjustments based on what the firm was producing?

References:
   • FDA compliance programs referenced in the contract

Examples of a “needs improvement” rating

   a. The inspector covers only a low-risk product while the firm is producing a high-risk product on the day of the inspection.
b. The inspector does not cover a small ready-to-eat sandwich operation in a large frozen dinner processing plant.

c. While inspecting a beverage bottling plant whose primary product is institutional-sized root beer syrup, the inspector ignores a bottled water processing operation on the premises.
3. **Did the inspector assess the employee practices critical to the safe production and storage of food?**

Examples of a “needs improvement” rating:

a. The inspector fails to evaluate the hygienic practices of employees working in a food processing area.

b. The inspector is unaware of the need for employees who are processing cooked, ready-to-eat foods to wash and sanitize their hands every time they touch an unclean surface.

c. The inspector notices that the firm has a trash bin and a reclaim bin in the same area. He/she does not, however, recognize the potential hazard. Consequently, the inspector misses an employee placing trash in the reclaim bin that contains product reintroduced into the manufacturing process.

4. **Did the inspector properly evaluate the likelihood that conditions, practices, components, and/or labeling could cause the product to be adulterated or misbranded?**

References:

- FDA compliance programs referenced in the contract
- NLEA inspection guide

Examples of a “needs improvement” rating:

a. The inspector fails to recognize when a firm’s finished product labeling does not contain a sulfite declaration, even though the raw material does contain a sulfite declaration.

b. The inspector fails to note the significance of “back hauling” raw eggs in a tanker used to carry pasteurized ice cream mix.

c. During an inspection of a baby food manufacturer, the inspector observes a belt moving rapidly, glass jars rattling, and shards of glass on the belt. The inspector fails to determine if such observations are related to a recent increase in complaints of glass in baby food.
d. The inspector fails to recognize the addition of an allergen during the production of a breaded product, and he/she doesn’t review the product label.
5. Did the inspector recognize significant violative conditions or practices, if present, and record findings consistent with State procedures?

III. Examples of a “needs improvement” rating:

a. The inspector fails to recognize that the food residues and mold growth on food contact surfaces are violations.

b. The inspector does not recognize that employees handling cooked, ready-to-eat product with soiled hands is a deficiency.

c. The inspector fails to notice that WD-40™, observed in the processing area, is being used to lubricate machine parts above food contact surfaces.

d. The inspector fails to recognize that condensate dripping from a freezer onto finished product may cause cross contamination.

6. Did the inspector demonstrate the ability to distinguish between significant versus insignificant observations and isolated incidents versus trends?

References:
• FDA compliance programs referenced in the contract

Examples of a “needs improvement” rating:

a. The inspector notes minor deficiencies such as chewing gum and nail polish while failing to note places where cross contamination of cooked and raw product might occur.

b. The inspector identifies record keeping deficiencies in records that are two months old. The inspector objects to these deficiencies without appropriately considering that the firm’s weekly management review of the records has identified the deficiencies, which have not been repeated within the last seven weeks.

c. During an inspection of a ready-to-eat salad processor, the inspector focuses primarily on filthy, non-food contact surfaces.

d. During the inspection of a warehouse, the inspector focuses primarily on products being stored against the walls but fails to notice several pallets of rice infested with moths.
7. Did the inspector review and evaluate the appropriate records and procedures for this establishment’s operation and effectively apply the information obtained from this review?

IV. EXAMPLES OF A “NEEDS IMPROVEMENT” RATING:

a. During a review of the processing records, the inspector fails to detect that cooking times are outside the scheduled process.

b. The inspector fails to detect possible evidence of record falsification such as inconsistencies among different types of records, unrealistic and repetitive data, and inconsistencies in signatures.

c. Can teardown records are reviewed, but the inspector doesn’t recognize that teardown measurements were not done at appropriate intervals.

8. Did the inspector collect adequate evidence and documentation in accordance with State procedures given the nature of the inspectional findings?

Examples of a “needs improvement” rating

a. The inspector fails to adequately document findings according to State requirements when violations are found in the firm.

b. The inspector fails to follow State requirements when collecting samples of processed food necessary to document violative conditions.

c. In an acidified food processing plant, the pH of the final product is questionable. The inspector does not, however, collect a sample of the product for pH determination.

9. Did the inspector verify correction of deficiencies identified during the previous State inspection?

Examples of a “needs improvement” rating:

a. Although significant time and temperature abuse of coconut cream pies was identified during the previous inspection, the inspector does not determine if these deficiencies were corrected.
b. In the previous inspection, the inspector reported that a private well was not equipped with a sanitary seal. During the current inspection, the manager tells the inspector that the well was repaired, and the lab results were acceptable. The inspector reviews the microbiological lab results, but does not go to the well to verify that the sanitary seal was installed.

c. The inspector fails to follow up on deficiencies from the previous inspection for cooked, ready-to-eat product because that product was not being made at the time of the inspection. Nor does the inspector review process records for the product to determine if the firm took appropriate corrective actions.

10. Did the inspector act in a professional manner and demonstrate proper sanitary practices during the inspection?

Examples of a “needs improvement” rating:

a. The inspector does not use the boot bath when entering in the firm's processing areas.

b. The inspector fails to sanitize his/her thermometer prior to probing product.

c. The inspector fails to wear protective clothing when entering an aseptic processing area.

d. The inspector wears jewelry, which is prohibited by the firm, in the manufacturing areas.

II. A. Inspection Observation and Performance for ‘HACCP-Required’ Facilities

[Note: These four questions may be left blank if the firm is not required by regulations to have a HACCP plan.]

References:

- FDA compliance programs referenced in the contract
- Title 21 Code of Federal Regulations (21 CFR) parts 110, 120, 123, and 1240
- Fish and Fishery Products Hazards & Controls Guide
- HACCP Regulation for Fish & Fishery Products: Questions and Answers
- Juice HACCP Hazards and Controls Guide

1. Did the inspector use the “Fish and Fishery Products Hazards and Controls Guide” and the “Juice HACCP Hazards and Controls Guide”, as
appropriate, to identify and evaluate the hazards associated with the
product and process?

Examples of a “needs improvement” rating:

a. In a tuna processing plant, the inspector fails to identify histamine as a hazard
   inherent to the incoming raw material and fails to question its absence in the
   firm’s HACCP plan. (Failure to identify a hazard reasonably likely to occur.)

b. A firm is producing fresh, raw, refrigerated fish in cryovac packaging. The
   inspector is not aware that C. botulinum is a significant hazard.

c. An inspector incorrectly identifies aquaculture drugs as a significant hazard for a
   secondary processor of a product that it receives from the primary processor.
   (Identification of a hazard not reasonably likely to occur.)

d. The inspector fails to recognize that a batter tank in a breaded shrimp processing
   operation is a possible CCP. (Failure to recognize an appropriate CCP.)

2. Did the inspector assess the firm’s implementation of sanitation monitoring
   for the applicable eight key areas of sanitation?

   Examples of a “needs improvement” rating:

   a. The inspector insists on the need for the firm to perform medical check-ups
      for crabmeat pickers.

   b. The inspector is unaware of which of the eight areas of sanitation are relevant
      to the firm’s operations.

   c. The inspector fails to inquire about the firm’s SSOPs and monitoring practices.

3. Did the inspector review firm’s HACCP plan (or necessary process controls
   in the absence of a HACCP plan) and applicable monitoring, verification,
   and corrective action records, including those related to sanitation?

   Examples of a “needs improvement” rating:

   a. After conducting a brief walk through a crabmeat processor, the inspector
      relies on a review of the firm’s records to assess the firm’s implementation of
      its HACCP plan. The inspector does not return to the crab picking room to
      determine if picking and packing critical limits are being met or if the firm has
      the equipment to properly monitor the critical limits as specified in the plan.

   b. The inspection reveals that the firm is processing a product that requires a
      HAACP plan. The inspector cites the firm’s failure to have a HAACP plan,
but the inspector does not determine if the necessary controls were put into place without a HACCP plan.

c. Although the inspector is told that the firm uses well water, not potable water, as its source for ice, the inspector does not verify that the firm has the water tested for coliforms to ensure its safety.

d. The inspector does not ask the plant manager for records of pest control after learning that the service is contracted to a private company.

e. The inspector fails to accompany the firm’s sanitarian on a pre-operation inspection when there were indications that sanitary practices may be inadequate.

4. Did the inspector recognize deficiencies in the firm’s monitoring and sanitation procedures through in-plant observations?

Examples of a “needs improvement” rating:

   a. The inspector fails to recognize that cumulative times and temperatures for cooling, holding, and picking of cooked crabs were substantially above such times and temperatures specified in the firm’s HACCP plan.

   b. The inspector fails to recognize that a firm’s finished product labeling does not contain a sulfite declaration even though an ingredient contains a sulfite declaration.

   c. The inspector fails to recognize that the presence of food residues and mold growth on processing equipment immediately prior to processing is evidence of unsanitary conditions.

   d. The inspector does not recognize that food-contact surfaces are being sanitized with a product that is not approved for use on food contact surfaces.

III. Oral and Written Communication

1. Did the inspector identify himself/herself and make appropriate introductions, which include explaining the purpose and scope of the inspection?

Examples of a “needs improvement” rating:

   a. The inspector fails to explain why he/she is at the firm.
b. The inspector enters through the back door and begins examining a storage area without notifying anyone at the firm.

2. Did the inspector use suitable interviewing techniques?

Examples of a “needs improvement” rating:

a. The inspector requests for information are vague; consequently, the firm provides documents that are unrelated to the inspection.

b. Because the inspector’s requests for information contain jargon, the employees are confused and unable to respond to his/her requests.

c. When the plant manager’s responses are evasive, the inspector does not ask follow-up questions to obtain the necessary information. Consequently, the answers to the questions are incomplete.

3. Did the inspector explain findings clearly and adequately throughout the inspection?

Examples of a “needs improvement” rating:

a. The inspector does not discuss the inspection observations with the firm managers at the end of the inspection.

b. The inspector does not discuss with the general manager a significant deficiency observed in the processing area before going to the packing area of the cannery.

c. The inspector is vague during his discussion with the managers at the end of the inspection. Therefore, the managers are unaware of the significance of the observations and that corrective actions are needed.

4. Did the inspector alert the firm’s appropriate management when an immediate corrective action was necessary?

Examples of a “needs improvement” rating
a. The inspector fails to alert the appropriate manager that food containing undeclared FD&C Yellow #5 is being packaged, and, if shipped, could result in a health hazard.

b. The inspector fails to tell the appropriate manager about blood dripping from boxes of boneless beef onto raw carrots.

c. After witnessing product being contaminated with a toxic chemical, the inspector immediately notifies the cleaning lady to clean up the toxic chemical to prevent further product contamination.

5. Did the inspector answer questions and provide information in an appropriate manner?

Examples of a “needs improvement” rating:

a. The inspector tells the plant manager about FDA’s legal action against a competitor.

b. The inspector gives a competitor’s product formula to a friendly plant manager.

c. The inspector fabricates an answer to a policy question, which may lead the firm to take an inappropriate corrective action.

d. The inspector dictates an inappropriate corrective action for a deficiency.

6. Did the inspector write their findings accurately, clearly, and concisely on the State form/document left with the firm?

References:
• FDA compliance programs referenced in the contract

Examples of a “needs improvement” rating:

a. The inspector fails to write that the firm has a significant process deviation on the list of findings.

b. The inspector fails to write on the list of findings that he/she observed excreta pellets in bags of rice.

c. The list of findings shows that the “Firm did not control hazards” with
no further explanation.
## Appendix 4.7

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**FOOD AND DRUG ADMINISTRATION**

### CONTRACT AUDIT

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### 1. PREINSPECTION ASSESSMENT

1. DID THE INSPECTOR REVIEW THE STATE’S ESTABLISHMENT FILE FOR THE PREVIOUS INSPECTION REPORT AND POSSIBLE COMPLAINTS OR ACCESS OTHER AVAILABLE RESOURCES IN PREPARATION FOR THE INSPECTION?

   ☐ Acceptable  ☐ Needs Improvement

   COMMENTS (required for Needs Improvement)

2. DID THE INSPECTOR HAVE THE APPROPRIATE EQUIPMENT AND FORMS TO PROPERLY CONDUCT THE INSPECTION?

   ☐ Acceptable  ☐ Needs Improvement

   COMMENTS (required for Needs Improvement)
### II. INSPECTION OBSERVATIONS AND PERFORMANCE

1. **WAS FDA JURISDICTION ESTABLISHED?**

   - [ ] Acceptable
   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**

2. **DID THE INSPECTOR SELECT AN APPROPRIATE PRODUCT FOR THE INSPECTION AND, IF NECESSARY, MAKE APPROPRIATE ADJUSTMENTS BASED ON WHAT THE FIRM WAS PRODUCING?**

   - [ ] Acceptable
   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**

3. **DID THE INSPECTOR ASSESS THE EMPLOYEE PRACTICES CRITICAL TO THE SAFE PRODUCTION AND STORAGE OF FOOD?**

   - [ ] Acceptable
   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**
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<th>DID THE INSPECTOR PROPERLY EVALUATE THE LIKELIHOOD THAT CONDITIONS, PRACTICES, COMPONENTS, AND/OR LABELING COULD CAUSE THE PRODUCT TO BE ADULTERATED OR MISBRANDED?</th>
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7. **DID THE INSPECTOR REVIEW AND EVALUATE THE APPROPRIATE RECORDS AND PROCEDURES FOR THIS ESTABLISHMENT’S OPERATION AND EFFECTIVELY APPLY THE INFORMATION OBTAINED FROM THIS REVIEW?**

   - [ ] Acceptable
   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**

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<th>8. <strong>DID THE INSPECTOR COLLECT ADEQUATE EVIDENCE AND DOCUMENTATION IN ACCORDANCE WITH STATE PROCEDURES GIVEN THE NATURE OF THE INSPECTIONAL FINDINGS?</strong></th>
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|   - [ ] Acceptable
|   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**

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<th>9. <strong>DID THE INSPECTOR VERIFY CORRECTION OF DEFICIENCIES IDENTIFIED DURING THE PREVIOUS STATE INSPECTION?</strong></th>
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</table>
|   - [ ] Acceptable
|   - [ ] Needs Improvement

   **COMMENTS (required for Needs Improvement)**
II. INSPECTION OBSERVATIONS AND PERFORMANCE (Continued)

10. DID THE INSPECTOR ACT IN A PROFESSIONAL MANNER AND DEMONSTRATE PROPER SANITARY PRACTICES DURING THE INSPECTION?

- [ ] Acceptable
- [ ] Needs Improvement

**COMMENTS** (required for Needs Improvement)

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<th>INSPECTION OBSERVATIONS AND PERFORMANCE FOR 'HACCP-REGULATED' FACILITIES</th>
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<td><strong>Note to Auditor:</strong> These four questions apply to only firms subject to HACCP regulations. These four questions should be left blank for firms not subject to HACCP regulations.</td>
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</tbody>
</table>

1. DID THE INSPECTOR USE THE "FISH AND FISHER PRODUCTS HAZARDS AND CONTROLS GUIDE" OR THE "JUICE HACCP HAZARDS AND CONTROLS GUIDE," AS APPROPRIATE, TO IDENTIFY AND EVALUATE THE HAZARDS ASSOCIATED WITH THE PRODUCT AND PROCESS?

- [ ] Acceptable
- [ ] Needs Improvement

**COMMENTS** (required for Needs Improvement)

2. DID THE INSPECTOR ASSESS THE FIRM'S IMPLEMENTATION OF SANITATION MONITORING FOR THE APPLICABLE EIGHT KEY AREAS OF SANITATION?

- [ ] Acceptable
- [ ] Needs Improvement

**COMMENTS** (required for Needs Improvement)
### 3. DID THE INSPECTOR REVIEW THE FIRM'S HACCP PLAN (OR NECESSARY PROCESS CONTROLS IN THE ABSENCE OF A HACCP PLAN) AND APPLICABLE MONITORING, VERIFICATION AND CORRECTIVE ACTION RECORDS, INCLUDING THOSE RELATED TO SANITATION?

<table>
<thead>
<tr>
<th>Acceptable</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMENTS (required for Needs Improvement)</td>
<td></td>
</tr>
</tbody>
</table>

### 4. DID THE INSPECTOR RECOGNIZED EFFICIENCIES IN THE FIRM'S MONITORING AND SANITATION PROCEDURES THROUGH IN-PLANT OBSERVATIONS?

<table>
<thead>
<tr>
<th>Acceptable</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMENTS (required for Needs Improvement)</td>
<td></td>
</tr>
</tbody>
</table>

### III. ORAL AND WRITTEN COMMUNICATION

#### 1. DID THE INSPECTOR IDENTIFY HIMSELF/HERSELF AND MAKE APPROPRIATE INTRODUCTIONS, WHICH INCLUDE EXPLAINING THE PURPOSE AND SCOPE OF THE INSPECTION?

<table>
<thead>
<tr>
<th>Acceptable</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMENTS (required for Needs Improvement)</td>
<td></td>
</tr>
</tbody>
</table>
2. **DID THE INSPECTOR USE SUITABLE INTERVIEWING TECHNIQUES?**
   - [ ] Acceptable  [ ] Needs Improvement
   
   **COMMENTS** *(required for Needs Improvement)*

3. **DID THE INSPECTOR EXPLAIN FINDINGS CLEARLY AND ADEQUATELY THROUGHOUT THE INSPECTION?**
   - [ ] Acceptable  [ ] Needs Improvement
   
   **COMMENTS** *(required for Needs Improvement)*

4. **DID THE INSPECTOR ALERT THE FIRM'S APPROPRIATE MANAGEMENT WHEN AN IMMEDIATE CORRECTIVE ACTION WAS NECESSARY?**
   - [ ] Acceptable  [ ] Needs Improvement
   
   **COMMENTS** *(required for Needs Improvement)*
5. DID THE INSPECTOR ANSWER QUESTIONS AND PROVIDE INFORMATION IN AN APPROPRIATE MANNER?

☐ Acceptable    ☐ Needs Improvement

COMMENTS (required for Needs Improvement)

6. DID THE INSPECTOR WRITE THEIR FINDINGS ACCURATELY, CLEARLY AND CONCISELY ON THE STATE FORM/DOCUMENT LEFT WITH THE FIRM?

☐ Acceptable    ☐ Needs Improvement

COMMENTS (required for Needs Improvement)

NOTE: EVERY ITEM MARKED "NEEDS IMPROVEMENT" MUST BE ACCOMPANIED BY AN EXPLANATION OF WHY THE ITEM WAS JUDGED AS NEEDING IMPROVEMENT.

Overall Rating:
If three or less items are marked "needs improvement," the overall rating is "acceptable." If four or more items are marked "needs improvement," the overall rating is "needs improvement." The overall rating must be marked in the space provided in the header on the first page.

All questions must be answered "acceptable" or "needs improvement," except for section I.A. Inspection Observations and Performance for 'HACCP-Regulated' firms. If the establishment is not subject to Seafood or Juice HACCP regulations, leave the scoring for these four questions blank.

If four or more evaluated items are marked as "needs improvement," the state program manager must be notified by the appropriate FDA liaison that additional training or other performance improvement measures for the inspector being audited should be initiated. All contract inspectors who receive an overall audit score of "needs improvement" shall receive remedial training in deficient areas or as agreed upon by the FDA Project and Co-Project Officers prior to resuming contract inspection duties.
## Appendix 4.6

### Manufactured Food Regulatory Program Standards

#### Inspection Report Audit Form

<table>
<thead>
<tr>
<th>Auditor</th>
<th>Date of audit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firm identification number</td>
<td>Date of inspection</td>
</tr>
</tbody>
</table>

### I. Introduction

1. **FORMAT OF THE INSPECTION REPORT FOLLOWED THE STATE PROGRAM’S CURRENT PROCEDURES AND POLICIES.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

2. **REQUIRED FIELDS ON INSPECTION REPORT OR RELATED REPORT FORMS ARE COMPLETED.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

### II. Evidence Development

1. **IDENTIFIED FIRM MANAGERS AND KEY PERSONNEL AND DESCRIBED THEIR RESPONSIBILITIES.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

2. **VERIFIED LEGAL STATUS OF FIRM AND CORPORATE OFFICERS.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

3. **DOCUMENTED INDIVIDUAL RESPONSIBILITY.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

4. **REVIEWED QUALITY ASSURANCE PROGRAM AND FIRM’S PROCEDURES FOR IDENTIFYING RISK AND MAINTAINING CONTROLS.**
   - □ Acceptable □ Needs improvement
   - COMMENTS *(required for needs improvement)*

5. **IDENTIFIED VIOLATIONS.**
<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>DOCUMENTED SIGNIFICANT FINDINGS.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>DOCUMENTED POSSIBLE CAUSES OF CONTAMINATION.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>COLLECTED SUFFICIENT SAMPLES.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>COLLECTED EXHIBITS, PHOTOGRAPHS, OR PHOTOCOPIES TO DOCUMENT FINDINGS.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>DESCRIBED FIRM’S SYSTEM FOR PRODUCT AND LOT CODING.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>REPORTED PRODUCT DISTRIBUTION.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>REVIEWED RECORDS OF COMPLAINTS RECEIVED BY FIRM.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
</tbody>
</table>

### III. Discussions With Management

1. DISCUSSED FINDINGS AND VIOLATIONS. | ☐ Acceptable ☐ Needs improvement

   COMMENTS (required for needs improvement)
2. REPORTED RESPONSES OR REPLIES FROM THE FIRM.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

3. RECORDED ANY WARNINGS OF POSSIBLE FURTHER ACTIONS (REINSPECTION, EMBARGO, REVOCATION OF LICENSE, OR LEGAL CONSEQUENCES OF VIOLATIVE CONDITIONS) GIVEN TO THE FIRM.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

4. RECORDED ANY REFUSALS ENCOUNTERED DURING THE INSPECTION.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

IV. Organization of the Report

1. REFERENCED EXHIBITS IN THE REPORT.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

2. WRITTEN OBSERVATIONS WERE CLEAR AND CONCISE.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

3. OBSERVATIONS WERE FACT BASED AND SUPPORTED BY LAWS AND REGULATIONS.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

4. EMPHASIZED SIGNIFICANT OBSERVATIONS.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)

5. OBSERVATIONS WERE REPETITIOUS.
   - Acceptable
   - Needs improvement
   COMMENTS (required for needs improvement)
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6.</td>
<td>SUBMITTED REPORT WITHIN TIMEFRAMES.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>V.</th>
<th>Supervisory Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>STATED THE REASON FOR THE INSPECTION, A BRIEF HISTORY OF THE FIRM, AND FOLLOW-UP TO THE PREVIOUS INSPECTION, IF NECESSARY.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
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<p>| | |</p>
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<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>2.</td>
<td>A SUMMARY OF FINDINGS AND DISPOSITION OF INSPECTION WERE RECORDED IN THE REPORT.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
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</tbody>
</table>

<p>| | |</p>
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<thead>
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<tbody>
<tr>
<td>3.</td>
<td>REINSPECTION SCHEDULE AND RECOMMENDATION FOR COMPLIANCE FOLLOW UP WERE GENERATED AND RECORDED.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>4.</td>
<td>CLASSIFICATION AND FOLLOW-UP WERE CONSISTENT WITH THE LAW, CURRENT POLICIES, AND INSPECTIONAL FINDINGS.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>5.</td>
<td>SUPERVISORY REVIEW AND ACTION WERE DONE WITHIN ADMINISTRATIVE TIMEFRAMES.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>6.</td>
<td>VERIFIED AND DESCRIBED CORRECTIVE ACTIONS FROM PREVIOUS INSPECTION FINDINGS.</td>
</tr>
<tr>
<td></td>
<td>□ Acceptable □ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
</tr>
</tbody>
</table>
7. DATES IN REPORT, COVERSHEET, AND CODING OR OTHER ADMINISTRATIVE DATA WERE RECORDED ACCURATELY.
   - [ ] Acceptable
   - [ ] Needs improvement
   - COMMENTS (required for needs improvement)

8. DISTRIBUTION OF REPORT WAS RECORDED ACCURATELY ON THE COVERSHEET.
   - [ ] Acceptable
   - [ ] Needs improvement
   - COMMENTS (required for needs improvement)
## Appendix 4.7

### Manufactured Food Regulatory Program Standards

#### Sample Report Audit Form

<table>
<thead>
<tr>
<th>Auditor</th>
<th>Date of audit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sample identification number</th>
<th>Date of collection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### I. Introduction

3. **REASON FOR SAMPLE COLLECTION WAS RECORDED.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

4. **SAMPLE SIZE WAS DESCRIBED.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

5. **LOT AND PRODUCT CODING WERE RECORDED ON SAMPLE REPORT.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

6. **MANUFACTURER, SHIPPER, DEALER, AND THE RESPONSIBLE FIRM WERE RECORDED.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

7. **REQUIRED FIELDS ON THE SAMPLE REPORT (SR) OR RELATED REPORT FORMS ARE COMPLETED.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

### II. Evidence Development

1. **METHOD OF COLLECTION WAS APPROPRIATE FOR TYPE OF PRODUCT.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

2. **METHOD OF COLLECTION, INCLUDING SAMPLE SIZE, WAS APPROPRIATE FOR THE LABORATORY ANALYSES.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**

3. **METHOD OF TESTING WERE APPROPRIATE FOR THE RESULTS REPORTED.**
   - [ ] Acceptable
   - [ ] Needs improvement
   - **COMMENTS (required for needs improvement)**
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>PRODUCT LABEL AND LABELING WERE SUBMITTED WITH SR.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>RECEIPT FOR SAMPLE WAS OBTAINED.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>AFFIDAVITS WERE CLEAR, LEGIBLE, AND COMPLETE.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>SR WAS SUBMITTED WITHIN TIMEFRAMES.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
</tbody>
</table>

### III. Sample Integrity

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SAMPLE WAS HANDLED, PACKAGED, AND SHIPPED TO PREVENT COMPROMISING THE CONDITION OR INTEGRITY OF THE SAMPLE.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>SAMPLE WAS DELIVERED OR SHIPPED TO THE APPROPRIATE LABORATORY WITHIN ACCEPTABLE TIMEFRAMES.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>SAMPLE DELIVERY (DATE AND CUSTODIAN) WAS RECORDED ON SR.</td>
<td>☐ Acceptable ☐ Needs improvement</td>
</tr>
<tr>
<td></td>
<td>COMMENTS (required for needs improvement)</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4.8
Corrective Action Plan

The corrective action for each deficiency reported during an audit should be described in the table below. Supporting documents should be referenced and maintained by the State program.

State agency: ________________________________  State program: ________________________________

<table>
<thead>
<tr>
<th>Type of audit:</th>
<th>FIELD INSPECTION</th>
<th>INSPECTION REPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAMPLE REPORT</td>
<td>(circle one)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance factor (record number from audit form)</th>
<th>Description of deficiency</th>
<th>Corrective action(s)</th>
<th>Date of next audit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
Appendix 5.1
Self-Assessment Worksheet

State agency: ___________________________ State program: ___________________________

Does the State program meet the criteria contained in standard number 5, section 5.3?

<table>
<thead>
<tr>
<th>Program Elements</th>
<th>Yes/ No</th>
<th>If no, specify why criteria are not met.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The State program uses epidemiological information from other agencies.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is the State program responsible for epidemiological investigations identified?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is there a system to coordinate agreements between the food and epidemiology programs and that clearly identifies the roles, duties, and responsibilities of each program?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The State program has an established system to investigate reports of illness, injury, and suspected outbreaks.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Are complaints alleging food-related illness, injury, or terrorism maintained in a log or database?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does the State program initiate a response to reports of illness or injury within established timeframes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Does the State program use established epidemiology procedures to conduct illness or injury investigations and collect information?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are the factors that caused the illness, injury, or incidents reported?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The State program disseminates information to the public.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is a procedure in place that outlines criteria for releasing information to the public?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does the State program provide food safety education to the public and regulated industry?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are enforcement tools utilized to reduce and contain illness and injury?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Elements</td>
<td>Yes/No</td>
<td>If no, specify why criteria are not met.</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------</td>
<td>--------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Outbreak reports and surveillance summaries are distributed to the appropriate agencies.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Does the State program maintain a current list of communication links with the appropriate agencies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is a coordinator designated to guide investigative efforts of all agencies involved?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are investigations coordinated with the appropriate agencies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Is a procedure in place to conduct tracebacks of food implicated in an illness, injury, or outbreak, including coordination with the appropriate agencies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Are final reports of the State program’s findings of foodborne illness and injury investigations maintained and shared with the appropriate agencies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The State program provides guidance for immediate notification of appropriate law enforcement agencies when intentional food contamination or terrorism is suspected or threatened.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is a written policy in place for handling reports or threats of intentional food contamination or terrorism?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Has the State program identified a coordinator to lead investigations of suspected or threatened intentional food contamination and terrorism?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Has the State program identified the appropriate agencies to be contacted and the name and phone number of designated contact persons in such agencies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Does the State program collaborate as necessary with FDA and other Federal authorities under conditions of increased threat of intentional contamination?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name/title of auditor: ____________________________________________________________

Signature: ___________________________ Date: __________
Appendix 5.2
Memorandum of understanding between the department of health and the department of agriculture concerning the investigation of foodborne illnesses associated with food service establishments and food plants

I. GENERAL

This Memorandum of Understanding (MOU) replaces the MOU dated _______, and effective on _______, between the Department of Health (Health) and the Department of Agriculture (Agriculture).

The purpose of this MOU is to clarify the respective responsibilities of Agriculture and Health in the surveillance for, and investigation of, foodborne illnesses, and in furtherance of such purpose, to broaden cooperative efforts between the two agencies.

Responsible Agencies

Agriculture and Health are the responsible agencies for the implementation of this MOU. Under the authority of Sections ________________________ of the Public Health Law and pursuant to the power granted to the State Commissioner of Health by Agriculture Law to certify and approve service food establishment permit and inspection programs of local health agencies, the State Commissioner of Health, by execution of this instrument, binds all city and county health departments and State district health offices (local health units) to its terms and conditions.

For purposes of this agreement, Health and Agriculture will be responsible for its implementation.

Jurisdiction

This MOU applies to the entire State and includes all city and county health departments.

Effective Date

This agreement will be effective ____________.

Legal Authority

The ________________________________________________ provides requisite authority for Agriculture and Health to enter into this MOU. Section _____ of the Public Health Law and Section _____ of the Agriculture Law also authorize this MOU.

II. RESPONSIBILITIES AND IMPLEMENTATION

Determination of Responsibility
When a food-related illness from a manufactured food product regulated by Agriculture, Health, and local health departments is reported, Health will be responsible for conducting the epidemiologic investigation. Agriculture will be responsible for investigating the food preparation areas and conducting an investigation at the food plant. Agriculture will send a copy of these reports to Health. Agriculture will also coordinate any resulting actions to remove the contaminated food from distribution. Laboratory support for investigations will be coordinated by each agency under separate existing agreements.

Implementation

Agriculture will inform its field representatives of their areas of responsibility. Health will define areas of responsibility among its local health units. Responsibilities of other State and Federal agencies also will be specified.

Health, Agriculture, and local health units will provide or sponsor joint training sessions in the interpretation and application of principles, regulations, standards, and techniques of common concern or interest.

III. MECHANISMS FOR INFORMATION EXCHANGE

Health, Agriculture, and each local health unit shall maintain rosters of regional and local Health officials and Agriculture food program supervisors and make such rosters available to each other.

If Agriculture becomes aware of actual or suspected cases of foodborne illness, it shall report such cases by telephone—without delay—to the local health unit having jurisdiction for that locality. Health and Agriculture will jointly investigate and complete final reports involving illnesses that occur at, or due to, establishments regulated by Agriculture. These reports will be forwarded to Agriculture and to Health.

Whenever one agency learns of an FDA Class I or similar recall of food or food products, it shall immediately notify the other agency of such recall. Throughout the recall process, both agencies at all levels will make a maximum effort to keep the other agency informed and cooperate in every way possible to expedite the removal of hazardous food from the marketplace.

IV. MECHANISMS FOR EMBARGO/SEIZURE OF FOOD SOURCES IMPLICATED IN EPIDEMIOLOGIC INVESTIGATIONS

Epidemiologic Investigation
Health will investigate foodborne disease outbreaks. These investigations are conducted by county, city health departments, and/or State health departments following procedures outlined in the “Environmental Health Manual.” Health will notify Agriculture of all ongoing investigations where a contaminated food source is the suspected cause of a disease outbreak. Agriculture will provide assistance in the investigation and may play the lead role in tracing contaminated foods back to their source by visiting retailers, wholesalers, and producers to review and obtain records that document the chain of distribution for the products. Health will analyze the findings of the epidemiologic and source investigations and make a determination as to the likelihood of an association between the illness outbreak and its cause being one or more sources. When warranted, based on the evaluation of the investigation data and analysis, the Commissioner of Health will certify to the Commissioner of Agriculture that food from the source(s) constitute(s) a danger to the health of the people of the State and that such source(s) is/are unapproved source(s) for food service establishments in the State.
**Embargo, Seizure, Recall, and Public Notification**

After receiving certification from the Commissioner of Health, the Commissioner of Agriculture shall direct the seizure quarantine and/or destruction of the food in question pursuant to the provisions of Section ____ of the Agriculture Law, following his or her determination that said food is adulterated within the meaning of Section ____ of the Agriculture Law and, as such, that the manufacture, processing, possession, sale, offering, or exposure for sale of such food would violate Section ____ of the Agriculture Law. Where they deem it appropriate, the Commissioners of Health and Agriculture shall direct that a recall of such adulterated food be implemented and that the public be notified of such recall. Health shall assist in cases involving such seizures, quarantines, destructions, and recalls by assuring the removal of any remaining contaminated food from food service establishments and food plants and by making available witnesses for any administrative proceedings and/or litigation associated with such actions.

Nothing herein contained shall be construed to restrict the power of the Commissioner of Health to take Summary Action under Public Health Law Section ____ to require the discontinuance of conditions or activities constituting a danger to public health when such action is deemed appropriate under the circumstances.

**V. REVIEW OF AGREEMENT**

This agreement between the two departments shall be submitted annually to the Governor's Office and the Division of the Budget for their review of effectiveness and to solicit their recommendations to both Agriculture and Health as to changes of policies and procedures with respect to this agreement.

**For the Department of Agriculture**

Signature ______________________________________

Title  __________________________________________

Date  __________________________________________

**For the Department of Health**

Signature ______________________________________

Title  __________________________________________

Date  __________________________________________
# Appendix 6.1

## Self-Assessment Worksheet

State agency: ___________________________  State program: ________________

The State program will provide an overview of its compliance and enforcement program. References to sources such as laws, regulations, and manuals are acceptable.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><strong>Describe the compliance and enforcement program and include references to sources.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td><strong>Describe how the State program uniformly applies enforcement strategy(ies).</strong></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td><strong>Describe the methods (including electronic systems) used by the State program to track critical and chronic violations and violators.</strong></td>
</tr>
</tbody>
</table>
4. Describe the risk-based process used to determine when a directed investigation, follow-up, or a re-inspection is needed.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>4.</strong></td>
<td>Describe the risk-based process used to determine when a directed investigation, follow-up, or a re-inspection is needed.</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5.</strong></td>
<td>Provide the established timeline for progressive compliance actions including but not limited to license revocation, embargoes, warning letters, and injunctions.</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6.</strong></td>
<td>Describe how the State program delivers verbal and written policy and guidance impacting compliance decisions to non-operational and operational staff.</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name/title of auditor:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Signature:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Date:</strong></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 6.2
Summary of Compliance and Enforcement Activities

Worksheet 6.2 is used to record the enforcement actions recommended in the previous 12 months and to calculate the State program’s rating for conformance to compliance procedures. Supporting documents should be referenced and maintained by the State program. Please indicate if an action was taken because voluntary compliance was not achieved.

It is recommended that all cases be reviewed and compiled. State programs with a volume of cases, however, may use a statistical approach and review representative cases. Use continuation sheets as necessary.

INSTRUCTIONS:  
(1) Record the food firm identification number and the recommended enforcement action.

(2) For each type of enforcement action, record the level of conformance to compliance procedures. 
   A = acceptable; NI = needs improvement

(3) Record the $A_t$ and $NI_t$.
   $A_t$ = vertical sum of acceptable ratings.
   $NI_t$ = vertical sum of needs improvement ratings.

(4) Calculate the overall rating for the State program’s conformance to compliance procedures. Record the rating in the space provided in the box located at the top of Worksheet 6.2.

FORMULA:

\[
\text{Performance factor rating} = \left[ \frac{A_t}{A_t + NI_t} \right] \times 100
\]
## Worksheet 6.2
### Calculation of the level of conformance to compliance procedures

State agency: ____________________  State program: ____________________

**Rating for conformance to compliance procedures (4):**

<table>
<thead>
<tr>
<th>Total Food firm identification number (1)</th>
<th>Enter the final sums of (2) subtotal + sums of enforcement action recommended (1)</th>
<th>( A_t )</th>
<th>( N_t )</th>
<th>Compliance procedures followed? (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>FOLLOW COMPLIANCE PROCEDURES</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>USE THIS SPACE TO EXPLAIN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IMPROVEMENTS NEEDED TO FOLLOW</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>COMPLIANCE PROCEDURES</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal**

Enter the sum of the totals from all continuation sheets.

\( A_t \)  \( N_t \)

Name/title of auditor: _____________________________________________________________

Signature: ________________________________  Date: _______________
<table>
<thead>
<tr>
<th>Food firm identification number (1)</th>
<th>Enforcement action recommended (1)</th>
<th>Compliance procedures followed? (2)</th>
<th>USE THIS SPACE TO EXPLAIN IMPROVEMENTS NEEDED TO FOLLOW COMPLIANCE PROCEDURES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Enter the sums of (2). A_t =</td>
<td>NI_t =</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 7
Self-Assessment Worksheet

State agency: ___________________________ State program: ___________________________ Year______

List all industry and community outreach activities in the following table.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Description</th>
<th>Audience Type</th>
<th>Number of Attendees</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name/title of auditor: ________________________________________________________
Signature: ___________________________ Date: ___________________________
Appendix 8.1
Self-Assessment Worksheet

State agency: ____________________________  State program: ____________________________

Does the State program have sufficient funds, staff, equipment, and resources necessary to meet the program standards? Answer yes or no in each block. If no, please explain. Use additional pages as needed.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Funding</th>
<th>Staffing</th>
<th>Equipment</th>
<th>Other resources needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Regulatory Foundation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Training Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Inspection Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Inspection Audit Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Food-related Illness …Outbreaks…Food Defense…</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Compliance and Enforcement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Industry and Community Relations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Program Resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Program Assessment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Laboratory Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name/title of auditor: ______________________________________________________

Signature: ____________________________  Date: ____________________
Appendix 8.2

I. Calculation for determining a required number of inspectors

This appendix provides a sample calculation for the number of field staff required to conduct inspections\(^1\) of food plants. The data in the following table will vary significantly based on local or regional conditions.

<table>
<thead>
<tr>
<th>Risk category</th>
<th>Number in inventory</th>
<th>Inspection frequency</th>
<th>Average inspection time (include travel)(^2)</th>
<th>Reinspection frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>1,000</td>
<td>12 months</td>
<td>7.2 hours</td>
<td>10%</td>
</tr>
<tr>
<td>Medium</td>
<td>2,000</td>
<td>18 months</td>
<td>5.7 hours</td>
<td>10%</td>
</tr>
<tr>
<td>Low</td>
<td>1,000</td>
<td>24 months</td>
<td>4.2 hours</td>
<td>10%</td>
</tr>
</tbody>
</table>

1. Calculate available annual inspection time per full time equivalent (FTE).

For example, the State agency determines that after allowances for annual leave, sick leave, holidays, training, administrative time, and other activities each State program FTE has 1200 hours available for conducting inspections.

2. Calculate the number of hours required to inspect establishments in each risk category.

Formula for high risk establishment inspection time:
1000 firms x 100% coverage = 1000 inspections + 10% reinspection = 1100 total inspections per year x 7.2 hours = 7920 hours

Formula for medium risk establishment inspection time:
2000 firms x 66.6% coverage = 1333 inspections + 10% reinspection = 1466 total inspections per year x 5.7 hours = 8356 hours

Formula for low risk establishment inspection time:
1000 firms x 50% coverage = 500 inspections + 10% reinspection = 550 inspection total inspections x 4.2 hours = 2320 hours

3. Calculate the number of FTE’s required. Formula:
7920 hours for high risk + 8356 hours for medium risk + 2320 hours for low risk = 18596 inspection hours required / 1200 inspection hours available per FTE = **15.5 FTEs**

---

\(^1\) Includes routine surveillance, reinspections, complaint or outbreak investigations, compliance follow-up investigations, risk assessment reviews, process reviews, and other direct establishment contact time such as on-site training.

\(^2\) Inspection times based on calculations presented in “DHHS Office of Inspector General’s FDA Oversight of State Food Firm Inspections” dated June 2000.
# Appendix 8.3

## Inspection Equipment

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Assigned</th>
<th>Available</th>
<th>Wish list</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer and printer</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Camera</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Digital camera</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Credentials</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Important phone numbers (supervisor and servicing laboratory)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regulation and policies</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paper, pen, masking tape, and permanent marker</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clipboard</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Required forms(^1)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol swabs and wipes</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flashlight and holder</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blacklight</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Light meter</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Thermometer</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infrared thermometer</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exacto knife and scissors</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Putty knife and scraper</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sampling devices (sieves, triers, and swabs)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sampling equipment (sterile containers and scoops)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coolant (ice and freezer paks)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shipping containers</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appropriate sanitizer test strips</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Official seals</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protective clothing (lab coat, gloves, and boots)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye protection</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hair restraint</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing protection</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hard hat</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) States will attach to appendix 8.3 a list of its required inspection forms.
<table>
<thead>
<tr>
<th>Item</th>
<th></th>
<th>X</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety shoes</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Respirator</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
## Worksheet 9
### Self-Assessment and Improvement Tracking

<table>
<thead>
<tr>
<th>STANDARD</th>
<th>INITIAL SELF-ASSESSMENT</th>
<th>VERIFICATION AUDIT</th>
<th>PROGRAM IMPROVEMENT PLAN</th>
<th>SUBSEQUENT SELF-ASSESSMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Regulatory Foundation</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Assessor initials:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>2</td>
<td>Training Program</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Assessor initials:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>3</td>
<td>Inspection Program</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Assessor initials:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>4</td>
<td>Inspection Audit Program</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Assessor initials:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>5</td>
<td>Food-related Illness…</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Outbreaks…Food Defense…</td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>6</td>
<td>Compliance and</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Enforcement</td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>7</td>
<td>Industry and Community</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Relations</td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>8</td>
<td>Program Resources</td>
<td>Date completed:</td>
<td>Date of audit:</td>
<td>Date completed:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
<td>Conformance status:</td>
</tr>
<tr>
<td></td>
<td>Date of audit:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
</tr>
<tr>
<td>9</td>
<td>Program Assessment</td>
<td>Date completed:</td>
<td>Date of audit:</td>
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<td>Conformance status:</td>
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<td></td>
<td>Date of audit:</td>
<td>Auditor initials:</td>
<td>Auditor initials:</td>
<td>Assessor initials:</td>
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<tr>
<td>10</td>
<td>Laboratory Support</td>
<td>Date completed:</td>
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<td>Date of audit:</td>
<td>Auditor initials:</td>
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<td>Assessor initials:</td>
</tr>
</tbody>
</table>

Name/title of auditor: ____________________________________________________________

Signature: ___________________________ Date: ___________________________
Appendix 10
Self-Assessment Worksheet

State agency: ______________________________  State program: ______________
## Does the State program meet the assessment criteria?

<table>
<thead>
<tr>
<th>Program Elements</th>
<th>Yes/No</th>
<th>If no, please specify why criteria are not met.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the program have:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A current list of servicing laboratories</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. A list of analytical capabilities for each servicing laboratory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. A servicing laboratory to analyze samples that may contain biological hazards.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Contracts or written agreements with servicing laboratories.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Verification of the servicing laboratory’s accreditation or certification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The servicing laboratory’s QAP contains the requirements listed here:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Calibration, verification, and maintenance of equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Documentation of analytical results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Recordkeeping (worksheets, sample records)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Sample accountability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Sample integrity and chain of custody</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Qualifications of analysts (training included)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Audit procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Name/title of auditor:** ________________________________

**Signature:** ___________________________  **Date:** ____________
Voluntary National Retail Food Regulatory Program Standards

April 2009

“Standards of Excellence for Continual Improvement”

Developed and recommended by the U.S. Food and Drug Administration with input from federal, state, and local regulatory officials, industry, trade associations, academia, and consumers.

OMB Control No. 0910-0621
Expiration Date: 03-31-2011
Additional PRA statement on the following page.
PAPERWORK REDUCTION ACT OF 1995

This document contains information collection provisions that are subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520).

The time required to complete this information collection is estimated to average 157.1 annual hours per recordkeeper for each enrolled jurisdiction to complete the management tasks for recordkeeping for self-assessment, baseline data collection, and verification audit. FDA estimates a total of 24 minutes annually for each enrolled jurisdiction to complete the following: FDA Form 3519, “FDA National Registry Report,” Form 3520, “Permission to Publish in National Registry,” “ATN Field Training Worksheet” and “Documentation of Successful Completion – Field Training Process” forms. FDA's recordkeeping and reporting burden estimate includes time required for a state, local, or tribal agency to review the instructions in the Program Standards, compile information from existing sources, and create any records recommended in the Program Standards that are not already kept in the normal course of the agency's usual and customary activities. Worksheets (Appendices) are provided to assist in this compilation. Send comments regarding this burden estimate or suggestions for reducing this burden to: Office of Food Safety, Retail Food – Cooperative Programs Coordination Staff, (HFS-320), Center for Food Safety and Applied Nutrition, Food and Drug Administration, 5100 Paint Branch Parkway, College Park, MD 20740.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0910-0621 (expires 03-31-2011).
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INTRODUCTION

Achieving national uniformity among regulatory programs responsible for retail food protection in the United States has long been a subject of debate among the industry, regulators and consumers. Adoption of the FDA Food Code at the state, local and tribal level has been a keystone in the effort to promote greater uniformity. However, a missing piece has been a set of widely recognized standards for regulatory programs that administer the Food Code. To meet this need FDA has developed the Voluntary National Retail Food Regulatory Program Standards (Program Standards) through ideas and input from federal, state, and local regulatory officials, industry, trade and professional associations, academia and consumers on what constitutes a highly effective and responsive retail food regulatory program.

In March of 1996, the FDA hosted a meeting to explore ways in which its retail food protection program could be improved. Participants in the meeting included FDA Retail Food Specialists, FDA headquarters personnel, state and local regulatory officials from the six FDA regions, the president of the Association of Food & Drug Officials, and industry representatives. Following that meeting, FDA established a National Retail Food Team comprised of the Regional Retail Food Specialists, CFSAN personnel and other FDA personnel directly involved in retail food protection. A Retail Food Program Steering Committee was established and tasked with leading the team to respond to the direction given by the participants in the meeting, i.e. providing national leadership, being equal partners, being responsive, and providing communication and promoting uniformity.

The Steering Committee was charged with developing a five-year operational plan for FDA’s retail food program. The Steering Committee was also charged with ensuring the operational plan was in keeping with the goals and mission of the President’s Food Safety Initiative. FDA solicited input from the regulatory community, industry and consumers in developing the plan. The resulting Operational Plan charted the future of the National Retail Food Program and prompted a reassessment of the respective roles of all stakeholders and how best to achieve program uniformity.

From the goals established in the Operational Plan, two basic principles emerged on which to build a new foundation for the retail program:

- Promote active managerial control of the risk factors most commonly associated with foodborne illness in food establishments, and
- Establish a recommended framework for retail food regulatory programs within which the active managerial control of the risk factors can best be realized.

These principles led to the drafting of standards that encourage voluntary participation by the regulatory agencies at the state, local, and tribal level. The Program Standards were developed with input obtained through a series of meetings over a two-year period including: the 1996 stakeholders meeting, FDA Regional Seminars, meetings with state officials hosted by the Retail Food Specialists, and six Grassroots Meetings held around the country in 1997. Valuable input from industry associations, associations of regulatory officials, and others was
also obtained. The Program Standards were provided to the Conference for Food Protection for further input and to achieve broad consensus among all stakeholders.

In developing the Program Standards, FDA recognized that the ultimate goal of all retail food regulatory programs is to reduce or eliminate the occurrence of illnesses and deaths from food produced at the retail level and that there are different approaches toward achieving that goal. Federal, state, local, and tribal agencies continue to employ a variety of mechanisms with differing levels of sophistication in their attempt to ensure food safety at retail.

While the Program Standards represent the food safety program to which we ultimately aspire, they begin by providing a foundation upon which all regulatory programs can build through a continuous improvement process. The Standards encourage regulatory agencies to improve and build upon existing programs. Further, the Standards provide a framework designed to accommodate both traditional and emerging approaches to food safety. The Program Standards are intended to reinforce proper sanitation (good retail practices) and operational and environmental prerequisite programs while encouraging regulatory agencies and industry to focus on the factors that cause and contribute to foodborne illness.

**PURPOSE**

The Program Standards serve as a guide to regulatory retail food program managers in the design and management of a retail food regulatory program and provide a means of recognition for those programs that meet these standards. Program manager and administrators may establish additional requirements to meet individual program needs.

The Program Standards are designed to help food regulatory programs enhance the services they provide to the public. When applied in the intended manner, the Program Standards should:

- Identify program areas where an agency can have the greatest impact on retail food safety
- Promote wider application of effective risk-factor intervention strategies
- Assist in identifying program areas most in need of additional attention
- Provide information needed to justify maintenance or increase in program budgets
- Lead to innovations in program implementation and administration
- Improve industry and consumer confidence in food protection programs by enhancing uniformity within and between regulatory agencies

Each standard has one or more corresponding appendices that contain forms and worksheets that facilitate the collection of information needed to fully assess a retail program. Regulatory agencies may use existing, available records or may choose to develop and use alternate forms and worksheets that capture the same information.
**SCOPE**

The Program Standards apply to the operation and management of a retail food regulatory program that is focused on the reduction of risk factors known to cause or contribute to foodborne illness and to the promotion of active managerial control of these risk factors. The results of a self-assessment against the Standards may be used to evaluate the effectiveness of food safety interventions implemented within a jurisdiction. The Standards also provide a procedure for establishing a database on the occurrence of risk factors that may be used to track the results of regulatory and industry efforts over time.

These Standards do not establish recommendations or criteria for hiring qualifications and practices used by retail food regulatory programs nor do they establish criteria for the credentialing or certification of food safety inspection officers. Retail food regulatory programs should promote policies and practices that will attract a highly qualified and educated workforce with the ability to identify and communicate control of food safety hazards.

The Conference for Food Protection supports a minimum education for all Food Safety Inspection Officers of at least a bachelor's degree with 30 semester hours or 45 quarter hours in the basic sciences, including courses in biology, microbiology, chemistry, physics, agricultural science, other physical sciences, environmental health science, sanitary engineering, or environmental engineering.

**NEW DEVELOPMENTS**

The Program Standards were pilot tested in each of the five FDA regions in 1999. Each regulatory participant reported the results at the 2000 Conference for Food Protection. Improvements to the Standards were incorporated into the January 2001 version based on input from the pilot participants. Further refinements to the Standards were made in subsequent drafts leading up to the endorsement of the March 2002 version of the Program Standards by the 2002 Conference for Food Protection. Subsequent to this endorsement, the following general changes were made to the Program Standards document:

- The **April 2003** version contains enhancements to the forms and worksheets in the Appendices to improve their usefulness.
- The **January 2005** version contains revisions to Standard 1, 5, and 9 based on recommendations approved at the 2004 Conference for Food Protection.
- The **December 2007** version contains revisions to Standards 2, 3, 4, 6, and 9, Appendices B-1 through B-4 (Standard 2), Appendix D (Standard 4), and Appendix F (Standard 6), based on recommendations from the 2006 Conference for Food Protection. Further, the Office of Management and Budget assigned an OMB number to the project allowing the removal of the term “DRAFT” from the Standards.
- The **April 2009** version contains revisions to the Definitions, Standards 1, 2, 5, and 9, Appendix A (Standard 1), Appendices B-1 and B-2 (Standard 2), Appendix E (Standard 5), and Appendix F (Standard 6).
In maintaining these standards, FDA intends to allow for and encourage new and innovative approaches to the reduction of factors that are known to cause foodborne illness. Program managers and other health professionals participating in this voluntary program who have demonstrated means or methods other than those described here may submit those to FDA for consideration and inclusion in the Program Standards. Improvements to future versions of the Standards will be made through a process that includes the Conference for Food Protection to allow for constant program enhancement and promotion of national uniformity.

WEB-LINKS CONTAINED IN THIS DOCUMENT

Effective May 29, 2009, Phase One of the updated FDA web page will be completed. To access the enclosed links please go to: www.fda.gov then click on Food>Food Safety>Retail Food Protection. For web links for training and certification, please go to www.fda.gov, and search "ORAU State Training."

IMPACT ON PROGRAM RESOURCES

During pilot testing of the Program Standards in 1998, some jurisdictions reported that the self-assessment process was time consuming and could significantly impact an agency’s resources. Collection, analysis, and management of information for the database were of special concern. However, participating jurisdictions also indicated that the resource commitment was worthwhile and that the results of the self-assessment were expected to benefit their retail food protection program. Advance planning is recommended before beginning the data collection process in order to use resources efficiently. It is further recommended that jurisdictions not attempt to make program enhancements during the self-assessment process. A better approach is to use the self-assessment to identify program needs and then establish program priorities and plans to address those needs as resources become available.

COMMENTS AND INQUIRIES

To promote uniform and reasonable application of these standards, interested persons are invited to submit comments and inquiries to their FDA Regional Retail Food Specialist or to the Retail Food Protection Team in the FDA Center for Food Safety and Applied Nutrition.
DEFINITIONS

The following definitions apply in the interpretation and application of these Standards.

1) **Active Managerial Control** – The purposeful incorporation of specific actions or procedures by industry management into the operation of a business to attain control over foodborne illness risk factors.

2) **Auditor** – 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.

3) **Baseline Survey** – See Risk Factor Study

4) **Candidate** – A regulatory officer whose duties include the inspection of retail food establishments.

5) **Compliance and Enforcement** – Compliance includes all voluntary or involuntary conformity with provisions set forth by the regulatory authority to safeguard public health and ensure that food is safe. Enforcement includes any legal and/or administrative procedures taken by the regulatory authority to gain compliance.

6) **Confirmed Foodborne Disease Outbreak** – A foodborne disease outbreak in which laboratory analysis of appropriate specimens identifies a causative agent and epidemiologic analysis implicates the food as the source of the illness or epidemiological analysis alone implicates the food as the source of the illness

7) **Direct Regulatory Authority (DRA)** – The organizational level of government that is immediately responsible for the management of the retail program. This may be at the city, county, district, state, federal or tribal level.

8) **Enforcement Actions** – Actions taken by the regulatory authority such as, but not limited to, warning letters, revocation or suspension of permit, court actions, monetary fines, hold orders, destruction of food, etc., to correct a violation found during an inspection.

9) **Follow-up Inspection** – An inspection conducted after the initial routine inspection to confirm the correction of a violation(s).

10) **Food Code Interventions** – The preventive measures to protect consumer health stated below:

   1. Management's demonstration of knowledge;
   2. Employee health controls;
   3. Controlling hands as a vehicle of contamination;
   4. Time/temperature parameters for controlling pathogens; and
   5. Consumer advisory.

11) **Food-Related Injury** – An injury from ingesting food containing a physical hazard such as bone, glass, or wood.

12) **Foodborne Disease Outbreak** – The occurrence of two or more cases of a similar illness resulting from the ingestion of a common food.

13) **Good Retail Practices (GRP's)** – Preventive measures that include practices and procedures to effectively control the introduction of pathogens, chemicals, and physical objects into food, that are prerequisites to instituting a HACCP or Risk Control Plan and are not addressed by the Food Code interventions or risk factors.
14) **Hazard** – A biological, chemical or physical property that may cause food to be unsafe for human consumption.

15) **National Registry of Retail Food Protection Programs (National Registry)** – A listing of retail food safety programs that have voluntarily enrolled as participants in the *Voluntary National Retail Food Regulatory Program Standards.*

16) **Person in charge (PIC)** – The individual present at a food establishment who is responsible for the operation at the time of inspection.

17) **Program Element** – One of the program areas for which a National Standard has been established such as regulations, training, inspection system, quality assurance, foodborne illness investigation, compliance and enforcement, industry and consumer relations, and program resources.

18) **Program Manager** – The individual responsible for the oversight and management of a regulatory retail food program.

19) **Quality Records** – Documentation of specific elements of program compliance with the National Standards as specified in each Standard.

20) **Risk Control Plan (RCP)** – A concisely written management plan developed by the retail or food service operator with input from the health inspector that describes a management system for controlling specific out-of-control risk factors.

21) **Risk Factors** – The improper employee behaviors or improper practices or procedures in retail food and food service establishments stated below which are most frequently identified by epidemiological investigation as contributing to foodborne illness or injury:

   1. Improper holding temperatures;
   2. Inadequate cooking;
   3. Contaminated equipment;
   4. Food from unsafe sources; and
   5. Poor personal hygiene.

22) **Risk Factor Study (Survey)** (formerly Baseline Survey) – A study on the occurrence of foodborne illness risk factors within institutional, foodservice, restaurants, and retail food facility types under a jurisdiction’s regulatory authority. Criteria for a Risk Factor Study (Survey) are detailed in Standard 9, including at a minimum:

   1. Data collection, analysis, and a written report;
   2. A collection instrument with data items pertaining to the five foodborne illness risk factors;
   3. A collection instrument that uses the convention of IN, OUT, NA, and NO to document observations;
   4. All facility types identified by FDA’s national study that are under the jurisdictions regulatory authority; and
   5. Studies subsequent to the initial study repeated at 5-year intervals.

23) **Routine Inspection** – A full review and evaluation of a food establishment’s operations and facilities to assess its compliance with Food Safety Law, at a planned frequency determined by the regulatory authority. This does not include re-inspections and other follow-up or special investigations.

24) **Self-Assessment** – An internal review by program management to determine whether the existing retail food safety program meets the National Standards.

25) **Standardization Inspection** – An inspection used to demonstrate a candidate's
knowledge, communication skills, and ability to identify violations of all regulatory requirements and to develop a risk control plan for identified, uncontrolled risk factors.

26) **Suspect Foodborne Outbreak** – An incident in which two or more persons experience a similar illness after ingestion of a common food or eating at a common food establishment/gathering.

27) **Trainer** - An individual who has successfully completed the following training elements in Standard 2 and is recognized by the program manager as having the field experience and communication skills necessary to train new employees.
   1. Satisfactory completion of the prerequisite courses,
   2. Completion of a field training process similar to that contained in Appendix B-2, and
   3. Completion of 25 independent inspections and satisfactory completion of the remaining course curriculum.

28) **Training Standard** - A person who has successfully completed the following training elements as explained in Standard 2 and is recognized by the program manager as having the field experience and communication skills necessary to train new employees. The training elements necessary are:
   1. Satisfactory completion of the prerequisite courses,
   2. Completion of a field training process similar to that contained in Appendix B-2,
   3. Completion of 25 independent inspections and satisfactory completion of the remaining course curriculum, and
   4. Completion of a standardization process similar to the FDA standardization procedures.

29) **Verification Audit** - A systematic, independent examination by an external party to confirm the accuracy of the Self-Assessment.
STANDARD NO. 1   REGULATORY FOUNDATION

This standard applies to the regulatory foundation used by a retail food program. Regulatory foundation includes any statute, regulation, rule, ordinance, or other prevailing set of regulatory requirements that governs the operation of a retail food establishment.

REQUIREMENT SUMMARY

The regulatory foundation includes provisions for:

1. The public health interventions contained in the current published edition of the Food Code or one of the two most recent previous editions of the Food Code;
2. Control measures for the risk factors known to contribute to foodborne illness;
3. Good Retail Practices (GRPs) at least as stringent as the Food Code edition as specified in 1 above; and
4. Compliance and enforcement at least as stringent as the selected provisions from the Food Code and Annex 1 of the Food Code edition as specified in 1 above.

DESCRIPTION OF REQUIREMENT

A. Food Code Interventions and Risk Factor Control Measures
The regulatory foundation contains provisions that are at least as stringent as the public health interventions and the provisions that control risk factors known to contribute to foodborne illness contained in the current published edition of the Food Code or one of the two most recent previous editions of the Food Code. Jurisdictions meeting Standard 1 that may become noncompliant due to the release of a new edition of the Code are considered to continue meeting the Standard for a period of two years from the release date of the new Code edition in order to complete the process of updating its regulations.

To meet this element of the Standard, regulations must have a corresponding requirement for the Food Code sections as listed in Appendix A, Table A-1 and summarized in Table A-2, from #1 "Demonstration of Knowledge" through #11 "Highly Susceptible Populations." For initial listing, the regulatory foundation must contain at least 9 of the 11 interventions and risk factor controls. In order to meet fully the requirements of the Standard, the regulatory foundation must meet all 11 of the interventions and risk factor controls by the third audit.

B. Good Retail Practices
The regulations contain provisions that address Good Retail Practices that are at least as stringent as those described in the edition of the Food Code as specified in A. To meet this element of the Standard, regulations must have a corresponding requirement for 95 percent of the Food Code sections as listed in Appendix A, Table A-3 and summarized in Table A-4, from #12 "Personnel" through #37 "Variance for Smoking."

C. Compliance and Enforcement
The regulations contain provisions that address Compliance and Enforcement requirements that are at least as stringent as those contained in the edition of the Food Code as specified in A. To meet this element of the Standard, regulations must have a corresponding
requirement for each of the *Food Code* sections as listed in Appendix A, Table A-5, items 1 through 13; except item 12, Legal Remedies, where only one of the sections pertaining to criminal, injunctive, or civil penalties is required.

**OUTCOME**

The desired outcome of this standard is the adoption of a sound, science-based regulatory foundation for the public health program and the uniform regulation of industry.

**DOCUMENTATION**

The quality records needed for this standard include:

1. The statute, regulation, rule, ordinance, or other prevailing set of regulatory requirements that govern the operation of a retail food establishment; and
2. The completed Appendix A and its accompanying tables.
STANDARD NO. 2    TRAINED REGULATORY STAFF

This Standard applies to the essential elements of a training program for regulatory staff.

REQUIREMENT SUMMARY

The regulatory retail food program inspection staff (Food Safety Inspection Officers - FSIOs) shall have the knowledge, skills, and ability to adequately perform their required duties. The following is a schematic of a 5-step training and standardization process to achieve the required level of competency.

STEP 1 – Completion of curriculum courses designated as “Pre” in Appendix B-1 prior to conducting any independent routine inspections.

STEP 2 – Completion of a minimum of 25 joint field training inspection, AND
successful completion of the jurisdiction’s FSIO Field Training similar to the process outlined in Appendix B-2.

STEP 3 – Completion of a minimum of 25 independent inspections AND
remaining course curriculum (designated as “post” courses) outlined in Appendix B-1.

STEP 4 – Completion of a standardization process similar to the FDA standardization procedures. (See FDA Procedures for Standardization of Retail Food Inspection/Training Officers at http://www.cfsan.fda.gov/~ear/rfi-toc.html).

STEP 5 – Completion of 20 contact hours of continuing food safety education every 36 months after the initial training is completed.
DESCRIPTION OF REQUIREMENT

Ninety percent (90 %) of the regulatory retail food program inspection staff (Food Safety Inspection Officers - FSIOs) shall have successfully completed the required elements of the 5-step training and standardization process as follows:

- Steps 1 through 4 within 18 months of hire or assignment to the retail food protection program.
- Step 5 every 36 months after the initial 18 months of training.

**Step 1: Pre-Inspection Curriculum**

Prior to conducting any type of independent field inspections in retail food establishments, the FSIO must satisfactorily complete training in prerequisite courses designated with a “Pre” in Appendix B-1, for the following curriculum areas:

1. Prevailing statutes, regulations, ordinances (specific laws and regulations to be addressed by each jurisdiction);
2. Public Health Principles;
3. Food Microbiology; and

There are two options for demonstrating successful completion of these prerequisite (“Pre”) courses.

**OPTION 1:**
Successful completion of the FDA ORA U prerequisite courses/exercises/examinations identified as “Pre” in Appendix B-1
AND
training on the jurisdiction’s prevailing statutes, regulations, and/or ordinances.

**NOTE:** *The estimated contact time for completion of the FDA ORA U prerequisite (“Pre”) courses is 42 hours.*

**OPTION 2:**
Successful completion of courses deemed by the regulatory jurisdiction’s food program supervisor or training officer to be equivalent to the FDA ORA U prerequisite (“Pre”) courses,
AND
training on the jurisdiction’s prevailing statutes, regulations, and/or ordinances,
AND
successful passing of one of the four written examination options (described later in this Standard) for determining whether a FSIO has a basic level of food safety knowledge.
A course is deemed equivalent if it can be demonstrated that it covers at least 80% of the learning objectives of the comparable ORA U course AND verification of successful completion is provided. The learning objectives for each of the ORA U courses are listed on the following web site:

http://www.fda.gov/ora/training/orau/state/level_1_curriculum.htm

NOTE: While certificates issued by course sponsors are the ideal proof of attendance, other official documentation can serve as satisfactory verification of attendance. The key to a document’s acceptability is that someone with responsibility, such as a trainer/food program manager who has first-hand knowledge of employee attendance at the session, keeps the records according to an established protocol. An established protocol can include such items as:

- Training logs/records that are completed based on sign-in sheets; or
- Information validated from the certificate at the time-of-issuance; or
- A college transcript with a passing grade or other indication of successful completion of the course; or
- Automated attendance records, such as those currently kept by some professional associations and state agencies, or
- Other accurate verification of actual attendance.

Regulatory retail food inspection staff submitting documentation of courses equivalent to the FDA ORA U courses – OPTION 2 – must also demonstrate a basic level of food safety knowledge by successfully passing one examination from the four written examination categories specified herein.

1. The Certified Professional - Food Safety (CP-FS) examination offered by the National Environmental Health Association;

2. A state sponsored food safety examination that is based on the current version of the FDA Food Code (and supplement) and is developed using methods that are psychometrically valid and reliable;

3. A food manager certification examination provided by an ANSI/CFP accredited certification organization; or

4. A Registered Environmental Health Specialist or Registered Sanitarian examination offered by the National Environmental Health Association or a State Registration Board.

NOTE: Within the context of this Standard, the written examinations are part of a training process, NOT a standardization/certification process. The examinations listed are NOT to be considered equivalent to each other. They are to be considered as training tools and have been incorporated as part of the Standard because each instrument will provide a method of assessing whether a FSIO has attained a basic level of food safety knowledge. Any
jurisdiction has the option and latitude to mandate a particular examination based on the laws and rules of that jurisdiction.

Step 2: Initial Field Training and Experience

The regulatory staff conducting inspections of retail food establishments must conduct a minimum of 25 joint field inspections with a trainer or the jurisdiction’s designated staff member, who has successfully completed all training elements (Steps 1 – 3) required by this Standard. The 25 joint field inspections are to be comprised of both “demonstration” (trainer led) and “training” (trainee led) inspections and include a variety of retail food establishment types available within the jurisdiction.

Demonstration inspections are those in which the jurisdiction’s trainer and/or designated staff person takes the lead and the FSIO observes the inspection process. Training inspections are those in which the person being trained takes the lead and demonstrates competencies identified in the jurisdiction’s retail food program training plan. The jurisdiction’s trainer is responsible for determining the appropriate combination of demonstration and trainee-led inspections based on the candidate’s food safety knowledge and performance during the joint field training inspections.

The 25 joint field inspections must be conducted using a field training process and forms similar to ones presented in the CFP Field Training Manual included as Appendix B-2. The CFP Field Training Manual consists of a training plan and log, trainer’s worksheets, and procedures that may be incorporated into any jurisdiction’s retail food training program. It is a national model upon which jurisdictions can design basic field training and provides a method for FSIOs to demonstrate competencies needed to conduct independent inspections of retail food restaurant and institutional foodservice establishments.

Jurisdictions are not required to use the forms or worksheets provided in the CFP Field Training Manual. Equivalent forms or training process can be developed. To meet the intent of this Standard, documentation must be maintained that confirms FSIOs are trained on, and have demonstrated, the performance element competencies needed to conduct independent inspections of retail food and/or foodservice establishments.

NOTE: The CFP Field Training Manual is designed as a training process providing a structure for continuous feedback between the FSIO and trainer on specific knowledge, skills, and abilities that are important elements of effective retail food, restaurant, and institutional foodservice inspections.

- The CFP Field Training Manual is NOT intended to be used for certification or licensure purposes.
- The CFP Field Training Manual is NOT intended to be used for administrative purposes including but not limited to, job classifications, promotions, or disciplinary actions up to and including termination.

FSIOs must successfully complete a joint field training process, similar to that presented in the CFP Field Training Manual, prior to conducting independent inspections and re-
inspections of retail food establishments in risk categories 2, 3, and 4 as presented in Appendix B-3 (taken from Annex 5, Table 1 of the 2005 FDA Food Code). The jurisdiction’s trainer/food program manager can make a determination as to the FSIO’s readiness to conduct independent inspections of risk category 1 establishments as defined in Appendix B-3 at any time during the training process.

**NOTE:** The criterion for conducting a minimum of 25 joint field training inspections is intended for new employees or employees new to the food safety program. In order to accommodate an experienced FSIO, the supervisor/training officer can in lieu of the 25 joint field inspections:

- Include a signed statement or affidavit in the employee’s training file explaining the background or experience that justifies a waiver of this requirement; and
- The supervisor/training officer must observe experienced FSIOs conduct inspections to determine any areas in need of improvement. An individual corrective action plan should be developed outlining how any training deficiencies will be corrected and the date when correction will be achieved.

**Step 3: Independent Inspections and Completion of ALL Curriculum Elements**

**Within 18 months of hire or assignment to the regulatory retail food program,** each new Food Safety Inspection Officer must complete a minimum of 25 independent inspections of retail food, restaurant, and/or institutional foodservice establishments.

- If the jurisdiction’s establishment inventory contains a sufficient number of facilities, the FSIO must complete 25 independent inspections of food establishments in risk categories 3 and 4 as described in Appendix B-3.
- For those jurisdictions that have a limited number of establishments which would meet the risk category 3 and/or 4 criteria, the FSIO must complete 25 independent inspections in food establishments that are representative of the highest risk categories within their assigned geographic region or training area.

In addition, all coursework identified in Appendix B-1 for the following six curricula areas, must be completed within this same 18 month time frame.

1. Prevailing statutes, regulations, ordinances (all courses for this element are part of the prerequisite curriculum outlined in Step 1);
2. Public health principles (all courses for this element are part of the prerequisite curriculum outlined in Step 1);
3. Communication skills (Step 1);
4. Food microbiology (some of the courses for this element are part of the prerequisite curriculum outlined in Step 1);
5. Epidemiology; and
6. HACCP.
All courses for each of the curriculum areas must be successfully completed within 18 months of hire or assignment to the regulatory retail food program in order for FSIOs to be eligible for the Field Standardization Assessment.

**NOTE:** The estimated contact time for completion of the FDA ORA U “post” courses is 13 hours. The term “post” refers to those courses in Appendix B-1 that were not included as part of the prerequisite coursework. This includes all the courses in Appendix B-1 that do not have the designation “Pre” associated with them. All courses in Appendix B-1 must be successfully completed prior to conducting field standardizations.

As with the prerequisite inspection courses, the coursework pertaining to the above six curriculum areas can be successfully achieved by completing the ORA U courses/exercises/exams listed under each curriculum area OR by completing courses deemed by the regulatory jurisdiction’s food program supervisor or training officer to be equivalent to the comparable FDA ORA U courses.

A course is deemed equivalent if it can be demonstrated that it covers at least 80% of the learning objectives of the comparable ORA U course AND verification of successful completion can be provided. The learning objectives for each of the ORA U courses are listed on the following web site:

[http://www.fda.gov/ora/training/orau/state/level_1_curriculum.htm](http://www.fda.gov/ora/training/orau/state/level_1_curriculum.htm)

### Step 4: Food Safety Inspection Officer – Field Standardization

**Within 18 months of employment or assignment to the retail food program,** staff conducting inspections of retail food establishments must satisfactorily complete four joint inspections with a “training standard” using a process similar to the “FDA Standardization Procedures.” The standardization procedures shall determine the inspector’s ability to apply the knowledge and skills obtained from the training curriculum, and address the five following performance areas:

1. Risk-based inspections focusing on the factors that contribute to foodborne illness;
2. Good Retail Practices;
3. Application of HACCP;
4. Inspection equipment; and
5. Communication.

**NOTE:** The field standardization criteria described in Step 4 is intended to provide flexibility for a jurisdiction to use its own regulations or ordinances. In addition, the reference to using standardization procedures similar to the FDA Procedures for Standardization of Retail Food Inspection Training Officers is intended to allow the jurisdiction the option to develop its own written protocol to ensure that personnel are trained and prepared to competently conduct inspections. Any written
standardization protocol must include the five performance areas outlined above in Step 4.

It is highly beneficial to use the FDA Food Code, standardization forms, and procedures for standardization even when a jurisdiction has adopted modifications to the Food Code. Usually regulatory differences can be noted and discussed during the exercises, thereby enhancing the knowledge and understanding of the candidate. The scoring and assessment tools presented in the FDA standardization procedures can be used without modification regardless of the Food Code enforced in a jurisdiction. The scoring and assessment tools are, however, specifically tied to the standardization inspection form and other assessment forms that are a part of the FDA procedures for standardizations.

FDA’s standardization procedures are based on a minimum of 8 inspections; however, to meet Standard 2, a minimum of 4 standardization inspections must be conducted.

Jurisdictions that modify the limits of the standardization process by reducing the minimum number of inspections from 8 to 4 are cautioned that a redesign of the scoring assessment of the candidate’s performance on the field inspections is required. This sometimes proves to be a very difficult task. A jurisdiction must consider both the food safety expertise of its staff, as well as the availability of personnel skilled in statistical analysis before it decides to modify the minimum number of standardization inspections. The jurisdiction’s standardization procedures need to reflect a credible process and the scoring assessment should facilitate consistent evaluation of all candidates.

The five performance areas target the behavioral elements of an inspection. The behavioral elements of an inspection are defined as the manner, approach and focus which targets the most important public health risk factors, and communicates vital information about the inspection in a way that can be received, understood and acted upon by retail food management. The goal of standardization is to assess not only technical knowledge but also an inspector’s ability to apply his or her knowledge in a way that ensures the time and resources spent within a facility offer maximum benefit to the regulatory agency, industry, and the consuming public. Any customized standardization procedure must continue to meet these stated targets and goals.

Continuing standardization (re-standardization) shall be maintained by performing four joint inspections with the "training standard" every three years.

Should a jurisdiction fall short of having 90% of its retail food program inspection staff successfully complete the Program Standard #2 criteria within the 18 month time frame, a written protocol must be established to provide a remedy so that the Standard can be met. This protocol would include a corrective action plan outlining how the situation will be corrected and the date when the correction will be achieved.
Step 5: Continuing Education and Training

A FSIO must accumulate 20 contact hours of continuing education in food safety every 36 months after the initial training (18 months) is completed. Within the scope of this standard, the goal of continuing education and training is to enhance the FSIO’s knowledge, skills, and ability to perform retail food and foodservice inspections. The objective is to build upon the FSIO’s knowledge base. Repeated coursework should be avoided unless justification is provided to, and approved by, the food program manager and/or training officer.

Training on any changes in the regulatory agency’s prevailing statutes, regulations, and/or ordinances must be included as part of the continuing education (CE) hours within six months of the regulatory change. Documentation of the regulatory change date and date of training must be included as part of the individual’s training record.

The candidate qualifies for one contact hour of continuing education for each clock hour of participation in any of the following nine activities that are specifically related to food safety or food inspection work:

1. Attendance at FDA Regional seminars / technical conferences;
2. Professional symposiums / college courses;
3. Food-related training provided by government agencies (e.g., USDA, State, local);
4. Food safety related conferences and workshops; and
5. Distance learning opportunities that pertain to food safety, such as:
   a. WEB-based or online training courses (e.g., additional food safety courses offered though ORA U, industry associations, universities); and
   b. Satellite Broadcasts.

A maximum of ten (10) contact hours may be accrued from the following activities:
6. Delivering presentations at professional conferences;
7. Providing classroom and/or field training to newly hired FSIOs, or being a course instructor in food safety; or
8. Publishing an original article in a peer-reviewed professional or trade association journal/periodical.

Contact hours for a specified presentation, course, or training activity will be recognized only one time within a 3-year continuing education period.

NOTE: Time needed to prepare an original presentation, course, or article may be included as part of the continuing education hours. If the FSIO delivers a presentation or course that has been previously prepared, only the actual time of the presentation may be considered for continuing education credit.

A maximum of four (4) contact hours may be accrued for:
9. Reading technical publications related to food safety.
Documentation must accompany each activity submitted for continuing education (CE) credit. Examples of acceptable documentation include:

- certificates of completion indicating the course date(s) and number of hours attended or CE credits granted;
- transcripts from a college or university;
- a letter from the administrator of the continuing education program attended;
- a copy of the peer-reviewed article or presentation made at a professional conference; or
- documentation to verify technical publications related to food safety have been read including completion of self-assessment quizzes that accompany journal articles, written summaries of key points/findings presented in technical publications, and/or written book reports.

**NOTE:** The key to a document’s acceptability is that someone with responsibility, such as a training officer or supervisor, who has first-hand knowledge of an employee’s continuing education activities, maintains the training records according to an established protocol similar to that presented in Step 1 for assessing equivalent courses.

**OUTCOME**

The desired outcome of this Standard is a trained regulatory staff with the skills and knowledge necessary to conduct quality inspections.

**DOCUMENTATION**

The quality records needed for this standard include:

1. Certificates or proof of attendance from the successful completion of all the course elements identified in the Program Standard curriculum (Steps 1 and 3);
2. Documentation of field inspection reports for twenty-five each joint and independent inspections (Steps 2 and 3);
3. Certificates or other documentation of successful completion of a field training process similar to that presented in Appendix B-2;
4. Certificates or other records showing proof of satisfactory standardization (Step 4);
5. Contact hour certificates or other records for continuing education (Step 5);
6. Signed documentation from the regulatory jurisdiction’s food program supervisor or training officer that food inspection staff attended and successfully completed the training and education steps outlined in this Standard;
7. Date of hire records or assignment to the retail food program; and,
8. Summary record of employees’ compliance with the Standard.

The Standard 2 Program Self-Assessment and Verification Audit Form is designed to document the findings from the self-assessment and the verification audit process for Standard 2.
STANDARD NO. 3   INSPECTION PROGRAM BASED ON HACCP PRINCIPLES

This standard applies to the utilization of HACCP principles to control risk factors in a retail food inspection program.

REQUIREMENT SUMMARY

An inspection program that focuses on the status of risk factors, determines and documents compliance, and targets immediate- and long-term correction of out-of-control risk factors through active managerial control.

DESCRIPTION OF REQUIREMENT

Program management:
1. Implements the use of an inspection form that is designed for:
   a) The identification of risk factors and interventions.
   b) Documentation of the compliance status of each risk factor and intervention (i.e. a form with notations indicating IN compliance, OUT of compliance, Not Observed, or Not Applicable for risk factors)
   c) Documentation of all compliance and enforcement activities and
   d) Requires the selection of IN, OUT, NO, or NA for each risk factor.
2. Develops and uses a process that groups food establishments into at least three categories based on potential and inherent food safety risks.
3. Assigns the inspection frequency based on the risk categories to focus program resources on food operations with the greatest food safety risk.
4. Develops and implements a program policy that requires:
   a) On-site corrective actions* as appropriate to the type of violation.
   b) Discussion of long-term control** of risk factor options, and
   c) Follow-up activities.
5. Establishes and implements written polices addressing code variance requests related to risk factors and interventions.
6. Establishes written polices regarding the verification and validation of HACCP plans when a plan is required by the code.

OUTCOME

The desired outcome of this standard is a regulatory inspection system that uses HACCP principles to identify risk factors and to obtain immediate- and long-term corrective action for recurring risk factors.
**DOCUMENTATION**

The quality records needed for this standard include:

1. Inspection form that requires the selection of IN, OUT, NO, or NA,
2. Written process used for grouping establishments based on food safety risk and the inspection frequency assigned to each category,
3. Policy for on-site correction and follow-up activities,
4. Policy for addressing code variance requests related to risk factors and interventions,
5. Policy for verification and validation of HACCP plans required by code, and
6. Policy requiring the discussion of food safety control systems with management when out of control risk factors are recorded on subsequent inspections.

*Note: On-site corrective action as appropriate to the violation would include such things as:
  a. Destruction of foods that have experienced extreme temperature abuse,
  b. Embargo or destruction of foods from unapproved sources,
  c. Accelerated cooling of foods when cooling time limits can still be met,
  d. Reheating when small deviations from hot holding have occurred,
  e. Continued cooking when proper cooking temperatures have not been met.
  f. Initiated use of gloves, tongs, or utensils to prevent hand contact with ready-to-eat foods, or
  g. Required hand washing when potential contamination is observed.

**Note: Long-term control** of risk factors requires a commitment by managers of food establishments to develop effective monitoring and control measures or system changes to address those risk factors most often responsible for foodborne illness. Risk control plans, standard operating procedures, buyer specifications, menu modification, HACCP plans and equipment or facility modification may be discussed as options to achieve the long-term control of risk factors.
STANDARD NO. 4    UNIFORM INSPECTION PROGRAM

This standard 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.

REQUIREMENT SUMMARY

Program management has established a quality assurance program to ensure uniformity among regulatory staff in the interpretation and application of laws, regulations, policies, and procedures.

DESCRIPTION OF REQUIREMENT

1) Program Management implements an on-going quality assurance program that evaluates inspection uniformity to ensure inspection quality, inspection frequency and uniformity among the regulatory staff. The quality assurance program shall:

A. Be an on-going program.

B. 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 is noted on the inspection form) through observation and investigation;
   2. Completes an inspection report that is clear, legible, concise, and accurately records findings, observations and discussions with establishment management;
   3. Interprets and applies laws, regulations, policies and procedures correctly;
   4. Cites the proper local 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 reports and other documentation in a timely manner.

C. Describe the actions that will be implemented when the program analysis identifies deficiencies in quality or consistency in any program aspect listed in 1) B.
2) The quality assurance program must achieve an overall inspection program performance rating for each of the ten measured aspects [Items1-10] of at least 75% using the following self-assessment procedure and the appropriate Table in Supplement to Standard 4 (Appendix D).

An assessment review of each inspector’s work shall be made 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 establishments, during every self-assessment period.

OUTCOME

A quality assurance program exists that ensures uniform, high quality inspections.

DOCUMENTATION

The quality records needed for this standard include:

1. A written procedure that describes the jurisdiction’s quality assurance program that meets the criteria under the Description of Requirement section 1) B., including corrective actions for deficiencies, and
2. Documentation that the program achieves a 75 percent performance rating on each aspect using the self-assessment procedures described above and in Supplement to Standard 4 (Appendix D).
STANDARD NO. 5   FOODBORNE ILLNESS AND FOOD DEFENSE PREPAREDNESS AND RESPONSE

This standard applies to the surveillance, investigation, response, and subsequent review of alleged food-related incidents and emergencies, either unintentional or deliberate, which results in foodborne illness, food-related injury*, and outbreaks.

REQUIREMENT SUMMARY

The program has an established system to detect, collect, investigate and respond to complaints and emergencies that involve foodborne illness, food-related injury*, and intentional and unintentional food contamination.

DESCRIPTION OF REQUIREMENT

1. Investigative Procedures

   a. The program has written operating procedures for responding to and /or conducting investigations of foodborne illness and food-related injury*. The procedures clearly identify the roles, duties and responsibilities of program staff and how the program interacts with other relevant departments and agencies. The procedures may be contained in a single source document or in multiple documents.

   b. The program maintains contact lists for individuals, departments, and agencies that may be involved in the investigation of foodborne illness, food-related injury* or contamination of food.

   c. The program maintains a written operating procedure or a Memorandum of Understanding (MOU) with the appropriate epidemiological investigation program/department to conduct foodborne illness investigations and to report findings. The operating procedure or MOU clearly identifies the roles, duties and responsibilities of each party.

   d. The program maintains logs or databases for all complaints or referral reports from other sources alleging food-related illness, food-related injury* or intentional food contamination. The final disposition for each complaint is recorded in the log or database and is filed in or linked to the establishment record for retrieval purposes.

   e. Program procedures describe the disposition, action or follow-up and reporting required for each type of complaint or referral report.

   f. Program procedures require disposition, action or follow-up on each complaint or referral report alleging food-related illness or food-related injury* within 24 hours.

   g. The program has established procedures and guidance for collecting information on the suspect food’s preparation, storage or handling during on-site investigations of food-related illness, food-related injury*, or outbreak investigations.

   h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected.
i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a product that originated outside the agency’s jurisdiction or has been shipped interstate.

2. Reporting Procedures

a. Possible contributing factors to the food-related illness, food-related injury* or intentional food contamination are identified in each on-site investigation report.

b. The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreak*s with CDC.

3. Laboratory Support Documentation

a. The program has a letter of understanding, written procedures, contract or MOU acknowledging, that a laboratory(s) is willing and able to provide analytical support to the jurisdiction’s food program. The documentation describes the type of biological, chemical, radiological contaminants or other food adulterants that can be identified by the laboratory. The laboratory support available includes the ability to conduct environmental sample analysis, food sample analysis and clinical sample analysis.

b. The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food-related emergency exceeds the capability of the primary support lab(s) listed in paragraph 3.a. This list should also identify potential sources of laboratory support such as FDA, USDA, CDC, or environmental laboratories for specific analysis that cannot be performed by the jurisdiction’s primary laboratory(s).

4. Trace-back Procedures

a. Program management has an established procedure to address the trace-back of foods implicated in an illness, outbreak or intentional food contamination. The trace-back procedure provides for the coordinated involvement of all appropriate agencies and identifies a coordinator to guide the investigation. Trace-back reports are shared with all agencies involved and with CDC.

5. Recalls

a. Program management has an established procedure to address the recall of foods implicated in an illness, outbreak or intentional food contamination.

b. When the jurisdiction has the responsibility to request or monitor a product recall, written procedures equivalent to 21 CFR, Part 7 are followed.

c. Written policies and procedures exist for verifying the effectiveness of recall actions by firms (effectiveness checks) when requested by another agency.
6. Media Management

a. The program has a written policy or procedure that defines a protocol for providing information to the public regarding a foodborne illness outbreak or food safety emergency. The policy/procedure should address coordination and cooperation with other agencies involved in the investigation. A media person is designated in the protocol.

7. Data Review and Analysis

a. At least once per year, the program conducts a review of the data in the complaint log or database and the foodborne illness and food-related injury* investigations to identify trends and possible contributing factors that are most likely to cause foodborne illness or food-related injury*. These periodic reviews of foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention.

b. The review is conducted with prevention in mind and focuses on, but is not limited to, the following:

1) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* in a single establishment;
2) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Disease Outbreaks* in the same establishment type;
3) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* implicating the same food;
4) Foodborne Disease outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* associated with similar food preparation processes;
5) Number of confirmed foodborne disease outbreaks*;
6) Number of foodborne disease outbreaks* and suspect foodborne disease outbreaks*;
7) Contributing factors most often identified;
8) Number of complaints involving real and alleged threats of intentional food contamination; and
9) Number of complaints involving the same agent and any complaints involving unusual agents when agents are identified.

c. In the event that there have been no food-related illness or food-related injury* outbreak investigations conducted during the twelve months prior to the data review and analysis, program management will plan and conduct a mock foodborne illness investigation to test program readiness. The mock investigation should simulate response to an actual confirmed foodborne disease outbreak* and include on-site inspection, sample collection, and analysis. A mock investigation must be completed at least once per year when no foodborne disease outbreak* investigations occur.

OUTCOME

A food regulatory program has a systematic approach for the detection, investigation, response, documentation, and analysis of alleged food-related incidents that involve illness, injury, unintentional, or deliberate food contamination.
DOCUMENTATION

The quality records required to meet this standard include:

1. Logs or databases of alleged food-related illness and food-related injury* complaints maintained and current.
2. Collection forms specified in the operating procedures.
3. Investigation reports of alleged food-related illness, food-related injury*, or incidents. Reports are retrievable by implicated establishment name.
4. The written procedures, contracts or MOU’s with the supporting laboratories.
5. The procedure addressing the trace-back of food products implicated in an illness, outbreak, or contamination event.
6. 21 CFR, Part 7, or written procedures equivalent to 21 CFR, Part 7 for recalls.
7. Completed copies of the annual review and analysis (after 12 months of data).
8. Current written media policy/procedure and contact person.
9. The contact list for communicating with all relevant agencies.
10. Portions of any emergency response relevant to food safety and defense.

*Note: See the Standards Definitions for the meaning of these defined terms.
STANDARD NO. 6 COMPLIANCE AND ENFORCEMENT

This standard applies to all compliance and enforcement activities used by a jurisdiction to achieve compliance with regulations.

REQUIREMENT SUMMARY

Compliance and enforcement activities result in follow-up actions for out-of-control risk factors and timely correction of code violations

DESCRIPTION OF REQUIREMENT

Compliance and enforcement encompasses all voluntary and regulatory actions taken to achieve compliance with regulations. Voluntary corrective action includes, but is not limited to, such activities as on-site corrections at time of inspection, voluntary destruction of product, risk control plans and remedial training. Enforcement action includes, but is not limited to, such activities as warning letters, re-inspection, citations, administrative fines, permit suspension and hearings. Compliance and enforcement options may vary depending on state and local law.

The program must demonstrate credible follow-up for each violation noted during an inspection, with particular emphasis being placed on risk factors that most often contribute to foodborne illness and Food Code interventions intended to prevent foodborne illness. The resolution of out-of-compliance risk factors and/or food code interventions must be documented in each establishment record. The essential program elements required to meet this standard are:

1. A written step-by-step procedure that describes how compliance and enforcement tools are to be used to achieve compliance.
2. Inspection report form(s) that record and quantify the compliance status of risk factors and interventions (i.e., IN compliance, OUT of compliance, Not Observed, or Not Applicable).
3. Documentation on the establishment inspection report form or in the establishment file that compliance and/or enforcement action was taken to achieve compliance at least 80 percent of the time when out-of-control risk factors or interventions are recorded on a routine inspection measured using the procedures in Supplement to Standard 6, Appendix F.

OUTCOME

The desired outcome of this standard is an effective compliance and enforcement program that is implemented consistently to achieve compliance with regulatory requirements.
**DOCUMENTATION**

The quality records needed for this standard include:

2. Inspection form that meets the criteria.
3. Documentation that compliance and enforcement action was taken 80 percent of the time using the worksheet and procedures in Supplement to Standard 6, Appendix F, when out-of-control risk factors or code interventions are recorded on routine inspections.
4. A reference “Key” which identifies the major risk factors and Food Code interventions on the jurisdiction's inspection report form. [Note: A jurisdiction will not be penalized under Standard 6 for sections of the Food Code which have not yet been adopted].
STANDARD NO. 7  INDUSTRY AND COMMUNITY RELATIONS

This standard applies to industry and community outreach activities utilized by a regulatory program to solicit a broad spectrum input into a comprehensive regulatory food program, communicate sound public health food safety principles, and foster and recognize community initiatives focused on the reduction of foodborne disease risk factors.

REQUIREMENT SUMMARY

The jurisdiction documents participation in forums that foster communication and information exchange among the regulators, industry and consumer representatives.

The jurisdiction documents outreach activities that provide educational information on food safety.

DESCRIPTION OF REQUIREMENT

1. Industry and Consumer Interaction

   The jurisdiction sponsors or actively participates in meetings such as food safety task forces, advisory boards or advisory committees. These forums shall present information on food safety, food safety strategies and interventions to control risk factors. Offers of participation must be extended to industry and consumer representatives.

2. Educational Outreach

   Outreach encompasses industry and consumer groups as well as media and elected officials. Outreach efforts may include industry recognition programs, web sites, newsletters, FightBAC™ campaigns, food safety month activities, food worker training, school-based activities, customer surveys or other activities that increase awareness of the risk factors and control methods to prevent foodborne illness. Outreach activities may also include posting inspection information on a web site or in the press.

   Agency participation in at least one activity in each of the above categories annually is sufficient to meet this standard.

OUTCOME

The desired outcome of this standard is enhanced communication with industry and consumers through forums designed to solicit input to improve the food safety program. A further outcome is the reduction of risk factors through educational outreach and cooperative efforts with stakeholders.
DOCUMENTATION

Quality records needed for this standard reflect activities over the most recent three-year period and include:

1. Minutes, agendas or other records that forums were conducted,
2. For formal, recurring meetings, such documents as by-laws, charters, membership criteria and lists, frequency of meetings, roles, etc.,
3. Documentation of performed actions or activities designed with input from industry and consumers to improve the control of risk factors, or
4. Documentation of food safety educational efforts.

Statements of policies and procedures may suffice if activities are continuous, and documenting multiple incidents would be cumbersome, i.e., recognition provided to establishments with exemplary records or an on-going web site.
STANDARD NO. 8 PROGRAM SUPPORT AND RESOURCES

This standard applies to the program resources (budget, staff, equipment, etc.) necessary to support an inspection and surveillance system that is designed to reduce risk factors and other factors known to contribute to foodborne illness.

REQUIREMENT SUMMARY

The program provides funding, staff and equipment necessary to accomplish compliance with the Voluntary National Retail Food Regulatory Program Standards.

DESCRIPTION OF REQUIREMENT

The program budget provides the necessary resources to develop and maintain a retail food safety program that meets the following criteria:

1. Staffing Level

A staffing level of one full-time equivalent (FTE) devoted to food for every 280 – 320 inspections performed*. Inspections for purposes of this calculation include routine inspections, re-inspections, complaint investigations, outbreak investigations, compliance follow-up inspections, risk assessment reviews, process reviews, variance process reviews and other direct establishment contact time such as on-site training.

A process should exist for the regulated food establishments to be grouped into at least three categories based on food safety risk (See Standard 3). The number of inspections assigned per FTE should be adjusted within the 280 – 320 range depending upon the composition of low- to high–risk establishments in the assigned inventory. When an FTE is divided between program areas, the total number of food inspections planned for that FTE should be adjusted to compensate for the additional training time required to maintain competency in multiple program areas. An adjustment of planned inspections per FTE should also occur when food establishments are geographically dispersed due to increased travel time.

2. Inspection Equipment

Inspection equipment of each inspector to include head covers, thermocouples, flashlights, sanitization test kits, heat sensitive tapes or maximum registering thermometers, necessary forms and administrative materials. The following equipment must be available for use by inspectors when needed: computers, cameras, black lights, light meters, pH meters, foodborne illness investigation kits, sample collection kits, data loggers and cell phones.
3. Administrative Program Support

Equipment for administrative staff to include computers, software and/or items necessary to support the record keeping system utilized by the program. A system is in place to collect, analyze, retain and report pertinent information.

4. Trained Regulatory Staff

Training and training documentation for all regulatory staff to meet the level specified in Standard 2.

5. Inspection Program Based on HACCP Principles

Staff to meet all of the requirements in Standard 3, inspection based on HACCP principles.

6. Uniform Inspection Program

Administrative and supervisory staff to administer and monitor a uniform inspection program based on HACCP principles that meet Standards 3 and 4.

7. Foodborne Illness and Food Defense Preparedness & Response

Staff and resources to maintain a foodborne illness investigation and response system that meets Standard 5.

8. Compliance & Enforcement

A program that demonstrates follow-through on all compliance and enforcement actions initiated according to the written step-by-step procedures required in Standard 6.

9. Industry & Community Relations

An industry and consumer relations program as specified in Standard 7.

10. Program Assessment

Sufficient staff and resources to conduct regular program self-assessment and risk factor surveys as specified in Standard 9.
11. Accredited Laboratory

Funds to provide access to accredited laboratory resources in support of the program as specified under these nine Standards.

The essential program elements required to demonstrate compliance with this standard are:

A. Full-time equivalent (FTE) personnel to inspections accomplished ratio as described in section 1.
B. Inspection equipment assigned or available as described in section 2.
C. Equipment and/or supplies required for administering the program as described in Section 3.
D. A full and accurate completion of Appendix H for Standards 1-7 and Standard 9 whether or not those standards are met.

OUTCOME

The desired outcome of this standard is that resources are available to support a risk-based retail food safety program designed to reduce the risk factors known to contribute to foodborne illness.

DOCUMENTATION

The quality records needed for this standard include:

1. Documentation of FTE to inspections ratio,
2. Inventory of assigned and available inspection equipment,
3. Documentation and demonstration of records system and adequacy of support,
4. The completed Appendix H

*NOTE: An average workload figure of 150 establishments per FTE with two inspections per year was originally recommended in the 1976 Food Service Sanitation Manual, the standard originating from a book entitled, “Administration of Community Health Services.” Annex 4 of the Code since 1993 has included a recommendation that 8 to 10 hours be allocated for each establishment per year to include all the activities reflected here in the definition of an inspection. The range of 280 – 320 broadly defined inspections per FTE is consistent with these previous recommendations. A measure of resources defined as inspections per FTE rather than establishments per FTE allows for the same unit of measure to be used for any jurisdiction regardless of the frequency of routine inspections conducted among the various priority categories.
STANDARD NO. 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

1. For listing on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure:
   
   A. That the program manager conducts an initial self-assessment within 12 months of the date of enrollment in the National Registry and every 36 months thereafter; and,
   
   B. That a verification audit is conducted within 36 months of the initial self-assessment. Subsequent verification audits are conducted every 36 months thereafter.

2. For achievement of Standard 9, a jurisdiction must assure:
   
   A. That a Risk Factor Study (Survey) and report on the occurrence of foodborne illness risk factors and the use of Food Code interventions is completed within the 36-month period between the self-assessment and the verification audit; and
   
   B. A Risk Factor Study (Survey) on the occurrence of foodborne illness risk factors and use of Food Code interventions is conducted at least once every five years thereafter to measure trends specific to the occurrence of the risk factors and use of Food Code interventions.


DESCRIPTION OF REQUIREMENT

For Listing on the FDA Roll of Participating Jurisdictions, a jurisdiction must assure that:

1. Self-Assessment

   The program manager, or a designated representative, conducts an initial self-assessment of the retail food safety program within 12 months of the date of enrollment in the National Registry and every 36 months thereafter. The self-assessment will determine:

   A. The compliance status with each of the National Standards by completing the Appendix documents (hereafter referred to as the worksheets) or documents containing equivalent summary information for each Standard, and
B. 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 are incomplete or provide inadequate information upon which to make a determination or to enable a verification audit, that standard is not met.

### 2. Verification Audit

The first *verification audit* is conducted within 36 months the initial *self-assessment*. An individual as defined in the definitions shall complete the verification audit. Subsequent verification audits are conducted every 36 months thereafter. Verification audits confirm and report on the accuracy of the *self-assessment* and the Risk Factor Study (Survey) reports. During the *verification audit*, the auditor will:

A. Review the *quality records* and confirm that the *self-assessment* accurately reflects the current program compliance status in each of the program elements, and

B. Confirm that the Risk Factor Study (Survey) collection procedures and tools similar to Appendix J have been used and that the conclusions are supported by the data.

### 3. Achievement of Standard 9

A jurisdiction must assure that a Risk Factor Study (Survey) and report on the occurrence of foodborne illness risk factors and the use of *Food Code* interventions is completed within the 36-month period between the self-assessment and the verification audit. A Risk Factor Study (Survey) 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.

The Risk Factor Study (Survey) information is updated at least once in every 5 years to measure trends specific to the occurrence of the risk factors and *Food Code* interventions. The subsequent Risk Factor Studies (Surveys) and reports will determine whether there has been a net change in the occurrence of the risk factors and use of *Food Code* interventions.

A data collection instrument similar to the FDA model form referenced in 2.B., 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 Risk Factor Study (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 study (survey) or with data from other jurisdictions.

4. Reporting

The FDA National Registry Report (Appendix I) will be completed and submitted to the appropriate FDA Regional office within 30 days following completion of the self-assessment, initial Risk Factor Study (Survey) report on the occurrence of foodborne illness risk factors and Food Code interventions, verification audits, and/or Risk Factor Study (Survey) updates. The FDA National Registry listing will be updated using data contained in this report. A current Release and Permission to Publish Form must accompany each FDA National Registry Report.

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. Risk Factor Study (Survey) reports on the occurrence of risk factors and Food Code interventions,
3. Verification audit reports,
4. FDA National Registry Report, and
5. Affidavit of Permission to Publish.
APPENDIX A - SUPPLEMENT TO STANDARD 1 – REGULATORY FOUNDATION

See instructions at end of each Table.

PART I

Table A-1 Major Interventions and Risk Factors

<table>
<thead>
<tr>
<th>Major Interventions/Risk Factor</th>
<th>Section 1. Demonstration of Knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Section</td>
<td></td>
</tr>
<tr>
<td>2-101.11</td>
<td>Assignment</td>
</tr>
<tr>
<td>2-102.11</td>
<td>Demonstration</td>
</tr>
<tr>
<td>2-103.11</td>
<td>Person in Charge</td>
</tr>
</tbody>
</table>

| Section 2. Employee Health       |                                       |
| Code Section                     |                                       |
| 2-201.11                         | Responsibility of PIC to Require Reporting by Food Employees/Applicants |
| 2-201.12                         | Exclusions and Restrictions           |
| 2-201.14                         | Responsibility of a Food Employee or an Applicant to Report to the PIC |
| 2-201.15                         | Reporting by the Person in Charge     |

| Section 3. Consumer Advisory     |                                       |
| Code Section                     |                                       |
| 3-603.11                         | Consumer Advisory (Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens) |

<p>| Section 4. Approved Source       |                                       |
| Code Section                     |                                       |
| 3-201.11                         | All Food from regulated food processing plants / no home prepared or canned foods |
| 3-201.12                         | Compliance with Food Law              |
| 3-201.13                         | Food in a Hermetically Sealed Container |
| 3-201.14                         | Fluid Milk and Milk Products          |
| 3-201.15                         | Shell Eggs                            |
| 3-201.16                         | Eggs and Milk Products, Pasteurized   |
| 5-101.13                         | Bottled Drinking Water                |
| Code Section                     | All shellfish from NSSP listed sources / no recreationally caught shellfish received or sold |
| 3-201.14                         | Fish                                  |
| 3-201.15                         | Molluscan Shellfish                   |
| Code Section                     | Game and wild mushrooms approved by regulatory authority |
| 3-201.16                         | Wild Mushrooms                        |
| 3-201.17                         | Game Animals                          |
| Code Section                     | Received at proper temperatures / protected from contamination during transport and receiving / safe and unadulterated food |
| 3-202.11                         | Temperature                           |
| 3-202.15                         | Package Integrity                     |
| 3-101.11                         | Safe, Unadulterated, and Honestly Presented |</p>
<table>
<thead>
<tr>
<th>Code Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-202.18</td>
<td>Shellstock Identification</td>
</tr>
<tr>
<td>3-203.12</td>
<td>Shellstock, Maintaining Identification</td>
</tr>
<tr>
<td>3-402.11</td>
<td>Parasite Destruction</td>
</tr>
<tr>
<td>3-402.12</td>
<td>Records, Creation, and Retention</td>
</tr>
<tr>
<td>3-502.12</td>
<td>Variance Requirement</td>
</tr>
</tbody>
</table>

**Section 5. Time/Temperature**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-401.11</td>
<td>Cooking; Raw animal Foods</td>
</tr>
<tr>
<td>3-401.12</td>
<td>Microwave Cooking</td>
</tr>
<tr>
<td>3-403.11</td>
<td>Reheating for Hot Holding</td>
</tr>
<tr>
<td>3-501.14</td>
<td>Cooling*</td>
</tr>
<tr>
<td>3-501.16</td>
<td>Potentially Hazardous Food, Hot and Cold Holding</td>
</tr>
<tr>
<td>3-501.17</td>
<td>Ready-to-Eat, Potentially Hazardous Food, Date Marking</td>
</tr>
<tr>
<td>3-501.18</td>
<td>Ready-to-Eat, Potentially Hazardous Food, Disposition</td>
</tr>
<tr>
<td>3-501.19</td>
<td>Time as a Public Health Control*</td>
</tr>
</tbody>
</table>

**Section 6. Protection from Contamination**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-302.11</td>
<td>Packaged/Unpackaged Food - Separation, Packaging, and Segregation</td>
</tr>
<tr>
<td>3-304.11</td>
<td>Food contact with Equipment and Utensils</td>
</tr>
<tr>
<td>3-306.14</td>
<td>Returned Food and Reservice of Food</td>
</tr>
<tr>
<td>3-701.11</td>
<td>Discarding/ Reconditioning Unsafe, Adulterated, or Contaminated Food</td>
</tr>
<tr>
<td>4-501.111</td>
<td>Manual Warewashing Equipment, Hot Water Sanitization Temperatures</td>
</tr>
<tr>
<td>4-501.112</td>
<td>Mechanical Warewashing Equipment, Hot Water Sanitization Temperatures</td>
</tr>
<tr>
<td>4-501.113</td>
<td>Mechanical Warewashing Equipment, Sanitization Pressure</td>
</tr>
<tr>
<td>4-501.114</td>
<td>Chemical Sanitization - Temperature, pH, Concentration, and Hardness</td>
</tr>
<tr>
<td>4-501.115</td>
<td>Manual Warewashing Equipment, Chemical Sanitization Using Detergent Sanitizers</td>
</tr>
<tr>
<td>4-601.11</td>
<td>Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils?</td>
</tr>
<tr>
<td>4-602.11*</td>
<td>Equipment Food-Contact Surfaces and Utensils</td>
</tr>
<tr>
<td>4-602.12</td>
<td>Cooking and Baking Equipment</td>
</tr>
<tr>
<td>4-702.11*</td>
<td>Before Use After Cleaning</td>
</tr>
<tr>
<td>4-703.11*</td>
<td>Hot Water and Chemical</td>
</tr>
</tbody>
</table>

**Section 7. Control of Hands as a Vehicle of Contamination**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-301.11</td>
<td>Clean Condition</td>
</tr>
<tr>
<td>2-301.12</td>
<td>Cleaning Procedure</td>
</tr>
<tr>
<td>2-301.14</td>
<td>When to Wash</td>
</tr>
<tr>
<td>2-301.15</td>
<td>Where to Wash</td>
</tr>
<tr>
<td>2-301.16</td>
<td>Hand Sanitizers</td>
</tr>
<tr>
<td>3-301.11</td>
<td>Preventing Contamination from Hands</td>
</tr>
<tr>
<td>5-203.11</td>
<td>Handwashing Facilities (Numbers/Capacities)</td>
</tr>
<tr>
<td>Code Section</td>
<td>Good Hygienic Practices</td>
</tr>
<tr>
<td>--------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>5-204.11</td>
<td>Handwashing Facilities (Location/Placement)</td>
</tr>
<tr>
<td>5-205.11</td>
<td>Using a Handwashing Facility</td>
</tr>
<tr>
<td>6-501.18</td>
<td>Maintaining and Using Handwashing Facilities</td>
</tr>
<tr>
<td>6-301.11</td>
<td>Handwashing Cleanser, Availability</td>
</tr>
<tr>
<td>6-301.12</td>
<td>Hand Drying Provision</td>
</tr>
<tr>
<td>6-301.13</td>
<td>Handwashing Aids and Devices, Use Restrictions</td>
</tr>
</tbody>
</table>

**Section 8. Good Hygienic Practices**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Chemicals and Materials Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-401.11</td>
<td>Eating, Drinking, or Using Tobacco</td>
</tr>
<tr>
<td>2-401.12</td>
<td>Discharges from the Eyes, Nose, and Mouth</td>
</tr>
<tr>
<td>2-301.12</td>
<td>Cleaning Procedure</td>
</tr>
</tbody>
</table>

**Section 9. Chemical**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Chemicals and Materials Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-202.12</td>
<td>Additives</td>
</tr>
<tr>
<td>3-302.14</td>
<td>Protection from Unapproved Additives</td>
</tr>
<tr>
<td>7-207.11</td>
<td>Restriction and Storage</td>
</tr>
<tr>
<td>7-207.12</td>
<td>Refrigerated Medicines, Storage</td>
</tr>
<tr>
<td>7-208.11</td>
<td>Storage (First Aid Supplies)</td>
</tr>
<tr>
<td>7-209.11</td>
<td>Storage</td>
</tr>
<tr>
<td>7-101.11</td>
<td>Identifying Information, Prominence</td>
</tr>
<tr>
<td>7-202.11</td>
<td>Restriction</td>
</tr>
<tr>
<td>7-202.12</td>
<td>Conditions of Use</td>
</tr>
<tr>
<td>7-203.11</td>
<td>Poisonous or Toxic Material Containers</td>
</tr>
<tr>
<td>7-204.11</td>
<td>Sanitizers, Criteria</td>
</tr>
<tr>
<td>7-204.12</td>
<td>Chemicals for Washing Fruits and Vegetables, Criteria</td>
</tr>
<tr>
<td>7-204.13</td>
<td>Boiler Water Additives, Criteria</td>
</tr>
<tr>
<td>7-204.14</td>
<td>Drying Agents, Criteria</td>
</tr>
<tr>
<td>7-205.11</td>
<td>Incidental Food Contact, Criteria</td>
</tr>
<tr>
<td>7-206.11</td>
<td>Restricted Use Pesticides, Criteria</td>
</tr>
<tr>
<td>7-206.12</td>
<td>Rodent Bait Stations</td>
</tr>
<tr>
<td>7-206.13</td>
<td>Tracking Powders, Pest Control and Monitoring</td>
</tr>
<tr>
<td>7-301.11</td>
<td>Separation</td>
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</tbody>
</table>

**Section 10. Conformance with Approved Procedures**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Conformance with Approved Procedures (Variance, HACCP plans)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8-103.12</td>
<td>Conformance with Approved Procedures (Variance, HACCP plans)</td>
</tr>
</tbody>
</table>

**Section 11. Highly Susceptible Populations**

<table>
<thead>
<tr>
<th>Code Section</th>
<th>Highly Susceptible Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-801.11</td>
<td>Pasteurized Foods, Prohibited Reservice, and Prohibited Food</td>
</tr>
</tbody>
</table>

******* End of Table A-1. *******
**Instructions for Table A-1**

Evaluate your jurisdiction's code, regulation or ordinance against each *Food Code* section grouped by interventions and risk factors listed in Table A-1 above. To obtain credit for the intervention/risk factor, each of the code sections must be checked in the block of the right hand column. A check mark indicates that your code/regulation contains language at least as stringent as the main requirements in the corresponding *FDA Food Code* section. For example, under the section "Good Hygienic Practices," each of the 3 items must have a check in the right-hand column indicating that your code/regulation meets the intent of all three *Food Code* sections.

**Note:** If your code requirement is as stringent or more stringent than the *Food Code* requirement, you receive credit for that section. For example, if your code/regulation requires the PERSON IN CHARGE to demonstrate knowledge of the Code by being a certified FOOD protection manager who has shown proficiency through passing a test that is part of an ACCREDITED PROGRAM but does not provide other options for demonstration of knowledge, consider this as meeting 2-102.11. You would then place a check mark in the right-hand column adjacent to 2-102.11.
### Table A-2 Regulatory Foundation Summary – Interventions and Risk Factors

<table>
<thead>
<tr>
<th>Description</th>
<th>PASS/FAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Demonstration of Knowledge</td>
<td></td>
</tr>
<tr>
<td>2 Employee Health</td>
<td></td>
</tr>
<tr>
<td>3 Consumer Advisory</td>
<td></td>
</tr>
<tr>
<td>4 Approved Sources</td>
<td></td>
</tr>
<tr>
<td>5 Time/Temperature</td>
<td></td>
</tr>
<tr>
<td>6 Protection from Contamination</td>
<td></td>
</tr>
<tr>
<td>7 Control of Hands as a Vehicle of Contamination</td>
<td></td>
</tr>
<tr>
<td>8 Good Hygienic Practices</td>
<td></td>
</tr>
<tr>
<td>9 Chemical</td>
<td></td>
</tr>
<tr>
<td>10 Conformance with Approved Procedures</td>
<td></td>
</tr>
<tr>
<td>11 Highly Susceptible Populations</td>
<td></td>
</tr>
</tbody>
</table>

**Assessment of ___________________________**

( regulatory agency)

**Conformance with Interventions / Risk Factors**

<table>
<thead>
<tr>
<th>Overall Rating</th>
<th>PASS</th>
<th>FAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☑</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Instructions for Table A-2**

1. Use the information from Table A-1 to complete this table. Determine a PASS or FAIL rating for each of the eleven (11) Interventions/Risk Factors by reviewing the check marks on Table A-1. If all of the Code sections listed under an Intervention/Risk Factor have a check mark in the right-hand column on Table A-1, give yourself a PASS rating for that item on Table A-2.

   If any of the Code section provisions are missing, as indicated by a blank in the right-hand column of Table A-1, indicate FAIL for that Intervention/Risk Factor. For example: Under “Approved Source,” if your code/regulation does not address mushroom species picked in the wild, the right-hand column adjacent to 3-201.16 on Table A-1 would be blank. Therefore, the “Approved Source” Intervention/Risk Factor on Table A-2 would be marked as FAIL.

2. For initial participation and listing purposes, if you have achieved a PASS rating on at least 9 of the 11 items on Table A-2, you receive an overall PASS rating for the Interventions/Risk Factors. By the second scheduled audit, you must achieve a PASS rating on 11 of the 11 items in order to receive an overall PASS rating for the Interventions/Risk Factors portion of Standard 1.
### PART II
**Table A-3 Regulatory Foundation – Good Retail Practices**

#### Section 12. Personnel

<table>
<thead>
<tr>
<th>FOOD CODE CHAPTER</th>
<th>CORRESPONDING CODE SECTION, RULE, ETC.</th>
<th>YES, FULL INTENT IS MET.</th>
<th>PARTIAL COMPLIANCE. LIST WHAT IS NOT COVERED. USE ADDITIONAL SHEETS FOR EXPLANATIONS/COMMENTS.</th>
<th>NO, COMPLIANCE IS NOT MET WITH THIS ITEM. INDICATE THE SITUATION.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-302.11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-303.11</td>
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<td>2-402.11</td>
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#### Section 13. Food & Food Protection

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### Section 15. Protection from Contamination

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### Section 16. Facilities / Methods to Control Product Temperature

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### Section 18. Dispensing of Food / Utensils Properly Stored

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### Food Equipment

#### Section 19. Thermometers Provided and Conspicuous

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#### Section 20. Food and Nonfood Contact Surfaces: Designed, Constructed, Maintained, Installed, Located, Operated, Cleanable

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### Section 21. Warewashing Facility: Designed, Constructed, Installed, Located, Operated, Cleanable, Used

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### Section 22. Wiping Cloths, Linens, Napkins, Gloves, Sponges: Properly Used, Stored

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### Section 23. Storage, Handling of Clean Equipment, Utensils

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## Section 24. Single-Service / Single-Use Articles: Storage, Dispensing, Use, No Reuse

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## Water

### Section 25. Safe Water Source, Hot and Cold Under Pressure, Adequate Quantity

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### Section 26. Plumbing: Installed, Maintained

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### Section 27. Cross Connection, Back Siphonage, Backflow Prevention

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### Toilet Facilities

### Section 28. Number, Convenient, Accessible, Designed, Installed

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### Section 29. Toilet Rooms Enclosed, Self-closing Doors; Fixtures, Good Repair, Clean, Proper Waste Receptacles

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### Sewage

### Section 30. Sewage and Waste Water Disposal

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### Section 33. Lighting, Ventilation, Dressing Rooms / Designated Areas Maintained

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### Section 34. Premises Maintained Free of Litter, Unnecessary Articles, Cleaning and Maintenance Equipment Properly Stored

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### Section 35. Complete Separation from Living / Sleeping Quarters; Laundry

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### Section 36. Presence of Insects / Rodents Minimized, Outer Openings Protected, Animals As Allowed

<table>
<thead>
<tr>
<th>FOOD CODE CHAPTER</th>
<th>CORRESPONDING CODE SECTION , RULE, ETC.</th>
<th>YES, FULL INTENT IS MET.</th>
<th>PARTIAL COMPLIANCE. LIST WHAT IS NOT COVERED. USE ADDITIONAL SHEETS FOR EXPLANATIONS/COMMENTS.</th>
<th>NO, COMPLIANCE IS NOT MET WITH THIS ITEM. INDICATE THE SITUATION.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-403.11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-202.13</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-202.15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-202.16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-501.111</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-501.112</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-501.115</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section 37. Variance for Smoking for Preservation, Curing, Brewing Alcoholic Beverages, Using Additives as Preservatives, or Using Reduced Oxygen to Package Food

<table>
<thead>
<tr>
<th>FOOD CODE CHAPTER</th>
<th>CORRESPONDING CODE SECTION, RULE, ETC.</th>
<th>YES, FULL INTENT IS MET.</th>
<th>PARTIAL COMPLIANCE. LIST WHAT IS NOT COVERED. USE ADDITIONAL SHEETS FOR EXPLANATIONS/COMMENTS.</th>
<th>NO, COMPLIANCE IS NOT MET WITH THIS ITEM. INDICATE THE SITUATION.</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-502.11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Instructions for Table A-3**

To complete Table A-3, do the following: Evaluate your jurisdiction's code or ordinance against each *Food Code* section grouped by topics under the major section headings numbered 12 through 37 above. If your code/regulation has language meeting the full intent of the corresponding model *Food Code* section, place a check mark in column 3. Columns 4 and 5 are intended to serve as an analytical tool to help you identify gaps in your current code/regulation and to plan for future revisions.

Starting with Section Heading 12 entitled Personnel, count the total number of check marks in column 3 under this heading and transfer this number to column 2 of Table A-4. Do this for each of the numbered section headings until all the information is transferred to Table A-4.
### Table A-4 Regulatory Foundation Summary – Good Retail Practices

<table>
<thead>
<tr>
<th>Section Number</th>
<th>Number Identified as &quot;Yes&quot; (column 3 - of Table A-3 worksheet)</th>
<th>Maximum No. of &quot;Yes&quot; possible</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>4</td>
<td></td>
<td>Personnel</td>
</tr>
<tr>
<td>13</td>
<td>12</td>
<td></td>
<td>Food &amp; Food Protection</td>
</tr>
<tr>
<td>14</td>
<td>1</td>
<td></td>
<td>Plant Food Cooking for Hot Holding</td>
</tr>
<tr>
<td>15</td>
<td>11</td>
<td></td>
<td>Protection from Contamination</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td></td>
<td>Facilities/Methods to Control Product Temperature</td>
</tr>
<tr>
<td>17</td>
<td>2</td>
<td></td>
<td>PHF Properly Thawed</td>
</tr>
<tr>
<td>18</td>
<td>3</td>
<td></td>
<td>Dispensing Food/Utensils Properly Stored</td>
</tr>
<tr>
<td>19</td>
<td>4</td>
<td></td>
<td>Food Equipment</td>
</tr>
<tr>
<td>20</td>
<td>45</td>
<td></td>
<td>Food and Non-food Contact Surfaces</td>
</tr>
<tr>
<td>21</td>
<td>26</td>
<td></td>
<td>Warewashing Facilities: Designed, etc.</td>
</tr>
<tr>
<td>22</td>
<td>10</td>
<td></td>
<td>Wiping cloths, Linens, Napkins, Gloves/Used</td>
</tr>
<tr>
<td>23</td>
<td>6</td>
<td></td>
<td>Storage, Handling of Clean Equip / Utensils</td>
</tr>
<tr>
<td>24</td>
<td>3</td>
<td></td>
<td>Single-Service/Single-Use Articles</td>
</tr>
<tr>
<td>25</td>
<td>9</td>
<td></td>
<td>Safe Water Source, Hot / Cold Under Pressure</td>
</tr>
<tr>
<td>26</td>
<td>24</td>
<td></td>
<td>Plumbing: Installed, Maintained</td>
</tr>
<tr>
<td>27</td>
<td>5</td>
<td></td>
<td>Cross Connection, Back Siphonage, Backflow Pre</td>
</tr>
<tr>
<td>28</td>
<td>2</td>
<td></td>
<td>Toilet Facilities: Number, convenient, Accessible</td>
</tr>
<tr>
<td>29</td>
<td>4</td>
<td></td>
<td>Enclosed, Self-closing Doors; Fixtures, Good repair</td>
</tr>
<tr>
<td>30</td>
<td>8</td>
<td></td>
<td>Sewage and Waste Water Disposal</td>
</tr>
<tr>
<td>31</td>
<td>19</td>
<td></td>
<td>Garbage and Refuse Disposal: covered, number</td>
</tr>
<tr>
<td>32</td>
<td>16</td>
<td></td>
<td>Floors, Walls, Ceilings; Designed, Constructed</td>
</tr>
<tr>
<td>33</td>
<td>11</td>
<td></td>
<td>Lighting, Ventilation, Dressing Rooms</td>
</tr>
<tr>
<td>34</td>
<td>5</td>
<td></td>
<td>Premises Maintained, Free of Litter, etc.</td>
</tr>
<tr>
<td>35</td>
<td>5</td>
<td></td>
<td>Complete Separation from Living/Sleeping Quarters</td>
</tr>
<tr>
<td>36</td>
<td>7</td>
<td></td>
<td>Presence of Insects / Rodents Minimized</td>
</tr>
<tr>
<td>37</td>
<td>1</td>
<td></td>
<td>Variances</td>
</tr>
<tr>
<td><strong>Total of col. 2</strong></td>
<td><strong>244</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\[
\frac{\text{Total}}{244} \times 100\% = \text{________\%}
\]
**Instructions for Table A-4**

1. Starting with Section Heading 12 entitled Personnel, count the total number of check marks in column 3 under this heading and transfer this number to column 2 of Table A-4. Do this for each of the numbered section headings until all the information is transferred to Table A-4.

2. Total the numbers in column 2 of Table A-4 and record this number in the blank provided for the total in the bottom section of Table A-4.

3. Divide this number by 244 and multiply by 100 to determine the percentage of the Good Retail Practices provisions contained in your code/regulation. (_______ %)

A percentage equal to or greater than 95% is considered acceptable for meeting the Regulatory Foundation requirements for Sections 12 through 37.
### Compliance and Enforcement

#### Food Code Chapter 8

<table>
<thead>
<tr>
<th>Description of Compliance or Enforcement Action</th>
<th>Food Code Section</th>
<th>Your Corresponding Statute, Code, Regulation or Ordinance section</th>
<th>Full intent of the main provisions of the Food Code sections are met (&quot;Yes&quot; / &quot;No&quot;)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hold orders, embargo, and Destruction of food</td>
<td>8-801.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-803.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-803.30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Permit / License required ; Right to deny</td>
<td>8-301.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-304.20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Plan Review / Pre-operational inspection</td>
<td>8-201.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Inspection authority / right to access</td>
<td>8-402.20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Restriction / Exclusion of Employees; Information Authority</td>
<td>8-501.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-501.20</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-501.30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Authority to Require HACCP plans</td>
<td>8-201.13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Granting of Variances</td>
<td>8-103.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-103.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-103.12</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-103.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Timely Correction of Critical Violations</td>
<td>8-405.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-405.20</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-406.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Imminent Health Hazard (Summary Suspension)</td>
<td>8-404.12</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-804.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. License suspension / revocation</td>
<td>8-805.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8-805.20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Institution of Proceedings</td>
<td>8-810.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Legal Remedies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Criminal Proceedings</td>
<td>8-811.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Petitions for Injunction</td>
<td>8-812.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Civil Penalties provided</td>
<td>8-813.10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Instructions for Table A-5

1. For each *Food Code* section listed in column 2, review your code, regulation, rule, or statute for corresponding language.
2. List your corresponding code/regulation section in column 3.
3. Evaluate your code/regulation to determine whether it meets the full intent of the main requirements of the FDA *Food Code* section. If it does, mark “yes” in the last column. If it does not meet the full intent, mark “no” in the last column.
4. Meeting the Standard #1 criteria for the “Compliance and Enforcement” component requires a “Yes” for all *Food Code* Sections listed in Items 1 through 11. For example, to get credit for 2. Permit/License required, both code sections must be marked “yes.” For Item 12 pertaining to legal remedies, the jurisdiction needs to demonstrate a corresponding regulatory requirement for only one of the sections pertaining to criminal, injunctive, or civil penalties.
### Appendix A

<table>
<thead>
<tr>
<th>Criteria</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Your jurisdiction's code, ordinance, rule, or regulation meets the requirement of Standard 1, Regulatory Foundation, for the Major Interventions / Risk Factors.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Your jurisdiction's code, ordinance, rule, or regulation meets the Good Retail Practices requirements of Standard 1, Regulatory Foundation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Your jurisdiction's code, ordinance, rule, regulation or statute meets the Compliance and Enforcement requirements of Standard 1, Regulatory Foundation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Use the information in Tables A-1 through A-5 to determine the correct answer each of the above questions. A “yes” affirmation to each statement is required to meet Standard 1.
APPENDIX B - Supplement to Standard 2 - Trained Regulatory Staff

STANDARD 2
TRAINED REGULATORY STAFF
Program Standard 2

APPENDIX B-1: CURRICULUM FOR RETAIL FOOD SAFETY INSPECTION OFFICERS
For state, local & tribal regulators to register on-line for free access to web courses, go to:
http://www.fda.gov/ora/training/

Prerequisite (“Pre”) curriculum courses
(to be completed during the 25 joint inspection period AND prior to conducting any independent inspections)

PUBLIC HEALTH PRINCIPLES
Public Health Principles (90) FDA36

MICROBIOLOGY
Food Microbiological Control (series):
1. Overview of Microbiology (60) MIC01
2A. Gram-Negative Rods (60) MIC02
2B. Gram-Positive Rods & Cocci (90) MIC03
3. Foodborne Viruses (60) MIC04
4. Foodborne Parasites (90) MIC05
Mid-Series Exam (30) MIC16
5. Controlling Growth Factors (90) MIC06
6. Control by Refrigeration & Freezing (60) MIC07
7A. Control by Thermal Processing (90) MIC08
7B. Control by Pasteurization (90) MIC09
10. Aseptic Sampling (90) MIC13
12. Cleaning & Sanitizing (90) MIC15

PREVAILING STATUTES, REGULATIONS, ORDINANCES
Basic Food Law for State Regulators (60) FDA35
Basics of Inspection:
Beginning an Inspection (90) FDA38
Issues & Observations (90) FDA39
An Introduction to Food Security Awareness (60) FD251 (ORA U internet site)

NOTE: Specific state/local laws & regulations to be addressed by each jurisdiction

COMMUNICATION SKILLS
Communication Skills for Regulators

Curriculum (“Post”) courses
(to be completed anytime prior to Food Code Standardization AND within 18 months of hire or assignment to the regulatory retail food program)

MICROBIOLOGY
Food Microbiological Control (series):
7C. Control by Retorting (90) MIC10
8. Technology-Based Food Processes (120) MIC11
9. Natural Toxins (90) MIC12

HACCP
Basics of HACCP (series):
1. Overview of HACCP (60) FDA16
2. Prerequisite Programs & Preliminary Steps (60) FDA17
3. The Principles (60) FDA18

EPIDEMIOLOGY
Foodborne Illness Investigations (series):
1. Collecting Surveillance Data (90) FI01
2. Beginning the Investigation (90) FI02
3. Expanding the Investigation (90) FI03
4. Conducting a Food Hazard Review (90) FI04
5. Epidemiological Statistics (90) FI05
6. Final Report (30) FI06

() Average time in minutes required to take the course, 60 minutes equals 0.1 CEU, 90-120 minutes equals 0.2 CEUs
Estimated total hours for “Pre” courses are 42 hours.
Estimated total hours for “Post” courses are 13 hours.
Estimated total hours for completion of all Program Standard 2 coursework are 55 hours.
Program Standard 2
Curriculum for Retail Food Safety Inspection Officers
“Application” Courses and “Hands-On” Training

To provide application and transfer of web instruction to the FSIO’s work environment, a jurisdiction’s training program (inclusive of both classroom instruction and field training inspections) for staff newly hired or newly assigned to the retail food protection program must include a minimum of eighty percent (80%) of the learning objectives contained in the ORA U Application of Basics of Inspection/Investigation Course (FD170). A jurisdiction may use any one of the following options to address learning objectives not covered in their existing training programs.

1. Classroom Course: Application of the Basics of Inspection/Investigation FD170 (available at www.afdo.org/ or course contents are available on CD through FDA’s Division of Human Resource Development’s lending library).
2. Courses and or field training exercises developed by State/local regulatory jurisdictions or other entities containing learning objectives and exercises equivalent to Option 1 above.
3. Discussions Questions & Exercises * (Conducted in the office or during the 25 joint inspections)

* Under construction

The learning objectives for the ORA U Application of the Basics of Inspection/Investigation course (FD170) are included below:

APPLICATION OF THE BASICS OF INVESTIGATION/INSPECTION – FD170

Applying Knowledge and Principles to the Real World of Inspection and Investigation of Food Establishments

Learning Objectives: Upon completion of this course, participants will be able to:

1. Demonstrate their knowledge of relevant food laws and regulations and how to apply them properly during inspections.
2. Demonstrate hands-on competency in the use of equipment and instruments used during food establishment inspections.
3. Successfully perform a hands-on exercise of aseptic sampling with sterile sampling containers using deli-style food samples.
4. Identify biological, physical, and chemical hazards and risks associated with foods and the operation of food establishments and will apply this knowledge to determine if a food establishment is in compliance.
5. Identify good basic inspection and communication techniques used in food processing, storage, and retail facilities.
6. Demonstrate their ability to identify the causes and symptoms of foodborne illness, to identify implicated foods, to select proper foods for sampling, to determine individuals to interview, to identify the likely causative organism(s), and to recommend procedures that would prevent further outbreaks.
7. Demonstrate their ability to document quantitative observations, to distinguish fact from opinion, to gather, synthesize and document all facts, to avoid ambiguity, and to distinguish relevant from irrelevant facts.
APPENDIX B-2: FIELD TRAINING MANUAL

CONFERENCE FOR FOOD PROTECTION

FIELD TRAINING MANUAL

REGULATORY RETAIL FOOD SAFETY INSPECTION OFFICERS

DRAFT: January 7, 2008
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GLOSSARY OF TERMS

**Competency:** is the state or quality of being adequately or well qualified; having the ability to perform a specific duty, task or role as measured by comparison against a standard of performance.

As used in the context of this Field Training Manual, ”competency” means:

- The demonstration of one or more skills (job tasks) based on knowledge derived from educational programs and experience;
- The ability to perform a task with expected outcomes under the varied circumstances of the real world; and
- The effective application of knowledge and skill in the work setting.

Moreover, “competencies” also refers to a specific list of job tasks appropriate for each described performance element.

**Conference for Food Protection (CFP):** is a biennial forum comprised of representatives from the food industry, government (local, state, federal), academia, and consumer organizations to identify and address emerging problems of food safety and to formulate consensus recommendations through a balanced and deliberative process. Although the Conference has no formal regulatory authority, it is an organization that influences the adoption of uniform model food safety laws and regulations among government agencies and the reduction of different interpretations and implementation of such laws and regulations.

**Consistent pattern of behavior:** is a recurring pattern of action or performance that is recognizable and distinctive. As used in the context of this Field Training Manual, a “consistent pattern of behavior” means:

- The trainee can explain the purpose/objective of a job task and the steps necessary to carry it out effectively;
- The demonstration of a clear understanding of a given competency; and
- A collective set of trainer observations which indicate that the trainee can successfully demonstrate the competency correctly and repeatedly.

** Demonstration inspection:** is a method used by an experienced trainer or designated staff member to visibly show and explain to a trainee the processes and procedures used to conduct a regulatory retail food safety inspection.
Establishment risk categories: is a defined grouping of types of food establishments for risk-based inspections found in Standard 3 of the FDA Program Standards. Standard 3 requires that regulatory jurisdictions use a process that groups food establishments into categories based on potential and inherent food safety risks. Annex 5, Table 1 of the FDA Food Code provides an example of using risk categorization of food establishments with four categories. Jurisdictions can use their own system for grouping establishments into categories based on potential food safety risks.

FDA Voluntary National Retail Food Regulatory Program Standards: are a voluntary set of standards developed through the CFP process and offered by the US Food and Drug Administration to promote continuous improvement and uniformity among regulatory retail food protection programs. The Program Standards serve as a model program foundation and are designed to assist managers of regulatory retail food protection programs in their ability to enhance the services they provide to the public. When applied in the intended manner, the Program Standards should:

- Identify program areas where an agency can have the greatest impact on retail food safety;
- Promote wider application of effective risk-factor intervention strategies;
- Assist in identifying program areas most in need of additional attention;
- Provide information needed to justify maintenance or increase program budgets;
- Lead to innovations in program implementation and administration; and
- Improve industry and consumer confidence in retail food protection programs by enhancing uniformity within and between regulatory agencies.

This Field Training Manual was developed using the FDA Voluntary National Retail Food Regulatory Program Standards, Standard 2 – Trained Regulatory Staff as the basis for required elements. Standard 2 – Trained Regulatory Staff applies to the essential elements of a training program for regulatory staff and requires that staff have the knowledge, skills and abilities to adequately perform their required duties. Additional information can be found at http://www.cfsan.fda.gov/~dms/ret3intr.html.

Field Training Worksheet: is an optional form that can be used by a trainer to record their observations while a trainee is demonstrating the various competencies essential to conducting effective food safety inspections. The minimum performance element competencies (specific job related skills and tasks) that a Food Safety Inspection Officer is expected to perform in a work setting may be identified in the jurisdiction’s Training Plan and can be included on the Field Training Worksheet.

Food Safety Inspection Officer (FSIO): is a regulatory employee responsible for conducting food safety inspections of one or more of the following types of establishments:

- Institutional foodservice;
- Restaurants and other facilities involved in retail foodservice; and
- Grocery stores or other retail food facilities.
Inspection Training Area: is a generalized grouping of like or similar performance elements combined together under a single category. As used in the context of this Field Training Manual, there are six (6) Inspection Training Areas:

I. Pre-Inspection;
II. Inspection Observations and Performance;
III. Oral Communication;
IV. Written Communication;
V. Professionalism; and
VI. Additional Inspection Areas (jurisdiction specific).

Performance Element: is a general description of a group of competencies (job tasks) to be performed by an employee in a particular area of work. Performance Element descriptions are highlighted in the gray shaded boxes of the CFP Training Plan and Log, and the Field Training Worksheets included with the Field Training Manual.

Prerequisite Curriculum: is a specified food safety training curriculum designed to provide Food Safety Inspection Officers (FSIO) with an understanding of the essential food safety and public health principles needed to effectively conduct food safety inspections. Areas of study include:

- Public health principles;
- Prevailing statutes, regulations, and ordinances;
- Communication skills; and
- Microbiology.

Newly hired FSIOs or those newly assigned to the regulatory retail food protection program should successfully complete the prerequisite curriculum prior to conducting independent food safety inspections. Specific web-based courses and learning objectives for the prerequisite curriculum are available on the FDA ORA-U website at: http://www.fda.gov/ora/training/.

Trainee: is an individual who is newly hired or newly assigned to the regulatory retail food protection program. Regardless of their previous inspection experience, these individuals are in the process of learning and successfully demonstrating the competencies identified in the jurisdiction’s training plan as essential for conducting effective food safety inspections.

Trainee-Led Inspections: is a joint field-training inspection that includes both the jurisdiction’s designated trainer and the trainee, where the trainee takes the lead and is responsible for conducting the inspection per the jurisdiction’s administrative procedures and policies. The trainee’s inspection approach, communication techniques, and food safety priorities should reflect those which would be followed if he/she were conducting an independent inspection.

Trainee-led inspections provide an opportunity for the jurisdiction’s trainer to observe the trainee as he/she demonstrates competencies, and identify those competencies that have yet to be learned or were not properly demonstrated.
**Trainer:** is an individual recognized by the regulatory jurisdiction’s food safety program manager as having the prerequisite knowledge, field experience and communication skills necessary to train other Food Safety Inspection Officers, and who has been assigned this training responsibility.

This individual is responsible for observing the trainee as he/she demonstrates competencies identified in the jurisdiction’s training plan, and providing feedback to the trainee throughout the course of the training process on their ability to demonstrate these competencies.

For jurisdictions enrolled in the *FDA Voluntary National Retail Food Regulatory Program Standards*, the trainer or designated staff member responsible for documenting the FSIO’s demonstration of a competency must have completed all the training elements in Steps 1-3 of Standard 2 – Trained Regulatory Staff. It is highly recommended that the trainer be standardized in a process similar to the “FDA Standardization Procedures” (See FDA Procedures for Standardization of Retail Food Inspection/Training Officers at [http://www.cfsan.fda.gov/~ear/rfi-toc.html](http://www.cfsan.fda.gov/~ear/rfi-toc.html)).

**Training Plan and Log:** is a structured approach for a regulatory retail food protection program to identify and document food protection training content, determine training methods, and track a Food Safety Inspection Officer’s progress in demonstrating competencies specific to their job responsibilities and essential for conducting independent food safety inspections.

Please see the Training Plan and Log included in this *Field Training Manual*. 
I. Introduction

BACKGROUND
The Conference for Food Protection (CFP) has progressed through multiple stages in the development of a nationally recognized model for training and standardizing regulatory Food Safety Inspection Officers (FSIOs) responsible for conducting food safety inspections. Research conducted by CFP revealed that existing training and standardization programs were nearly as varied as the number of regulatory jurisdictions throughout the country. In response, a model multi-tiered approach for training and standardizing FSIOs was developed using the *FDA Voluntary National Retail Food Regulatory Program Standards, Standard 2 – Trained Regulatory Staff*.

This *Field Training Manual* focuses on two components of this multi-tiered approach contained in Standard 2 – the prerequisite coursework and the field training model for preparing newly hired FSIOs or individuals newly assigned to the regulatory retail food protection program to conduct independent food safety inspections. The instructions and worksheets provided in this manual constitute a training process, not a certification or audit process.

The model developed through the CFP process, consists of a training plan, trainer’s worksheets, and procedures that may be used by *any* regulatory retail food protection program. Jurisdictions do *not* have to be enrolled in the *FDA Voluntary National Retail Food Regulatory Program Standards* to use, and benefit from, this training structure for preparing FSIOs to conduct independent food safety inspections. This manual was developed to assist jurisdictions that do not have the available staff resources and funding necessary to develop a comprehensive training process. The training model presented in this manual can be readily integrated into existing regulatory retail food protection programs.

The work within this document represents the culmination of years of research and review by subject matter experts comprised of psychometricians and representatives from state and local regulatory retail food protection programs, industry trade associations, retail food and foodservice operations, academia, and the FDA’s Office of Regulatory Affairs University (ORA U). The coursework and training process are the basis for much of the criteria that is contained in Steps 1 and 2 of *Standard 2 – Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards*. This manual is a working document and improvements will be made through the CFP Committee process.

With the availability of this document, state, local, and tribal regulatory retail food protection programs now have a nationally recognized model upon which to design basic training programs for FSIOs. Moreover, ongoing use of this model will both enhance the effectiveness of regulatory retail food safety inspections across the country and increase uniformity among regulatory professionals.
OVERVIEW – FIELD TRAINING MANUAL

All new employees or individuals new to the regulatory retail food protection program should complete prerequisite coursework and a field training process similar to that presented in this document. The national research conducted by CFP has been used to identify the minimum performance element competencies needed to conduct effective regulatory retail food safety inspections. The *CFP Training Plan and Log* along with the *Field Training Worksheets* provided in this manual are based on these minimum performance element competencies.

Flexibility has been built into the process to allow regulatory jurisdictions the opportunity to customize training content and methods to represent a jurisdiction’s own administrative policies, procedures, and inspection protocol. As you read through this manual, it is important to keep in mind that jurisdictions are not obligated to use the forms; equivalent forms or training processes can be developed. The ultimate objective is to ensure FSIOs are trained on and provided an opportunity to successfully demonstrate the performance element competencies that are a vital part of their job responsibilities.
II. Prerequisite Curriculum

PREREQUISITE COURSES

The CFP has worked with the FDA to identify a prerequisite curriculum designed to provide a FSIO with a solid understanding of essential food safety and public health principles needed to conduct effective retail food safety inspections. The FSIO should complete the prerequisite coursework prior to conducting independent inspections. A trainer can, however, conduct joint field training inspections with the newly-hired FSIO while they are in the process of completing the prerequisite coursework.

The prerequisite curriculum, as available on the FDA ORA U web site, is reprinted below with the estimated amount of time (in minutes) to complete each module indicated in parenthesis followed by the course number.

**PUBLIC HEALTH PRINCIPLES**
Public Health Principles (90) FDA36

**MICROBIOLOGY**
Food Microbiological Control (series):
1. Overview of Microbiology (60) MIC01
2A. Gram-Negative Rods (60) MIC02
2B. Gram-Positive Rods & Cocci (90) MIC03
3. Foodborne Viruses (60) MIC04
4. Foodborne Parasites (90) MIC05
Mid-Series Exam (30) MIC16
5. Controlling Growth Factors (90) MIC06
6. Control by Refrigeration & Freezing (60) MIC07
7A. Control by Thermal Processing (90) MIC08
7B. Control by Pasteurization (90) MIC09
10. Aseptic Sampling (90) MIC13
12. Cleaning & Sanitizing (90) MIC15

**PREVAILING STATUTES, REGULATIONS, ORDINANCES**
Basic Food Law for State Regulators (60) FDA35
Beginning an Inspection (90) FDA38
Issues & Observations (90) FDA39
An Introduction to Food Security Awareness (60) FD251
2005 Food Code

**NOTE:** Specific state/local laws & regulations to be addressed by each jurisdiction

**COMMUNICATION SKILLS**
Communication Skills for Regulators

Two options are available for FSIOs to complete the prerequisite coursework:

**OPTION 1 – FDA ORA U Web-based Training**

All prerequisite courses can be completed via web-based training and are available from FDA’s ORA University at: [http://www.fda.gov/ora/training/](http://www.fda.gov/ora/training/). Employees of regulatory agencies can obtain free access to these course offerings; access passwords can be obtained on line. The time needed to complete the prerequisite courses will vary from one trainee to another. FDA ORA U has estimated the total time needed to complete the prerequisite coursework to be 42 hours.

**OPTION 2 – Equivalent Coursework and Recognized Examination**

A jurisdiction’s trainer or food protection program manager can allow credit for coursework that a FSIO has completed from sources other than FDA ORA U. A course is deemed equivalent if it can be demonstrated to cover at least 80% of the learning objectives of the comparable ORA U course and documentation of successful completion is provided. The learning objectives for each of the ORA U courses are available from
the FDA web site: [http://www.fda.gov/ora/training/](http://www.fda.gov/ora/training/).

FSIOs submitting documentation of equivalent coursework should also demonstrate a basic level of food safety knowledge by successfully passing a written examination from one of the following four (4) categories:

1. The Certified Professional - Food Safety (CP-FS) examination offered by the National Environmental Health Association (NEHA);

2. A state sponsored food safety examination that is based on the current version of the FDA Food Code (and supplement) and developed using methods that are psychometrically valid and reliable;

3. A food manager certification examination provided by an ANSI/CFP accredited certification organization; or

4. A Registered Environmental Health Specialist (REHS) or Registered Sanitarian (RS) examination offered by NEHA or a State Registration Board.

**NOTE:** Within the context of this manual, the written examinations are part of a training process, not a standardization or certification process. The examinations listed above are not to be considered equivalent to each other. They are to be considered only as training tools and have been incorporated as part of this Field Training Manual because each provides a method for determining whether a FSIO has attained a basic level of food safety knowledge. Any jurisdiction has the option and latitude to mandate a particular examination based on the laws and rules of that jurisdiction.
III. The CFP Training Plan and Log

CFP TRAINING PLAN AND LOG

The CFP Training Plan and Log (see Attachment A) provides a structured approach for identifying the training content, determining the training methods, and tracking the FSIO’s progress in successfully demonstrating performance elements and competencies specific to their job responsibilities.

The CFP Training Plan and Log provides areas for documenting:

- Trainee and Trainer information;
- A jurisdiction’s method of training for each of the competencies; and
- Completion of performance elements and/or competencies for each training area.

It also contains optional areas for:

- Maintaining a weekly training log for tracking accomplishments and identifying future training goals; and
- Tracking the number and type of retail food and/or foodservice establishments included as part of the field training inspections.

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**Conference for Food Protection**

**TRAINING PLAN and LOG**

**Retail Food, Restaurant, and Institutional Foodservice**

**Food Safety Inspection Officer**

NOTE: The CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers (FSIOs) should be reviewed prior to using the CFP Training Plan and Log. The manual provides jurisdictions with information that will be helpful in customizing the FSIO training plan and implementing a field training process that meets the specific needs of the jurisdiction.

<table>
<thead>
<tr>
<th>Food Safety Inspection Officer’s (FSIO) Name:</th>
<th>Start Date of the Training Process:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Safety Inspection Officer’s (FSIO) Agency:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Trainer’s Name (if multiple trainers Ret all):</th>
<th>Trainer’s Agency:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
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<tr>
<td>2.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
</tbody>
</table>

(Signature below indicates FSIO has completed all curriculum and field training elements and is ready to conduct independent retail food and/or foodservice inspections)

<table>
<thead>
<tr>
<th>Completion Date of Pre-requisite coursework:</th>
</tr>
</thead>
</table>

| OPTION 1: ☐ | OPTION 2: ☐ |

<table>
<thead>
<tr>
<th>Completion Date of Performance Elements &amp; Competencies:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Food Safety Inspection Officer’s (FSIO) Signature:</th>
<th>Trainer’s or Food Program Manager’s Signature:</th>
</tr>
</thead>
</table>
DESCRIPTION OF HEADER INFORMATION

Food Safety Inspection Officer’s (FSIO’s) Name – The name of the individual who will receive the training.

Food Safety Inspection Officer’s (FSIO’s) Agency – The name of the regulatory retail food protection program where the FSIO receiving training is employed.

Start Date of the Training Process – The date any part of the FSIO’s training for conducting independent food safety inspections is initiated; this includes review of the jurisdiction’s procedures, rules, and manuals; classroom or web-based coursework; joint field training inspections; or other training methods identified in the jurisdiction’s training plan.

Trainer’s Name (if multiple trainers, list all) – The name(s) of the individual(s) delivering or overseeing the training of the FSIO.

Trainer’s Agency – The name of the regulatory retail food protection program or agency where the trainer is employed.

Completion Date of Prerequisite Coursework – The date the trainee completes all prerequisite coursework identified by the Conference for Food Protection as essential for conducting independent food safety inspections. Two options are available for completing the prerequisite course work:

OPTION 1 – Box is checked to indicate the FSIO has completed the FDA ORA U prerequisite (“Pre”) courses/examinations/exercises, and has completed training on the jurisdiction’s prevailing statutes, regulations, and or ordinances.

OR

OPTION 2 – Box is checked to indicate the FSIO has submitted documentation of completing coursework equivalent to the FDA ORA U prerequisite (“Pre”) curriculum, and has completed training on the jurisdiction’s prevailing statutes, regulations, and/or ordinances, and has certification or other documentation of successfully passing one of the written examination options in Standard 2 – Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards.

Completion Date – (Performance Elements & Competencies) – The date the FSIO has successfully demonstrated all performance element competencies identified in the jurisdiction’s training plan. At this point, the jurisdiction’s trainer and/or retail food protection program manager has determined that the FSIO is now ready to conduct independent food safety inspections of retail food and/or foodservice establishments.

Food Safety Inspection Officer’s (FSIO’s) Signature – The signature of the FSIO that is applied when all performance element competencies have been successfully demonstrated.

Trainer’s or Food Program Manager’s Signature – The signature of the individual responsible for making the determination that the trainee has completed all the training areas and successfully demonstrated all the performance element competencies.
JURISDICTION’S TRAINING METHODS

The CFP Training Plan and Log is designed to incorporate a variety of training methods appropriate for each of the performance element competencies. Jurisdictions are free to select the training method most appropriate for their individual situation and needs. A table (see example below) is included in the CFP Training Plan and Log to document and summarize the various training methods that a jurisdiction may use. Examples of training methods include, but are not limited to, classroom presentations or exercises, laboratory workshops, office demonstrations, and joint field training inspections.

<table>
<thead>
<tr>
<th>Code</th>
<th>Training Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>CE</td>
<td>Classroom Exercise</td>
</tr>
<tr>
<td>OD</td>
<td>Office Demonstration</td>
</tr>
<tr>
<td>LE</td>
<td>Laboratory Exercise</td>
</tr>
<tr>
<td>JFT</td>
<td>Joint Field Training</td>
</tr>
<tr>
<td>O</td>
<td>Other (described in Training Plan)</td>
</tr>
</tbody>
</table>

The column with the heading “Code” can be used to record an abbreviation that describes the training method. For example, the abbreviation “LE” in the above table is used to describe “Laboratory Exercise.” The abbreviation “JFT” is used to describe “Joint Field Training Inspections.”

INSPECTION TRAINING AREAS

The CFP Training Plan and Log is divided into six (6) inspection training areas:

I. Pre-Inspection
II. Inspection Observations and Performance
III. Oral Communication
IV. Written Communication
V. Professionalism
VI. Additional Inspection Areas (jurisdictions can add performance elements and competencies not contained in the CFP Training Plan and Log)

PERFORMANCE ELEMENTS

The CFP Training Plan and Log contains a total of 23 “performance elements” within the six (6) inspection training areas.

I. Pre-Inspection – (2 Performance Elements)
   - Has the required equipment and forms to conduct the inspection.
   - Reviews the establishment file for the previous inspection report, complaints on file, and if applicable, required HACCP Plans or documents supporting the issuance of a variance.
II. Inspection Observations and Performance – (7 Performance Elements)

- Provides identification as a regulatory official to the person in charge, confirming agency authority for the inspection and stating the purpose of the visit.
- Has knowledge of the jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.
- Uses a risk-based inspection methodology to assess the regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food.
- Obtains immediate corrective action for out of compliance employee practices and management procedures essential to the safe storage, preparation and service of food.
- Correctly assesses the compliance status of other regulations (Good Retail Practices) that are included in the jurisdiction’s prevailing statutes, regulations, and/or ordinances.
- Verifies correction of out of compliance observations identified during the previous inspection.
- Correctly uses inspection equipment during the joint inspection.

III. Oral Communication – (6 Performance Elements)

- Asks questions and engages in a dialogue with the person in charge/employees to obtain information relevant to the inspection.
- Provides the person in charge/employees with accurate answers to inspection-related questions or admits not knowing the answer.
- Uses available means (e.g., interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers.
- Follows the jurisdiction’s policy with regard to disclosure of confidential information.
- Uses effective communication and conflict resolution techniques to overcome inspection barriers.
- Conducts the exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.

IV. Written Communication – (3 Performance Elements)

- Completes inspection form per the jurisdiction’s administrative procedures (e.g., observations, corrective actions, public health reasons, applicable code references, compliance dates).
- Includes with the 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).
- Presents the inspection report, and when necessary cross-referenced documents, to the person in charge.

V. Professionalism – (3 Performance Elements)

- Maintains a professional appearance consistent with the jurisdiction’s policy (e.g., clean outer clothing, hair restraint).
- Demonstrates proper sanitary practices as expected from a food service employee.
- Only reports substantiated findings as violations.

VI. Additional Performance Elements – (Jurisdiction Specific)

- Uses an aseptic food sample collection method consistent with criteria established by the laboratory serving the jurisdiction.
- Uses an aseptic water sample collection method consistent with criteria established by the laboratory serving the jurisdiction.
- Other performance elements identified by the jurisdiction.

NOTE: The CFP Training Plan lists 2 Performance Elements (aseptic food and water sample collection) under additional performance elements. The responsibility for aseptic sampling of food and water varies greatly from one jurisdiction to another. If FSIOs are expected to collect aseptic samples of food and/or water, even if it is to be done on a limited basis, these performance elements should be included in the jurisdiction’s training plan.
IV. Creating Your Training Plan

This section presents four (4) basic steps that jurisdictions should consider when developing a training plan for your regulatory retail food protection program:

**STEP 1** – Determine Performance Elements to be Included in Your Training Plan
**STEP 2** – Determine Competencies for Each Selected Performance Element
**STEP 3** – Determine Need for Additional Performance Elements and Competencies
**STEP 4** – Determine Appropriate Training Method for Each Competency

**STEP 1 – DETERMINE PERFORMANCE ELEMENTS TO BE INCLUDED IN YOUR TRAINING PLAN**

Performance elements appear in the **shaded areas** of the *CFP Training Plan and Log*. The jurisdiction’s trainer should review the performance elements contained in the *CFP Training Plan and Log* and determine those that are part of the job responsibility of a FISO in their jurisdiction. If a performance element is conducted by a FSIO, it is to be included in the training plan. An “X” is to be placed in the box adjacent to each performance element included in your jurisdiction’s training plan.

Using the graphic above as an example, an “X” appears in the box for identified performance elements within the “Pre-Inspection” training area. In this example, the trainer has
determined that both of these performance elements are part of the FSIO’s job responsibility in their jurisdiction.

**STEP 2 – DETERMINE COMPETENCIES FOR EACH SELECTED PERFORMANCE ELEMENT**

The *CFP Training Plan and Log* provides a list of competencies (job tasks) under each performance element. These competencies are intended to serve as examples of job-related tasks that a FSIO will be expected to successfully demonstrate during field training inspections.

The jurisdiction’s trainer should review competencies listed under the selected performance elements and place an “X” in the box for each of the competencies that are part of the FSIO’s job responsibility in their jurisdiction.

Some of the competencies listed for a performance element may not be applicable to a FSIO within a given jurisdiction. In the graphic below, infrared thermometers and cameras are not part of the standard issued equipment for inspection staff. The FSIO would not, therefore, be responsible for using this type of equipment. If this is the case, the boxes adjacent to these competencies are to be left blank as they would not be included in that jurisdiction’s training plan.

Competencies that are applicable to the FSIO’s job should not be arbitrarily removed or deleted from the *Field Training Worksheet*. 

![Field Training Worksheet](image-url)
Conversely, there may be competencies not listed under a performance element that are important for a jurisdiction to include in a FSIO’s training. The *CFP Training Plan and Log* has been designed to accommodate “Additional” jurisdiction-specific competencies. In the example from the previous graphic, the jurisdiction issues pH test kits to all FSIOs for product assessments during inspections. If this is the case, the FSIO will need to successfully demonstrate the use of the pH test kit during training which will be included as part of the FSIO training plan.

**STEP 3 – DETERMINE NEED FOR ADDITIONAL PERFORMANCE ELEMENTS AND COMPETENCIES**

The performance element competencies that comprise the *CFP Training Plan and Log* represent a national model and the overwhelming majority of these apply to every jurisdiction. There will be instances, however, where a jurisdiction may need to add performance elements and competencies that are not listed on the *CFP Training Plan and Log*.

Section VI – Additional Performance Elements includes blank templates that a jurisdiction can use to further customize their training plan. Additional Performance Elements are placed in the shaded boxes circled in the graphic below. Any competencies that a FSIO will need to successfully demonstrate during the training process for this performance element need to be identified and listed in the spaces indicated with the arrows.
Feedback received from some jurisdictions that field tested the CFP training process suggested inclusion of the following additional performance element competencies in a FSIO training plan:

- Applies HACCP principles in the assessment of food processes and/or preparation procedures to determine if food safety hazards are controlled.
- Conducts menu-based reviews to determine inspection priorities based on potential food safety hazards.
- Demonstrates a thorough understanding of how the Food Code is organized and proper application of Food Code conventions.
- Develops risk control plans or other intervention strategies in accordance with the jurisdiction’s administrative procedures to obtain long term control of contributing factors to foodborne illnesses.

**STEP 4 – DETERMINE APPROPRIATE TRAINING METHOD FOR EACH COMPETENCY**

Once the FSIO competencies have been identified in the training plan, consideration needs to be given as to how the training will be delivered. Training methods vary from jurisdiction to jurisdiction, and resources available to a jurisdiction (time, money, personnel, etc.) may have a significant impact on determining the type of training that can be provided. Whatever training methods are selected, it is important to ensure that the process will cover all the competencies (job tasks) that FSIOs are expected to successfully demonstrate during food safety inspections.

Training is most effective when it is delivered within the context or environment in which an individual would be expected to apply the knowledge and skills. For FSIOs, the appropriate training environment is one that mirrors the actual experience of inspecting retail food, restaurant, and/or institutional foodservice establishments. When developing the FSIO training plan, every effort should be made to provide the FSIO with opportunities to demonstrate a competency during actual field training inspections.

In an ideal training environment, the selection of establishments used for training will provide adequate opportunity to demonstrate all competencies. However, for a variety of reasons, it may not always be possible for the trainee to demonstrate all competencies during joint field training inspections. Should this occur, other training options will need to be considered and implemented.

Some of the performance elements that comprise the **CFP Training Plan and Log** include competencies that frequently occur as part of the inspection process and give multiple opportunities for the trainer to observe the trainee demonstrating these job tasks during joint field training inspections. These performance elements include:

- Has the required equipment and forms to conduct the inspection;
- Reviews establishment file for previous inspection report, complaints on file, and, if applicable, required HACCP Plans or documents supporting the issuance of a variance;
• Provides identification as a regulatory official to the person in charge, confirming agency authority for the inspection and stating the purpose of the visit;
• Uses inspection equipment correctly during the inspection;
• Conducts the exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations;
• Presents the inspection report and, when necessary, cross-referenced documents, to the person in charge; and
• Maintains a professional appearance that is consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraints).

Some of the performance elements, though they frequently occur during field inspections, will have competencies that the FSIO will need to successfully demonstrate throughout the course of the joint field training process. These performance elements represent competencies for which the trainer will observe a trainee’s continued development and improvement with each subsequent training inspection. Most of the performance elements fall into this category and include:

• Has knowledge of the jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections;
• Uses a risk-based inspection method to assess regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food;
• Obtains immediate corrective actions for out of compliance employee practices and management procedures essential to the safe storage, preparation, and service of food;
• Verifies correction of out of compliance observations identified during the previous inspection;
• Asks questions and engages in a dialogue with the person in charge/employees to obtain information relevant to the inspection;
• Provides the operator with accurate answers to inspection-related questions or admits not knowing the answer;
• Uses available means (e.g. interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers;
• Completes inspection form per the jurisdiction’s administrative procedures (e.g., observations, corrective actions, public health reasons, applicable code reference, compliance dates;
• Includes with the 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);
• Demonstrates proper sanitary practices as expected from a food service employee; and
• Only reports substantiated findings as violations.
There are, however, some performance elements that are important inspection responsibilities but may seldom or rarely occur during the FSIO field training process. Due to the variable nature of inspections, the trainee may not be presented with an opportunity to demonstrate these competencies as part of the joint field training process. Although less frequently encountered, these performance elements include knowledge and skills integral to enhancing the effectiveness of the inspection process and include:

- Follows the jurisdiction’s policy in regard to disclosure of confidential information;
- Uses effective communication and conflict resolution techniques to overcome inspection barriers; and
- Uses an aseptic food or water sample collection method consistent with criteria established by the laboratory serving the jurisdiction.

Whenever possible, competencies are to be assessed in the field inspection environment. If this is not feasible laboratory, classroom, or office exercises may be used to assess performance elements difficult to observe in the field. Examples of such training exercises may include:

- Trainee photographing a specific object in the office, field, or laboratory;
- Trainee explaining to the trainer the jurisdiction’s policy in regard to disclosure of confidential information;
- Trainee explaining to the trainer the jurisdiction’s policy in regard to conflict resolution (the trainer may develop scenarios for the trainee to review and discuss appropriate conflict resolution techniques); or
- Trainee demonstrating aseptic food and/or water sampling in the office, laboratory, or during a designated field training inspection.
The graphic below provides an illustration to document alternative training methods.

In this example, the types of establishments selected for the joint training process did not present an inspection environment that required the trainee to overcome language barriers. An opportunity for the trainee to demonstrate these competencies was addressed by incorporating a classroom exercise as an alternative training method.
V. Preparing for Joint Field Training Inspections

STEP 1 – IDENTIFY SOURCE DOCUMENTS FOR ORIENTATION

Information that a regulatory jurisdiction should review as part of the FSIO’s orientation to the retail food protection program includes but is not limited to:

- The jurisdiction’s FSIO training plan that identifies the specific performance element competencies that a FSIO will need to successfully demonstrate during joint field training inspections;
- The jurisdiction’s current statutes, regulations, code, or ordinances governing foodservice and/or retail food under its inspection authority;
- Any written policies or interpretations implemented by the jurisdiction that carry the same weight as their prevailing statutes, rules, and ordinances;
- The jurisdiction’s current retail food protection program inspection form;
- Any marking instructions that the jurisdiction may have developed to assist staff with documenting inspection findings;
- The prerequisite curriculum posted on FDA’s ORA U web site and the web address for obtaining an access password; and
- Other documents specific to the jurisdiction that the trainer has determined are integral to the retail food protection training program.

The inclusion of the above list of source documents is not meant to imply that all material must be reviewed during a single dedicated FSIO orientation session. The documents are included here to provide a starting point for a checklist of materials a trainer will likely need to review with the FSIO the first weeks of employment or assignment to the retail food protection program.

STEP 2 – REVIEW LIST OF PREREQUISITE CURRICULUM WITH TRAINEE

The courses listed as part of the prerequisite curriculum should be reviewed with the FSIO. The trainer or food program manager needs to make a determination whether a candidate has met any or all of the prerequisite curriculum requirements and has documentation indicating successful completion. If the FSIO needs to complete coursework, the trainer should assist him/her with obtaining an access password to the FDA ORA U web site, or make a determination as to whether equivalent courses are a more viable option.

Reserving designated blocks of time each week for the FSIO to devote to this curriculum often facilitates timely completion of the prerequisite coursework. Keep in mind that the FSIO can participate and even take the lead in conducting joint field training inspections while they are in the process of completing the prerequisite coursework.

NOTE: The prerequisite coursework includes a listing for the FDA 2005 Food Code. While most jurisdictions use the FDA Food Code as the foundation for their own rules and regulations, there will be some differences unless the jurisdiction has adopted the entire FDA Food Code by reference. Jurisdictions should use their own Food Code as the prerequisite course for training FSIOs. State, local, and tribal jurisdictions are strongly encouraged to
conducted a frequent review of their existing Food Code provisions against the current version of the FDA Food Code to ensure that it provides a scientifically sound technical and legal basis for regulating the retail food segment of the industry.

**STEP 3 – REVIEW TRAINING PLAN WITH TRAINEE**

A review of the jurisdiction’s retail food protection training plan should include a discussion of:

- The performance elements, how they were determined, and their impact on conducting effective food safety inspections;
- The specific competencies that comprise each performance element so the trainee has a clear understanding of what job tasks they will be expected to successfully demonstrate during the course of the field training process;
- Training methods and approaches that will be offered to facilitate a trainee’s demonstration of the competencies;
- How field training objectives will be determined and communicated to the trainee;
- How the trainer will observe the trainee perform competencies during field training inspections and share feedback on their observations;
- How progress and accomplishments will be documented on the training plan; and
- The jurisdiction’s criteria for determining a trainee’s readiness to conduct independent inspections of retail food and/or foodservice facilities.
VI. Conducting Field Training Inspections

Field training inspections are a core component for preparing a FSIO to perform their job responsibilities independently. There are two types of field training inspections: demonstration (trainer-led) and those where the trainee takes the lead (trainee-led).

Field training will initially be comprised of demonstration (trainer-led) inspections. Providing an opportunity for the FSIO to observe experienced staff conducting food safety inspections is an essential step in preparing a trainee for taking the lead during field training inspections.

Trainee-led inspections provide the opportunity for the jurisdiction’s trainer to observe the trainee build their skills and successfully demonstrate competencies. Inspections led by a trainee are not part of an examination or audit process. They are intended to be part of a structured training process where learning is still occurring, where trainers are providing feedback, and where correct demonstration of competencies is continually being re-enforced.

A sufficient number of field training inspections led by the trainee are to be conducted to allow the demonstration of all competencies identified in the jurisdiction’s training plan. Upon completion of the field training process, the trainee should have successfully demonstrated all competencies in the training plan and be ready to conduct independent inspections of retail food and/or foodservice facilities.

**STEP 1 – SELECTING APPROPRIATE TRAINERS**

The manager of the regulatory retail food protection program has the discretion of deciding who will serve as trainers. In making this decision, available training resources (e.g., personnel, time, funding) and overall program objectives will need to be considered when selecting staff to oversee and conduct the FSIO field training.

A trainee can garner important knowledge and perspective from observing different inspection approaches from experienced staff. During the course of these joint inspections, it is expected that a trainee will observe experienced staff demonstrate all performance element competencies that are part of the jurisdiction’s training plan.

**STEP 2 – CONDUCTING DEMONSTRATION (TRAINER-LED) INSPECTIONS**

When selecting staff for trainer-led inspections, management should consider experienced staff with a solid command of all the competencies the FSIO will be expected to demonstrate in the training process. These experienced staff members will lay the foundation for the trainee’s assimilation of the knowledge and skills needed to conduct food safety inspections as they will be initially demonstrating how to correctly perform specific job tasks.

If possible, management should consider pairing the trainee with several different FSIOs during demonstration inspections to allow exposure to different inspection approaches and techniques. Moreover, these trainer-led inspections should be conducted in a variety of establishments that cover the spectrum of retail food and foodservice operations that the FSIO will eventually be inspecting on their own.
The level of preparedness and time needed to assimilate knowledge from observations made during demonstration inspections will vary with each trainee. When a determination has been made that the trainee is ready to take the lead during an inspection, it is important to keep in mind that training has not stopped. Trainees will still need trainers to demonstrate competencies and provide feedback. The CFP training process is designed to facilitate a continuous improvement learning experience.

**STEP 3 – PREPARING FOR INSPECTIONS LED BY THE TRAINEE**

Inspections led by the trainee consist of two inter-related but separate activities: one is specific to the role of the jurisdiction’s trainer, the other relates to the role and responsibilities of the trainee.

- The trainer is responsible for observing the trainee as he/she demonstrates competencies identified in the jurisdiction’s training plan.
- The trainee is responsible for conducting the inspection in the presence of the trainer, per the jurisdiction’s administrative procedures and policies.

Even though there is a relationship between these activities, it is important to recognize the need to view them separately.

**Trainer’s Role**

During trainee-led inspections, the trainer observes the trainee conducting the inspection and demonstrating the competencies. The trainer participates *only* when the inspection process dictates their assistance or intervention.

No single field training inspection will provide an opportunity for the trainee to demonstrate all the competencies listed in the training plan. The trainer should allow the inspection process to unfold as it normally would; in other words, the jurisdiction’s training plan should *not* be used as a checklist for structuring the inspection to accommodate observations of a trainee demonstrating competencies. Requesting that a trainee demonstrate a competency that is not integral to the inspection that is occurring may be disruptive and create unwanted confusion and stress for the trainee.

As the field training process progresses, the trainer may note that the selection of establishments has not provided the trainee an opportunity to demonstrate some competencies. The trainer can try to remedy this situation by selecting establishments that may provide appropriate environments where the trainee can demonstrate the job tasks. If this is not feasible, the trainer can set up field exercises during inspections led by the trainee; however, the exercise should be conducted at a time that will not disrupt the flow of the inspection and the trainer should discuss these exercises with the trainee prior to the inspection so expectations are clear.
Trainee’s Role

Since the trainee will be taking the lead during these field training inspections, their focus should be on observations of food safety practices and procedures within the establishment. During these inspections the trainee is responsible for:

- Initiating contact with the person in charge;
- Explaining the purpose of the inspection;
- Directing the inspection process;
- Establishing a dialogue with management and employees;
- Making the observations of food safety practices;
- Obtaining corrective actions for out-of-compliance foodborne illness risk factors;
- Preparing the inspection report; and
- Facilitating and conducting the exit discussion of the report.

The trainee’s inspection approach, communication techniques, and food safety priorities should be reflective of those they would implement if inspecting independently. The inspection should *not* be structured solely around the demonstration of competencies. The trainee should concentrate on conducting an effective food safety inspection. Providing an appropriate variety of establishments will help ensure the competencies listed on the jurisdiction’s training plan do not drive the inspection approach.

**STEP 4 – SELECTING ESTABLISHMENTS FOR INSPECTIONS LED BY TRAINEE**

The ideal establishment for conducting a food safety inspection led by the trainee is one that will provide an opportunity for the trainee to successfully demonstrate the greatest number of competencies. The majority of these inspections should be completed in establishments that are representative of the highest risk categories within the jurisdiction or the FSIO’s assigned training area.

Jurisdictions can use their own system for grouping establishments into categories based on potential or inherent food safety risks. Annex 5, Table 1 of the *2005 FDA Food Code* can also be used as a reference for assigning risk categories.

**STEP 5 – DETERMINING THE NUMBER OF INSPECTIONS LED BY TRAINEE**

There is no definitive number of inspections led by the trainee that can be used as a standard for all newly hired employees. The number of inspections necessary is one that provides adequate opportunity for all competencies to be demonstrated. Some of the competencies, such as those related to conducting a risk-based inspection, must be continually demonstrated throughout the course of the field training process.

**NOTE:** For jurisdictions enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards, *staff conducting food safety inspections must conduct a minimum of 25 joint field inspections comprised of both “demonstration” (trainer-led) and trainee-led inspections, and include a variety of establishment types available within the jurisdiction.*
The CFP field training process is not intended to be part of an audit or evaluation process, therefore a “scoring system” has not been included. The primary objective of this process is to ensure that the FSIO has received training for all the competencies that are part of the job responsibilities within that jurisdiction. As part of this training, the FSIO is to successfully demonstrate their ability to perform each of these competencies. No single inspection or observation should be used by the trainer(s) as the standard of measurement; the jurisdiction’s trainer(s) need to evaluate the trainee’s ability to demonstrate competencies throughout the entire process.

**NOTE:** FSIOs should successfully complete the field training process prior to conducting independent inspections and re-inspections of retail food establishments equivalent to Risk Categories 2, 3, and 4 as noted in Annex 5, Table 1 of the 2005 FDA Food Code. However a jurisdiction’s trainer or food program manager can make a determination as to the FSIO’s readiness to conduct independent inspections of Risk Category 1 establishments at any time during the training process.

**STEP 6 – OBSERVING TRAINEE DEMONSTRATE COMPETENCIES**

**NOTE:** For jurisdictions enrolled in the FDA Voluntary National Retail Food Regulatory Program Standards, the trainer or designated staff member responsible for documenting the FSIOs demonstration of a competency must have completed all the training elements in Steps 1-3 required in Standard 2 – Trained Regulatory Staff. It is highly recommended that this trainer be standardized in a process similar to the “FDA Standardization Procedures” (See FDA Procedures for Standardization of Retail Food Inspection/Training Officers at http://www.cfsan.fda.gov/~ear/rfi-toc.html).

There is no single “correct” method for making a determination as to when a trainee has successfully demonstrated a competency during field training inspections. Throughout the series of training inspections, the trainer will observe the trainee demonstrate many competencies. For some competencies, the trainer will be able to ascertain relatively quickly whether a trainee has demonstrated the job task correctly. For example, once a trainee successfully demonstrates the proper use of inspection equipment, he/she generally will maintain that skill throughout the training process.

Almost all of the competencies listed, however, should be demonstrated by the trainee several times. The trainer should observe the trainee successfully demonstrate a consistent pattern of behavior for each competency. As defined in this document, a “consistent pattern of behavior” means:

- The trainee can explain the purpose/objective of the job task and the steps necessary to carry it out effectively;
- The demonstration of a clear understanding of a given competency; and
- A collective set of trainer observations which predominately indicate that the trainee can successfully demonstrate the competency correctly and repeatedly.

Trainees will be on a continuous learning curve throughout the training process;
inconsistencies in their inspection approach from one facility to another should be expected. Trainers will need to determine whether these inconsistencies are due to a lack of understanding, an inability to successfully demonstrate a competency, or simply inexperience.

In some cases a trainee may be capable of successfully demonstrating a competency but fails to do so during an inspection. For example, he/she may not address an important food safety risk (such as employee health) with the person in charge. The trainee may understand and can demonstrate the proper approach to assessing an employee health policy within an establishment, but forgets to do so because they may have become distracted by other risk related observations and the need to work with management to obtain corrective actions. This is an example of a trainee who is still in the process of developing his/her own organized risk-based inspection approach.

It is important for trainers to recognize that during the training process, trainees are not only learning competencies but are also becoming acclimated to their working environment. Trainer’s decisions regarding a trainee demonstrating a competency should be based on a collective set of observations which predominately indicate the job task is being performed correctly.

When the trainee successfully demonstrates a competency, the jurisdiction’s trainer or designated staff person documents the completion of the skill on the training plan. Some options and forms for tracking the trainee’s progress and accomplishments are presented in Section VII of this document.
VII. Documenting Training Progress and Accomplishments

Each regulatory retail food protection program will need to develop a system to track a FSIO’s training progress and accomplishments. A jurisdiction can customize the forms provided in this manual or develop their own. Any system for documenting training should provide a method for:

- Recording competencies that have been demonstrated by a FSIO;
- Determining competencies a FSIO has not yet demonstrated;
- Identifying the trainer(s) responsible for observing a FSIO demonstrating a competency;
- Providing feedback to the FSIO on training objectives; and
- Obtaining confirmation from both the FSIO and trainer that competencies have been demonstrated correctly.

**CFP Training Plan and Log Used as a Single Source Document**

The *CFP Training Plan and Log* (Attachment A) can be used as a single source document for recording a FSIO’s training progress and accomplishments.

The graphic below provides an illustration of how a FSIO’s training status can be tracked with documentation entered for the four competencies listed under this performance element.
For each of the competencies, the trainer records the date a determination was made that the trainee successfully demonstrated the competency. The trainee’s initials (represented by “R.T.” in the graphic on the previous page), indicate his/her agreement with the date recorded (represented as 5-21-07). The training officer’s name or signature indicates confirmation that the trainee successfully demonstrated the competency. When the trainee has demonstrated all the competencies for a performance element, the bottom row is completed as indicated with the arrow in the graphic.

Documentation on the CFP Training Plan and Log does not have to follow this format exactly. For example, a jurisdiction that has only one trainer may find it redundant to record the trainee’s initials and trainer’s name for all competencies within each performance element. In scenarios like this, a trainer may choose to simply record the date when each competency was demonstrated under the “Date Demonstrated by the Trainee” column. Then, when the trainee has demonstrated all the performance element competencies, he/she places their initials in the bottom row (indicated with the arrow in the graphic), and the trainer signs confirming completion.

However, if multiple trainers are used, competencies demonstrated by the trainee may be confirmed by different individuals. In this case, in order to ensure open communication between the training staff and the trainee throughout the field training process, it may be important to know which trainer actually observed that the trainee demonstrated a specific competency.

A “comment” section is provided at the bottom of each of the performance element tables. This area can be used to describe future training objectives or to provide a method of communicating training observations among multiple trainers. It can also be used to describe changes to the training plan to ensure opportunity to demonstrate a competency that may be difficult to observe during field training inspections.

From the example presented on the previous page, the comment section includes the following note:

"Trainee did not observe a condition during the joint field training inspections that required issuance of an embargo/stop sale/food destruction order. Office scenarios were set up. Trainee demonstrated steps that would be implemented for the issuance of an embargo/stop sale/food destruction order and completed the required forms per the jurisdiction’s administrative protocol. (John Smith)"

In this example, the scheduled field training inspections were coming to an end. The field inspections had not provided an opportunity for the trainee to demonstrate the jurisdiction’s procedure for issuance of an embargo/stop sale/food destruction order. The trainer set up an office exercise for the trainee to demonstrate this competency and the “OD” designation under training method in the graphic indicates “Office Demonstration.”
OPTIONAL TRAINING LOGS

Two optional training logs are included at the end of the CFP Training Plan and Log that can be used to track a FSIO’s progress and achievements:

- FSIO Training Log
- Joint Field Training Inspections – Establishment Log

A determination on whether to use these optional training logs should be made by the manager of the regulatory retail food protection program before initiating field training so their intended use and purpose can be communicated to FSIOs in training and staff who will serve as trainers.

FSIO Training Log

The optional FSIO Training Log provides a method for tracking a FSIO’s progress and accomplishments from one week to another by noting competencies demonstrated each week. Training objectives for the upcoming week can be established and communicated with the trainee to clarify expectations and assist in focusing on specific competencies. This weekly training log can also be an important means of sharing information in situations where multiple trainers are working with a FSIO.
Joint Field Training Inspections – Establishment Log

The optional Joint Field Training Inspections – Establishment Log provides a method of tracking the number and type of establishments within which training has been conducted. A “Risk Category” column provides a quick reference as to the complexity of food preparation processes that have been included in the FSIO’s training and assists in determining what types of establishments to include in future field training inspections.

In addition, the establishment log provides a quick method for distinguishing trainer-led (demonstration) inspections from those that are trainee-led. An “X” is placed in the appropriate column to denote the type of field training inspection conducted. In the above graphic, the first 9 inspections were trainer-led, and the trainee first took the lead during joint field training inspections when Establishment #10 was visited.

Supplemental Field Training Worksheet for Trainers

Some jurisdictions who field tested the CFP training process requested optional Field Training Worksheets that trainers could use during trainee-led inspections to record observations that will aid in determining when a competency has been consistently demonstrated. The Field Training Worksheet also provides a means for identifying competencies that the trainee has not had the opportunity to successfully demonstrate.
Two versions of such a worksheet have been developed:

- **Field Training Worksheet**, a distilled version of the *CFP Training Plan and Log*
- **Abbreviated Field Training Worksheet**, a version listing only the performance elements.

Either version can be used in conjunction with the *CFP Training Plan and Log* to track a FSIO’s progress and accomplishments. The manager of the regulatory retail food protection program has the discretion of determining whether to use a *Field Training Worksheet* as part of their training process.

**Field Training Worksheet**

The *Field Training Worksheet*, included as Attachment B, is a distilled version of the *CFP Training Plan and Log*.

In this worksheet, all **performance element competencies** for which the most appropriate training method is “Joint Field Training Inspections – JFT” have been included.

For each of the competencies included in the jurisdiction’s *Field Training Worksheet*, the trainer:
• Determines whether or not there was an opportunity to demonstrate a competency; and
• Determines when a FSIO consistently demonstrates a competency correctly.

The Field Training Worksheet contains two major columns for recording observations:

- **Opportunity occurred for FSIO to demonstrate competency during field training inspection.**

  *YES* – An “X” is placed in this box if the trainee had an opportunity to successfully demonstrate the listed competency during the inspection. In the graphic above, the trainee had opportunity to demonstrate competencies pertaining to “avoiding the use of acronyms/jargon” and “checking the person in charge’s understanding of information.”

  *NO* – An “X” is placed in this box if the inspection environment did not require or present an opportunity for the trainee to successfully demonstrate the competency. Using the graphic above, an opportunity did not occur during the field training for the trainee to demonstrate “the use of interpreters/drawings/demonstrations, etc., to overcome language or communication barriers.” If this pattern continues throughout the field training inspections, an alternative training method may need to be considered.
• **Competency demonstrated during field training inspections.**

  **YES** – An “X” is placed in this box if the trainee successfully demonstrates the competency during the inspection. When possible, a trainer should observe a trainee demonstrating a competency several times. In the graphic displayed on the previous page, the trainer has indicated that the trainee has successfully demonstrated the ability to avoid acronyms/jargon when providing explanations to food employees during inspections.

  **NO** – An “X” is placed in this box if the trainee has an opportunity to demonstrate a competency during the inspection but does not do so correctly or does not act correctly in the inspection situation. It is important to emphasize that a “NO” determination for the competency does **not in any way** denote or indicate that the trainee has failed. It is simply part of the continuous learning process and is intended to identify areas where additional training is needed. When a “NO” determination is made regarding a specific competency, the trainer should take immediate steps to review or demonstrate the correct procedure or protocol with the trainee. In the graphic on the previous page, the trainer has indicated that the trainee needs additional training related to communication techniques for determining the person in charge’s level of understanding for the information presented during the inspection.

**Comments** – The trainer can provide detailed descriptions of observations made during joint training inspections in the “comments” section at the bottom of each performance element table, as well as additional training provided and future training objectives. In the example used for this discussion, the trainer has provided the following statements in the comment section:

> Reviewed techniques with the FSIO for asking open-ended questions when checking food employees understanding of information presented during the inspection. Discussed the importance of demonstrating, when possible, a specific procedure when it appears that management or food employees may not clearly understand a verbal explanation. For example, setting up the wash, rinse, and sanitize bins of a 3 compartment sink, then checking for understanding by having the food employees demonstrate the procedure. I will continue to work with the FSIO on this competency during the field training inspections scheduled for next week. (Mary Jones)

The *Field Training Worksheet* is a method for trainers to organize and record their notes from observations made of the trainee demonstrating competencies during training inspections.

As indicated in the graphic at the top of the next page, information from the *Field Training Worksheet* can be transferred to the *CFP Training Plan and Log* when a trainee has demonstrated a competency.
In this example, the trainee has demonstrated the first 3 competencies during “Joint Field Training Inspections – JFT.” The trainer, “Mary Jones” has recorded the date the trainee demonstrated each of the competencies in the CFP Training Plan and Log.
### Abbreviated Field Training Worksheet

The *Abbreviated Field Training Worksheet*, included as Attachment C, lists only the performance elements and is an even shorter version of the worksheet just discussed.

The use of this worksheet is intended for experienced trainers with a strong working knowledge of the competencies that FSIOs are expected to successfully demonstrate during field training inspections.

![Worksheet Image](image-url)

The worksheet includes sections for the establishment name, address, and inspection details. It also lists performance elements with options for yes or no, indicating whether the competency was demonstrated during field training inspections.
As an example, the abbreviated worksheet segment that lists the performance elements pertaining to oral communication is displayed in the graphic below. All six (6) of the performance elements for the “Oral Communication” inspection area are included. None of the competencies (job tasks), however, are listed for these performance elements. The two column format and comment section for documenting training observations is the same as for the longer Field Training Worksheet.

A reference list of example competencies for each performance element is provided at the end of the Abbreviated Field Training Worksheet for trainers to use during trainee-led inspections. The graphic that appears at the top of the next page displays competencies for some of the oral communication performance elements used as examples throughout this discussion.
It is important to keep in mind that using either of the worksheets is a determination to be made by the regulatory jurisdiction’s management. These documents have been included with this manual to support a jurisdiction’s effort to ensure a FSIO has received training and demonstrated all competencies needed to conduct effective independent food safety inspections.

**Using a Supplemental Field Training Worksheet**

In determining how to integrate a supplemental *Field Training Worksheet* into the training process, two approaches are generally considered:

- Using a worksheet during every trainee-led inspection; or
- Using a worksheet at set interval points during the trainee-led field training process.

These two approaches are only examples and are not intended to restrict the use of other formats by a jurisdiction. The following summary of strengths and challenges for each approach provides some guidance to regulatory retail food protection programs on ways to integrate a *Field Training Worksheet* into their training process.
**Approach #1: During every inspection led by a trainee**

**Strengths:** This approach provides continual feedback to the trainee on the competencies they have demonstrated and those for which more focused training is still needed. In the early stages of the training process, the *Field Training Worksheet* can be an important tool in determining whether more demonstration (trainer-led) inspections need to be performed. In later stages, the worksheet will help focus training on competencies the trainee is having difficulty performing.

In addition, using the *Field Training Worksheet* with every inspection will provide important feedback on the jurisdiction’s training and orientation program. The *Field Training Worksheet* can assist trainers with identifying potential gaps in the orientation/training program, coursework requirements, or administrative materials used to prepare staff to take the lead during field training inspections.

**Challenges:** Using the *Field Training Worksheet* during every inspection may cause trainers to focus too much on completing the form rather than on the training of the FSIO. The *Field Training Worksheet* is simply a tool to assist the trainer to track competencies as demonstrated during inspections led by a trainee.

Competing program priorities and limited resources may impede a jurisdiction’s ability to use a *Field Training Worksheet* during every trainee-led inspection. Jurisdictions will need to track the training process and communicate results effectively with the time commitment associated with completing forms used to support the training process.

**Approach #2: At set interval points**

**Strengths:** A trainer may choose to use the *Field Training Worksheet* at set interval points during trainee-led inspections. For example, a *Field Training Worksheet* could be completed after every fifth inspection (i.e., inspections 5, 10, 15, 20 and 25). This process provides set checkpoints for determining when training observations indicate the trainee has successfully demonstrated a competency.

The trainer can set achievable objectives for the trainee using the interval process, focusing on a few competencies at a time. Trainee-led inspections conducted between each use of the *Field Training Worksheet* can enhance a trainee’s knowledge and skills for competencies or provide additional training when needed.

**Challenges:** The interval process requires trainers to work from notes or inspection reports to determine competencies that have been observed and/or demonstrated over a period of time. The primary objective during trainee-led inspections is for the trainer to observe a consistent pattern of behavior in the trainee’s ability to successfully demonstrate a competency. Depending on how frequently a competency is observed, an interval approach could reveal fluctuations in a trainee’s ability to demonstrate a job task. The interval process
may not provide as structured a method for providing continuous feedback to the trainee as that provided if the Field Training Worksheet is used during every trainee-led inspection.
The “Joint Field Training Inspection – Establishment Log” can be an important tool for documenting the use of the Field Training Worksheet when using the interval approach. The establishment log provides a means to note the point in time when the worksheet was completed and the timeframe covered during the training period. In the illustration below, the trainer completed a Field Training Worksheet after the inspection of Establishment #15 and Establishment #20.

In the above example, the trainee-led inspections began with Establishment #10. The first Field Training Worksheet was completed after Establishment #15 and contains a collective set of observations of the trainee demonstrating competencies for Establishments #10 through #15, encompassing the period, April 9 through 12, 2007.

In this example, the jurisdiction’s training staff completes a Field Training Worksheet using establishment inspection intervals of five. The second Field Training Worksheet was completed after Establishment #20 and the trainer’s observations again represented observations over a cumulative period of time. The notes from one Field Training Worksheet build on observations made on previous documents. The observations on the second Field Training Worksheet, therefore, represents the period when the trainee began taking the lead during the training process on April 9, 2007 until the date the second Field Training Worksheet was completed on April 20, 2007.
The Field Training Worksheet is not intended to be used as a checklist during inspections nor should it drive the inspection approach used by the trainee. Continuous instruction is encouraged during each of the inspections led by a trainee. Trainers should take the opportunity to demonstrate and/or review correct procedures and skills for competencies that are not understood or properly performed by the trainee during each inspection.

**REVIEWING FIELD TRAINING**

Consistent and on-going feedback regarding inspection competencies is the cornerstone of the FSIO field training process presented in this manual. The trainer should share his/her observations with the trainee during each of the inspections. Discussions should include competencies successfully demonstrated by the trainee, as well as those where additional training is needed. Trainers should provide continuous positive reinforcement for competencies correctly demonstrated by the trainee.

For areas where additional training is needed, the trainer should demonstrate the competency to the trainee during joint inspections and determine if other training methods may benefit the trainee’s understanding and application of the competency. Field training objectives should continually be reviewed with the trainee and updated as needed during the field training process.

Equally as important, the field training process provides critical feedback to managers and trainers on the effectiveness of their retail food training and orientation programs. Competencies (job tasks) that are not consistently performed well by trainees may be an indication that the regulatory jurisdiction has significant gaps in their training program, coursework, or materials used to prepare staff for field inspections. Field training, where observations are made of a trainee demonstrating specific competencies, provides a framework for evaluating and enhancing the effectiveness of a jurisdiction’s existing regulatory retail food training programs.
DOCUMENTATION OF COMPLETION

The trainer’s and trainee’s signature in the header of the *CFP Training Plan and Log* indicates they both concur that all prerequisite coursework has been completed and competencies listed on the jurisdiction’s training plan have been demonstrated.

When a FSIO has completed all the prerequisite coursework and demonstrated all the competencies identified in the jurisdiction’s training plan, the retail food protection program managers has a basis for determining the FSIO’s readiness to conduct independent food safety inspections. The completed and signed *CFP Training Plan and Log* should be placed in the FSIO’s training file and a copy of the completed document given to the FSIO for their records.
VIII. Continuing Training

The prerequisite coursework, training plan, and field training inspection process presented in this manual are based on the minimum performance competencies a FSIO should be able to successfully demonstrate prior to conducting independent food safety inspections. This process should be considered but a first step in the development of inspection staff in a regulatory retail food protection program. Additional training opportunities and standardization should be provided on a continual basis to advance the development of a FSIO’s ability to implement a risk-based inspection approach and communicate food safety principles to the regulated industry and the public.

Additional Food Safety Courses

Over 100 food safety related courses are accessible from the FDA ORA U web site. The Conference for Food Protection has worked with FDA to identify courses that a FSIO should complete within the first 18 months of hire or assignment to the retail food program. It is expected that most FSIOs would complete this second phase of coursework after they have started to conduct independent inspections.

This additional coursework is part of the criteria contained in Standard 2 – Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards and includes:

**MICROBIOLOGY**

**Food Microbiological Control (series):**
- 7C. Control by Retorting (90) MIC10
- 8. Technology-Based Food Processes (120) MIC11
- 9. Natural Toxins (90) MIC12

**HACCP**

**Basics of HACCP (series):**
- 1. Overview of HACCP (60) FDA16
- 2. Prerequisite Programs & Preliminary Steps (60) FDA 17
- 3. The Principles (60) FDA18

**EPIDEMIOLOGY**

**Foodborne Illness Investigation (series):**
- 1. Collecting Surveillance Data (90) F101
- 2. Beginning the Investigation (90) F102
- 3. Expanding the Investigation (90) F103
- 4. Conducting a Food Hazard Review (90) F104
- 5. Epidemiological Statistics (90) F105
- 6. Final Report (30) F106

*Note: the estimated amount of time (in minutes) to complete each module is indicated in parenthesis followed by the course number.*

The jurisdiction should also conduct or provide an opportunity for FSIOs to attend an Application of the Basics of Inspection/Investigations Course. This course addresses all retail food program inspection areas in which a FSIO should receive training and contains a practicum that provides an opportunity to demonstrate inspection techniques and procedures. The Application Course provides an important confirmation that retail food safety program training objectives have been achieved.

A fully developed Application Course is available on CD through FDA’s Division of Human Resource Development’s lending library. A jurisdiction’s trainer can conduct their own Application Course using these materials or develop one that addresses at least 80% of the learning objectives and exercises contained in the course. In addition, the Association of Food and Drug Officials (AFDO) at www.afdo.org/ has, upon request,
conducted the course for state and local retail food protection programs.

**Standardization**
Managers of regulatory retail food protection programs are encouraged to implement a standardization process similar to what is included in “FDA’s Standardization Procedures” for FSIOs to complete within 18 months of hire. A copy of FDA’s standardization process can be obtained from the following web link:

[www.cfsan.fda.gov/~ear/rfi-toc.html](http://www.cfsan.fda.gov/~ear/rfi-toc.html).
NOTE: The CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers (FSIOs) should be reviewed prior to using the CFP Training Plan and Log. The manual provides jurisdictions with information that will be helpful in customizing a FSIO training plan and implementing a training process that meets the specific needs of the jurisdiction.

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<th>Start Date of the Training Process:</th>
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<tr>
<td>Trainer’s Name (if multiple trainers list all):</td>
<td>Trainer’s Agency:</td>
</tr>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
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</tr>
</tbody>
</table>

Signatures below indicate FSIO has completed all curriculum and field training elements and is ready to conduct independent retail food and/or foodservice inspections

Completion Date of Pre-requisite Coursework:

OPTION 1: ☐  or  OPTION 2: ☐

Completion Date - (Performance Elements & Competencies):

Food Safety Inspection Officer’s (FSIO) Signature:  

Trainer’s or Food Program Manager’s Signature:  

The CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers includes two components. One includes completion of prerequisite coursework outlined in Program Standard 2 – Trained Regulatory Staff, FDA Voluntary National Retail Food Regulatory Program Standards. The second component focuses on the FSIO’s ability to demonstrate performance element competencies that are needed to conduct effective regulatory food safety inspections. A FSIO should successfully complete both components prior to conducting independent inspections.

PREREQUISITE COURSEWORK

The CFP Field Training Manual outlines the courses included in the prerequisite curriculum and provides options for completing this component of the CFP training process. A jurisdiction can begin the field training process with FSIOs while they are still in the process of completing their prerequisite coursework. The jurisdiction’s trainers and/or food program managers are given the discretion to determine the appropriate time frame within which FSIOs are to complete prerequisite course work during the field training process.
TRAINING METHODS

The CFP Training Plan and Log is designed to incorporate a variety of training methods appropriate for each of the performance element competencies. A sufficient number of field training inspections should be conducted to provide an opportunity for the FSIO to successfully demonstrate the applicable competencies. The jurisdiction’s trainer can use the table below to identify the training methods that will be used.

<table>
<thead>
<tr>
<th>JURISDICTION'S TRAINING METHODS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code</td>
</tr>
</tbody>
</table>

INSPECTION TRAINING AREAS

The CFP Training Plan and Log is divided into six (6) inspection training areas:

I. Pre-Inspection
II. Inspection Observations and Performance
III. Oral Communication
IV. Written Communication
V. Professionalism
VI. Additional Inspection Areas (Jurisdictions can add performance elements and competencies not contained in the CFP Training Plan and Log)

The Conference for Food Protection (CFP) has conducted a national research study and identified the minimum performance elements and competencies for each of the specified inspection training areas needed to perform regulatory retail safety inspections. The CFP Training Plan and Log contains a national model that regulatory retail food protection programs can readily integrate into their existing field training of Food Safety Inspection Officers (FSIOs).

The CFP Training Plan lists the basic performance elements (in BOLD font in the shaded areas of the Worksheet). Under each performance element is a list of competencies provided as examples of job tasks a jurisdiction should ensure the FSIO receives training on in order to perform their job responsibilities effectively. The jurisdiction’s trainer should identify those performance element competencies that are applicable to the FSIO’s job responsibilities within their jurisdiction. A small box appears adjacent to each of the performance elements and competencies on the worksheet. If the performance element and/or competency is applicable to the jurisdiction, it is to be checked and included as part of the training process.
## INSPECTION TRAINING AREAS

### I. Pre-Inspection

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee's Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Has required equipment and forms to conduct inspection.</td>
<td>Training Method</td>
<td>Date Demonstrated By the Trainee</td>
<td>Trainee's Initials</td>
</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Necessary inspection forms and administrative materials.
- Lab coat or equivalent protection to cover street clothes.
- Head cover: baseball cap; hair net; or equivalent.
- Calibrated thermocouple temperature measuring device.
- Maximum registering thermometer or temperature sensitive tapes for verifying hot water warewashing final rinse temperature.
- Chemical test kits for chlorine, iodophor, and quaternary ammonia sanitizers.
- Flashlight.
- Alcohol swabs.

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ____________________________  Trainee’s Initials: ____________________________  Trainer’s Signature: ____________________________

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Reviews establishment file for previous inspection report, complaints on file, and if applicable, required HACCP Plans or documents supporting the issuance of a variance by the agency.</td>
<td>Training Method</td>
<td>Date Demonstrated By the Trainee</td>
<td>Trainee’s Initials</td>
</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Reviewed previous inspection report noting documented out of compliance observations.
- Reviewed establishment file for complaint reports.
- Reviewed establishment file for documentation indicating a need for a HACCP Plan.
- Reviewed establishment file for documentation of food production or processes operating under a variance issued by the jurisdiction.

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ____________________________  Trainee’s Initials: ____________________________  Trainer’s Signature: ____________________________
## II. Inspection Observations and Performance

<table>
<thead>
<tr>
<th>1. Provides identification as a regulatory official to person in charge, confirming agency authority for inspection, and stating the purpose of visit.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Verbally provided name and agency to the person in charge.
- Presented regulatory identification or business card.
- Stated the purpose of the visit.
- Requests and confirmed permission to conduct inspection from the person in charge prior to initiating the inspection.

**ADDITIONAL (Jurisdiction specific competencies)**

- 
- 
- 

Comments:

<table>
<thead>
<tr>
<th>Trainee has demonstrated acceptable performance for all competencies listed</th>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>2. Has knowledge of jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Verified the correct critical limit and or standard specified in the jurisdiction’s rules/regulations to the observation made.
- Correctly cited the rule/regulation for each out of compliance observation.

**ADDITIONAL (Jurisdiction specific competencies)**

- 
- 
- 

Comments:

<table>
<thead>
<tr>
<th>Trainee has demonstrated acceptable performance for all competencies listed</th>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
</tr>
</thead>
</table>
### II. Inspection Observations and Performance (continued)

<table>
<thead>
<tr>
<th>3. Uses 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.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
</table>

 *(Training method and selected competencies for this performance element are to be indicated below)*

- ✔ Verified Demonstration of Knowledge of the person in charge.
- ✔ Verified approved food sources (e.g., food from regulated food processing plants; shellfish documentation; game animal processing; parasite destruction for certain species of fish intended for raw consumption; receiving temperatures).
- ✔ Verified food safety practices for preventing cross-contamination of ready-to-eat food.
- ✔ Verified food contact surfaces are clean and sanitized, protected from contamination from soiled cutting boards, utensils, aprons, etc., or raw animal foods.
- ✔ Verified the restriction or exclusion of ill employees.
- ✔ Verified no bare hand contact with ready-to-eat foods (or use of a pre-approved, alternative procedure).
- ✔ Verified employee handwashing.
- ✔ Verified cold holding temperatures of foods requiring time/temperature control for safety (TCS food), or when necessary, verified that procedures are in place to use time alone to control bacterial growth and toxin production.
- ✔ Verified date marking of ready-to-eat foods TCS food held for more than 24 hours.
- ✔ Verified cooking temperatures to destroy bacteria and parasites.
- ✔ Verified hot holding temperatures of TCS food or when necessary, that procedures were in place to use time alone to prevent the outgrowth of spore-forming bacteria.
- ✔ Verified cooling temperatures of TCS food to prevent the outgrowth of spore-forming or toxin-forming bacteria.
- ✔ Verified reheating temperatures of TCS food for hot holding.
- ✔ Verified the availability of a consumer advisory for foods of animal origin served raw or undercooked.
- ✔ Identified food processes and/or procedures that require a HACCP Plan per the jurisdiction’s regulations.

**ADDITIONAL (Jurisdiction specific competencies)**

- ✔

- ✔

- ✔

**Comments:**

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| Trainee has demonstrated acceptable performance for all competencies listed |
|---|---|
| Date: | Trainee’s Initials: | Trainer’s Signature: |
### II. Inspection Observations and Performance (continued)

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>Obtains immediate corrective action for out of compliance employee practices and management procedures (listed in Item 3 above) essential to the safe storage, preparation, and service of food.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- [ ] Notified the person in charge/employee(s) of the out of compliance observations.
- [ ] Reviewed corrective actions with the person in charge/employee(s).
- [ ] Observed the person in charge/employee(s) immediately take corrective action for out of compliance observations (e.g., movement of food to ensure product temperature or prevent contamination; reconditioning food; restriction/exclusion of ill employees; discarding of food product) in accordance with local jurisdiction’s procedures.
- [ ] Identified conditions requiring issuance of an embargo/stop sale/food destruction order per jurisdiction’s administrative procedures.

**ADDITIONAL (Jurisdiction specific competencies)**

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
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<tbody>
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</table>

**Comments:**

Trainee has demonstrated acceptable performance for all competencies listed

Date: | Trainee’s Initials: | Trainer’s Signature:

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Correctly assesses compliance status of other regulations (not included in Item 4 – Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- [ ] Correctly assessed compliance status of other regulations (not included in Item 4 above - Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.

**ADDITIONAL (Jurisdiction specific competencies)**

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
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</tbody>
</table>

**Comments:**

Trainee has demonstrated acceptable performance for all competencies listed

Date: | Trainee's Initials: | Trainer’s Signature:

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6
### II. Inspection Observations and Performance (continued)

<table>
<thead>
<tr>
<th></th>
<th>6. Verifies correction of out of compliance observations identified during previous inspection.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Training method and selected competencies for this performance element are to be indicated below)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Verified correction of out of compliance observations identified during previous inspection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ ADDITIONAL (Jurisdiction specific competencies)</td>
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<tr>
<td>Comments:</td>
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</tbody>
</table>

**Trainee has demonstrated acceptable performance for all competencies listed**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>7. Correctly uses inspection equipment during joint inspections.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Training method and selected competencies for this performance element are to be indicated below)</td>
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<tr>
<td></td>
<td>□ Used temperature measuring devices/probes in accordance with manufacturer’s instructions.</td>
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<tr>
<td></td>
<td>□ Cleaned and sanitized (alcohol swabs) temperature measurement probes to prevent food contamination.</td>
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<td></td>
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</tr>
<tr>
<td></td>
<td>□ Used infrared thermometer in accordance with manufacturer’s instructions. Verified any out of compliance product temperatures registered on the infrared with a thermocouple.</td>
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<tr>
<td></td>
<td>□ Used maximum registering thermometer or heat sensitive tapes in accordance with manufacturer’s instructions to verify final rinse dishwasher temperature.</td>
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<tr>
<td></td>
<td>□ Used chemical test strips in accordance with manufacturer’s instructions to measure sanitizer concentrations in manual and mechanical dishwashing operations; wiping cloth solutions; and spray bottle applicators.</td>
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<tr>
<td></td>
<td>□ Used flashlight to assess observations in areas with no or low light.</td>
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<tr>
<td></td>
<td>□ Photographs taken support regulatory findings or conditions observed.</td>
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<tr>
<td></td>
<td>□ ADDITIONAL (Jurisdiction specific competencies)</td>
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<td></td>
<td>□</td>
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<tr>
<td>Comments:</td>
<td></td>
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</tbody>
</table>

**Trainee has demonstrated acceptable performance for all competencies listed**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
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<tbody>
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<td></td>
<td></td>
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</tbody>
</table>
### III. Oral Communication

<table>
<thead>
<tr>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td></td>
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</tr>
<tr>
<td></td>
<td>Asked open ended questions (questions that can not be answered with “yes” or “no”).</td>
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<tr>
<td></td>
<td>Did not interrupt when the person in charge/employee was speaking.</td>
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<tr>
<td></td>
<td>Paraphrased/summarized statements from the person in charge to confirm understanding.</td>
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<td></td>
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<tr>
<td></td>
<td>ADDITIONAL (Jurisdiction specific competencies)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Trainee has demonstrated acceptable performance for all competencies listed</td>
<td>Date:</td>
<td>Trainee’s Initials:</td>
<td>Trainer’s Signature:</td>
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<tr>
<td>2.</td>
<td></td>
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<tr>
<td></td>
<td>Answered inspection-related questions accurately.</td>
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<td></td>
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<tr>
<td></td>
<td>Admitted not knowing the answer to a question and arranges to contact the establishment with the answer.</td>
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<tr>
<td></td>
<td>Used trainer as a resource when unsure of an answer.</td>
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</tr>
<tr>
<td></td>
<td>ADDITIONAL (Jurisdiction specific competencies)</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Trainee has demonstrated acceptable performance for all competencies listed</td>
<td>Date:</td>
<td>Trainee’s Initials:</td>
<td>Trainer’s Signature:</td>
</tr>
</tbody>
</table>
### III. Oral Communication (continued)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Uses available means (e.g., interpreter, drawings, diagrams demonstrations, international food safety icons) to overcome language or communication barriers.</td>
<td></td>
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<td></td>
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<td></td>
<td>(Training method and selected competencies for this performance element are to be indicated below)</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>□ Avoided using jargon and acronyms, without explanation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Used interpreter, drawings, demonstrations, or diagrams to overcome language or communication barriers.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td>□ Checked the person in charge’s understanding of information/instructions by asking the operator to paraphrase or demonstrate the information/instructions.</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>ADDITIONAL (Jurisdiction specific competencies)</strong></td>
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<td></td>
<td></td>
<td>□</td>
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</tbody>
</table>

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ___________  |  Trainee’s Initials:  |  Trainer’s Signature:  |

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Follows jurisdiction’s policy in regard to disclosure of confidential information.</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>(Training method and selected competencies for this performance element are to be indicated below)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>□ Explained confidentiality laws, policies and procedures to the person in charge when necessary. (If the need to explain confidential laws did not occur during the joint field training inspections, the FSIO explained confidentiality laws, policies and procedures to the trainer).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Applied the confidentiality policy per the jurisdictional requirements (e.g., FSIO did not reveal confidential information to the operator during the inspection).</td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td><strong>ADDITIONAL (Jurisdiction specific competencies)</strong></td>
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<td></td>
<td></td>
<td>□</td>
<td></td>
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</tr>
</tbody>
</table>

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ___________  |  Trainee’s Initials:  |  Trainer’s Signature:  |
### III. Oral Communication (continued)

5. Uses effective communication and conflict resolution techniques to overcome inspection barriers.

<table>
<thead>
<tr>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Identified challenges faced by the person in charge and offered possible solution(s).
- Did not become argumentative (e.g., remained calm and focused).
- Removed himself/herself from a confrontation or threat that may impact personal safety.
- ADDITIONAL (Jurisdiction specific competencies)

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

<table>
<thead>
<tr>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

6. Conducts exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.

<table>
<thead>
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<th>Training Method</th>
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(Training method and selected competencies for this performance element are to be indicated below)

- Explained the public health significance of the inspection observations.
- Reviewed all findings with the person in charge with emphasis on contributing factors to foodborne illness and Food Code Interventions (listed in Section II, Item 3).
- Used foodborne illness data to highlight contributing factors.
- Answered all questions or concerns pertaining to items on the inspection report.
- Provided contact information to the person in charge for follow up questions or additional guidance.
- ADDITIONAL (Jurisdiction specific competencies)

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

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IV. Written Communication

<p>| 1. Completes inspection form per jurisdiction’s administrative procedures (e.g., observations; corrective actions; public health reason; applicable code reference; compliance dates). |</p>
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(Training method and selected competencies for this performance element are to be indicated below)

- Used correct inspection form.
- Completed a legible report.
- Accurately documented observations made during inspection.
- Completed inspection form in accordance with jurisdiction’s administrative procedures.
- Cited correct code provisions/rules/regulations.
- Documented immediate corrective action for out-of-compliance foodborne illness contributing factors and Food Code Interventions (listed in Section II, Item 3).
- Documented time frames for correcting each out of compliance observation.

ADDITIONAL (Jurisdiction specific competencies)

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: Trainee’s Initials: Trainer’s Signature:

<p>| 2. Includes 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). |</p>
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(Training method and selected competencies for this performance element are to be indicated below)

- Referenced attached documents in inspection report.
- Referenced documents are legible.
- Referenced documents are accurate and reflect observations made during the inspection.
- Attached referenced document(s) to the inspection report per jurisdiction’s administrative procedures.

ADDITIONAL (Jurisdiction specific competencies)

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: Trainee’s Initials: Trainer’s Signature:
### IV. Written Communication (continued)

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<tr>
<th></th>
<th>3. Presents inspection report, and when necessary cross-referenced documents, to person in charge.</th>
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<td>Presented complete inspection report, with referenced documents when necessary, to person in charge during exit interview.</td>
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<td>Followed jurisdiction’s administrative procedures for delivering written inspection report.</td>
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<td>Obtained signature of person in charge on inspection report.</td>
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**Comments:**

**Trainee has demonstrated acceptable performance for all competencies listed**

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Voluntary National Retail Food Regulatory Program Standards – April 2009
Appendix B-2: Attachment A – CFP Training Plan and Log – DRAFT 1-7-2008
## V. Professionalism

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## V. Professionalism (continued)

<table>
<thead>
<tr>
<th>3. Only reports substantiated findings as violations.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
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</thead>
<tbody>
<tr>
<td>(Training method and selected competencies for this performance element are to be indicated below)</td>
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<tr>
<td>☐ Only reported findings that were directly observed or substantiated in accordance with jurisdiction’s policies and procedures.</td>
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<tr>
<td>☐ Findings are supported by fact (e.g., are NOT based on hunch or suspicion; are witnessed, are investigated).</td>
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<td>☐ Did NOT note violations without visiting the establishment.</td>
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<td>☐ Did NOT exaggerate details related to findings to support report conclusions.</td>
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<td>☐ Did NOT modify report after leaving the establishment except as allowed by jurisdiction’s administrative procedures.</td>
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<tr>
<td>☐ ADDITIONAL (Jurisdiction specific competencies)</td>
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</table>

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

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<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
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VI. Additional Performance Elements – Jurisdiction Specific

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<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
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</table>

(Training method and selected competencies for this performance element are to be indicated below)

- Used proper hygiene before and during sample process (e.g., washed hands prior to sampling; did not touch sample container opening, inside lip, inside cap or did not blow into the bag to open it up.)
- Used sample collection method specified by the jurisdiction (e.g., original container if available; collection of a representative sample from a large quantity or container).
- Used sterile, leak-proof lidded container or zip-lock type bags.
- Used a separate sterile utensil to collect each different sample item.
- Labeled all containers with required information (e.g., date, time, location, product name, FSIO initials) with corresponding information noted on inspection report or laboratory forms.
- Initiated written chain of custody including use of evidence seal.
- Stored and transported sample in a clean, refrigerated unit (e.g., ice chest with ice) within the prescribed time period.
- Maintained sample refrigerated or frozen until transport or shipping to laboratory.
- Sample packed and shipped in sterile, leak-proof, insulated container with refrigerant (wet or dry ice) via the most rapid and convenient means available (e.g., courier, bus, express mail).

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

<table>
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<tr>
<th>Date:</th>
<th>Trainee’s Initials:</th>
<th>Trainer’s Signature:</th>
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16
VI. Additional Performance Elements – Jurisdiction Specific (continued)

<table>
<thead>
<tr>
<th>2. Uses an aseptic water sample collection method consistent with criteria established by laboratory serving jurisdiction.</th>
<th>Training Method</th>
<th>Date Demonstrated By the Trainee</th>
<th>Trainee’s Initials</th>
<th>Training Officer</th>
</tr>
</thead>
</table>

*(Training method and selected competencies for this performance element are to be indicated below)*

- Used proper hygiene before and during sample process (e.g., washed hands prior to sampling; did not touch sample container opening, inside lip, inside cap or did not blow into the bag to open it up.)
- Sample taken at site closest to source of water (prior to any treatment) if possible, or at a site (post treatment) per jurisdiction’s procedures.
- Sample taken from operational fixed type faucet – no swing type or leaking faucets.
- Removed aerator (if present) from faucet prior to sampling.
- Disinfected faucet with bleach or flame.
- Ran water through faucet for several minutes to clear line.
- Used a sterile, leak-proof lidded container, “whirl-pak” or zipper-lock type bag.
- Sample taken from midstream of the flowing faucet.
- Labeled all containers with required information (e.g., date, time, location, product name, FSIO initials) with corresponding information noted on inspection report or laboratory forms.
- Initiated written chain of custody including use of evidence seal.
- Stored and transported sample in a clean, refrigerated unit (e.g., ice chest with ice) within the prescribed time period.
- Maintained sample refrigerated until transport or shipping to the laboratory.
- Sample packed and shipped in sterile, leak-proof, insulated container with refrigerant via the most rapid and convenient means available (e.g., courier, bus, express mail).

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:

| Trainee has demonstrated acceptable performance for all competencies listed |
|---|---|---|
| Date: | Trainee’s Initials: | Trainer’s Signature: |
### VI. Additional Performance Elements – Jurisdiction Specific (continued)

<table>
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<tr>
<th>Training Method</th>
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**(Training method and selected competencies for this performance element are to be indicated below)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ___________  
Trainee’s Initials: ___________  
Trainer’s Signature: ___________

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**(Training method and selected competencies for this performance element are to be indicated below)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ___________  
Trainee’s Initials: ___________  
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**(Training method and selected competencies for this performance element are to be indicated below)**

Comments:

Trainee has demonstrated acceptable performance for all competencies listed

Date: ___________  
Trainee’s Initials: ___________  
Trainer’s Signature: ___________
# OPTIONAL - FSIO TRAINING LOG

**Trainee’s Name: __________________**  
Week: **1** Date Ending: ____

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<th>Planned Training Areas for Upcoming Week</th>
<th>Additional Comments</th>
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**Trainee’s Initials: __________________**  
**Trainer’s Signature:**

**Week: 2** Date Ending: ____

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**Trainee’s Initials: __________________**  
**Trainer’s Signature:**

**Week: 3** Date Ending: ____

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<th>Additional Comments</th>
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**Trainee’s Initials: __________________**  
**Trainer’s Signature:**
OPTIONAL - FSIO TRAINING LOG

Trainee's Name: _____________________

Week: 4 Date Ending: ______

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Trainee’s Initials: 
Trainer’s Signature: 

Week: 5 Date Ending: ______

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Trainee’s Initials: 
Trainer’s Signature: 

Week: 6 Date Ending: ______

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Trainee’s Initials: 
Trainer’s Signature:
## OPTIONAL - FSIO TRAINING LOG

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Trainee’s Initials: ___________________  Trainer’s Signature: _________________

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Trainee’s Initials: ___________________  Trainer’s Signature: _________________

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Trainee’s Initials: ___________________  Trainer’s Signature: _________________
## OPTIONAL
### JOINT FIELD TRAINING INSPECTIONS - ESTABLISHMENT LOG

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<th>FSIO-led (Trainee-led) Inspection</th>
<th>Field Training Worksheet Completed</th>
<th>Training Period</th>
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## OPTIONAL

### JOINT FIELD TRAINING INSPECTIONS – ESTABLISHMENT LOG

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</tbody>
</table>
Conference for Food Protection

Attachment B: FIELD TRAINING WORKSHEET

(Performance Elements and Competencies)

Retail Food, Restaurant, and Institutional Foodservice

Food Safety Inspection Officer

NOTE: The CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers (FSIOs) should be reviewed prior to using the Field Training Worksheet. The manual provides jurisdictions with information that will be helpful in customizing the Field Training Worksheet and implementing a training process that meets the specific needs of the jurisdiction.

<table>
<thead>
<tr>
<th>Establishment Name:</th>
<th>Establishment Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Safety Inspection Officer’s (FSIO) Name:</td>
<td>Food Safety Inspection Officer’s (FSIO) Agency:</td>
</tr>
<tr>
<td>Trainer’s Name:</td>
<td>Trainer’s Agency:</td>
</tr>
<tr>
<td>Date of Inspection led by Trainee:</td>
<td>Time IN:</td>
</tr>
</tbody>
</table>

The Conference for Food Protection (CFP) conducted a national research study and identified the basic minimum competencies needed to perform effective regulatory food safety inspections. The Field Training Worksheet has been designed as a trainer’s tool to be used in conjunction with the CFP Training Plan and Log. It provides a method for tracking a FSIO’s progress and accomplishments in successfully demonstrating performance element competencies during field training inspections.

There is no single correct way to use the worksheet. The CFP Field Training Manual provides examples of ways to incorporate the worksheet into existing retail food protection training programs.

The Field Training Worksheet lists the basic performance elements (in BOLD font in the shaded areas of the Worksheet). Under each performance element is a list of competencies provided as examples of job tasks that a jurisdiction should ensure a FSIO has received adequate training on in order to perform their job responsibilities effectively. The jurisdiction’s trainer should identify those performance elements and/or competencies that are applicable to the FSIOs job responsibilities within their jurisdiction. A small box appears adjacent to each of the performance element competencies on the worksheet; if the performance element and/or competency is applicable to the jurisdiction, it is to be checked and included as part of the training process.

Trainers should review with the FSIO the competencies that will be included as part of the field training inspections. FSIOs are expected to successfully demonstrate these minimum competencies correctly prior to conducting independent food safety inspections.
## I. Pre-Inspection

### 1. Has required equipment and forms to conduct inspection.

<table>
<thead>
<tr>
<th>Necessary inspection forms and administrative materials.</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab coat or equivalent protection to cover street clothes.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Head cover: baseball cap; hair net; or equivalent.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Calibrated thermocouple temperature measuring device.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Maximum registering thermometer or temperature sensitive tapes for verifying hot water warewashing final rinse temperature.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Chemical test kits for chlorine, iodophor, and quaternary ammonia sanitizers.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Flashlight.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Alcohol swabs.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Additional (Jurisdiction specific competencies)**

Comments: 

---

### 2. Reviews establishment file for previous inspection report, complaints on file, and if applicable, required HACCP Plans or documents supporting the issuance of a variance.

<table>
<thead>
<tr>
<th>Reviewed previous inspection report noting documented out of compliance observations</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewed establishment file for complaint reports.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Reviewed establishment file for documentation indicating a need for a HACCP Plan.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Reviewed establishment file for documentation of food production or processes operating under a variance issued by the jurisdiction.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Additional (Jurisdiction specific competencies)**

Comments: 

---
## II. Inspection Observations and Performance

<table>
<thead>
<tr>
<th></th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

### 1. Provides identification as a regulatory official to person in charge, confirming agency authority for inspection, and stating the purpose of visit.

- [ ] Verbal provided name and agency to the person in charge.
- [ ] Present regulatory identification or business card.
- [ ] Stated the purpose of the visit.
- [ ] Requests and confirmed permission to conduct inspection from the person in charge prior to initiating the inspection.

**ADDITIONAL (Jurisdiction specific competencies)**

**Comments:**

### 2. Has knowledge of jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.

- [ ] Verified the correct critical limit and or standard specified in the jurisdiction’s rules/regulations to the observation made.
- [ ] Correctly cited the rule/regulation for each out of compliance observation.

**ADDITIONAL (Jurisdiction specific competencies)**

**Comments:**
### II. Inspection Observations and Performance (continued)

<table>
<thead>
<tr>
<th></th>
<th>Uses 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.</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>☐</td>
<td>Verified Demonstration of Knowledge of the person in charge.</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified approved food sources (e.g., food from regulated food processing plants; shellfish documentation; game animal processing; parasite destruction for certain species of fish intended for raw consumption; receiving temperatures).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☐</td>
<td>Verified food safety practices for preventing cross-contamination of ready-to-eat food.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☐</td>
<td>Verified food contact surfaces are clean and sanitized, protected from contamination from soiled cutting boards, utensils, aprons, etc., or raw animal foods.</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified the restriction or exclusion of ill employees.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☐</td>
<td>Verified no bare hand contact with ready-to-eat foods (or use of a pre-approved, alternative procedure).</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified employee handwashing</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified cold holding temperatures of foods requiring time/temperature control for safety (TCS food), or when necessary, verified that procedures are in place to use time alone to control bacterial growth and toxin production.</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified date marking of ready-to-eat foods TCS food held for more than 24 hours.</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified cooking temperatures to destroy bacteria and parasites.</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified hot holding temperatures of TCS food or when necessary, that procedures were in place to use time alone to prevent the outgrowth of spore-forming bacteria.</td>
<td>☐</td>
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</tr>
<tr>
<td>☐</td>
<td>Verified cooling temperatures of TCS food to prevent the outgrowth of spore-forming or toxin-forming bacteria.</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified reheating temperatures of TCS food for hot holding.</td>
<td>☐</td>
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<tr>
<td>☐</td>
<td>Verified the availability of a consumer advisory for foods of animal origin served raw or undercooked.</td>
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<tr>
<td>☐</td>
<td>Identified food processes and/or procedures that require a HACCP Plan per the jurisdiction’s regulations.</td>
<td>☐</td>
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</table>

**ADDITIONAL (Jurisdiction specific competencies)**

<table>
<thead>
<tr>
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</table>

Comments:
## II. Inspection Observations and Performance (continued)

<table>
<thead>
<tr>
<th></th>
<th>4. Obtains immediate corrective action for out of compliance employee practices and management procedures (listed in Item 3 above) essential to the safe storage, preparation, and service of food</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Notified the person in charge/employee(s) of the out of compliance observations.</td>
<td>□ □</td>
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<tr>
<td></td>
<td>□ Reviewed corrective actions with the person in charge/employee(s).</td>
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<tr>
<td></td>
<td>□ Observed the person in charge/employee(s) immediately take corrective action for out of compliance observations (e.g., movement of food to ensure product temperature or prevent contamination; reconditioning food; restriction/exclusion of ill employees; discarding of food product) in accordance with local jurisdiction’s procedures.</td>
<td>□ □</td>
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<tr>
<td></td>
<td>□ Identified conditions requiring issuance of an embargo/stop sale/food destruction order per jurisdiction’s administrative procedures.</td>
<td>□ □</td>
<td>□ □</td>
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<tr>
<td></td>
<td>ADDITIONAL (Jurisdiction specific competencies)</td>
<td>□ □</td>
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**Comments:**

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<thead>
<tr>
<th></th>
<th>5. Correctly assesses compliance status of other regulations (not included in Item 4 – Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Correctly assessed compliance status of other regulations (not included in Item 4 above - Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.</td>
<td>□ □</td>
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<td>ADDITIONAL (Jurisdiction specific competencies)</td>
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**Comments:**
### II. Inspection Observations and Performance (continued)

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<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
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<tbody>
<tr>
<td></td>
<td>YES</td>
<td>NO</td>
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</tbody>
</table>

#### 6. Verifies correction of out of compliance observations identified during previous inspection.

- [ ] Verified correction of out of compliance observations identified during previous inspection
- [ ] ADDITIONAL (Jurisdiction specific competencies)

#### 7. Correctly uses inspection equipment during joint inspections.

- [ ] Used temperature measuring devices/probes in accordance with manufacturer’s instructions.
- [ ] Cleaned and sanitized (alcohol swabs) temperature measurement probes to prevent food contamination.
- [ ] Used infrared thermometer in accordance with manufacturer’s instructions. Verified any out of compliance product temperatures registered on the infrared with a thermocouple.
- [ ] Used maximum registering thermometer or heat sensitive tapes in accordance with manufacturer’s instructions to verify final rinse dishwasher temperature.
- [ ] Used chemical test strips in accordance with manufacturer’s instructions to measure sanitizer concentrations in manual and mechanical dishwashing operations; wiping cloth solutions; and spray bottle applicators.
- [ ] Used flashlight to assess observations in areas with no or low light.
- [ ] Photographs taken support regulatory findings or conditions observed.
- [ ] ADDITIONAL (Jurisdiction specific competencies)

#### Comments:

- [ ]
- [ ]
### III. Oral Communication

#### 1. Asks questions and engages in a dialogue with person in charge/employees to obtain information relevant to the inspection.

<table>
<thead>
<tr>
<th>Task</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Asked open ended questions (questions that can not be answered with “yes” or “no”).</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>□ Did not interrupt when the person in charge/employee was speaking.</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>□ Paraphrased/summarized statements from the person in charge to confirm understanding.</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
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</tbody>
</table>

Additional (Jurisdiction specific competencies)

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<th>Comments:</th>
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</thead>
</table>

#### 2. Provides the person in charge/employees with accurate answers to inspection-related questions or admits not knowing the answer.

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<tr>
<th>Task</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Answered inspection-related questions accurately.</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>□ Admitted not knowing the answer to a question and arranges to contact the establishment with the answer.</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>□ Used trainer as a resource when unsure of an answer.</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
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</tbody>
</table>

Additional (Jurisdiction specific competencies)

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<th>Comments:</th>
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</thead>
</table>

### III. Oral Communication (continued)

<table>
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<tr>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

#### 3. Uses available means (e.g., interpreter, drawings, diagrams, demonstrations, international food safety icons) to overcome language or communication barriers.

- Avoided using jargon and acronyms, without explanation.
- Used interpreter, drawings, demonstrations, or diagrams to overcome language or communication barriers.
- Checked the person in charge’s understanding of information/instructions by asking the operator to paraphrase or demonstrate the information/instructions.

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:

#### 4. Follows jurisdiction’s policy in regard to disclosure of confidential information.

- Explained confidentiality laws, policies and procedures to the person in charge when necessary. (if the need to explain confidential laws did not occur during the joint field training inspections, the FSIO explained confidentiality laws, policies and procedures to the trainer).
- Applied the confidentiality policy per the jurisdictional requirements (e.g., FSIO did not reveal confidential information to the operator during the inspection).

**ADDITIONAL (Jurisdiction specific competencies)**

Comments:
### III. Oral Communication (continued)

<table>
<thead>
<tr>
<th></th>
<th>5. Uses effective communication and conflict resolution techniques to overcome inspection barriers.</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td></td>
<td>Identified challenges faced by the person in charge and offered possible solution(s).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Did not become argumentative (e.g., remained calm and focused).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Removed himself/herself from a confrontation or threat that may impact personal safety.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>ADDITIONAL (Jurisdiction specific competencies)</td>
<td>☐</td>
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<td>☐</td>
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</tr>
</tbody>
</table>

**Comments:**

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<table>
<thead>
<tr>
<th></th>
<th>6. Conducts exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td></td>
<td>Explained the public health significance of the inspection observations.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Reviewed all findings with the person in charge with emphasis on contributing factors to foodborne illness and Food Code Interventions (listed in Section II, Item 3).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Used foodborne illness data to highlight contributing factors.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Answered all questions or concerns pertaining to items on the inspection report.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Provided contact information to the person in charge for follow up questions or additional guidance.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>ADDITIONAL (Jurisdiction specific competencies)</td>
<td>☐</td>
<td>☐</td>
</tr>
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</tr>
</tbody>
</table>

**Comments:**
## IV. Written Communication

### 1. Completes inspection form per jurisdiction’s administrative procedures (e.g., observations; corrective actions; public health reason; applicable code reference; compliance dates).

<table>
<thead>
<tr>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

- □ Used correct inspection form.
- □ Completed a legible report.
- □ Accurately documented observations made during inspection.
- □ Completed inspection form in accordance with jurisdiction’s administrative procedures.
- □ Cited correct code provisions/rules/regulations.
- □ Documented immediate corrective action for out-of-compliance foodborne illness contributing factors and Food Code Interventions (listed in Section II, Item 3).
- □ Documented time frames for correcting each out of compliance observation.

**ADDITIONAL (Jurisdiction specific competencies)**

**Comments:**

### 2. Includes 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).

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- □ Referenced attached documents in inspection report.
- □ Referenced documents are legible.
- □ Referenced documents are accurate and reflect observations made during the inspection.
- □ Attached referenced document(s) to the inspection report per jurisdiction’s administrative procedures.

**ADDITIONAL (Jurisdiction specific competencies)**

**Comments:**
### IV. Written Communication (continued)

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<td>3.</td>
<td>Presents inspection report, and when necessary cross-referenced documents, to person in charge.</td>
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<td>Presented complete inspection report, with referenced documents when necessary, to person in charge during exit interview.</td>
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<td>Followed jurisdiction’s administrative procedures for delivering written inspection report.</td>
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<td>Obtained signature of person in charge on inspection report.</td>
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**Comments:**
V. Professionalism

1. Maintains a professional appearance consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraint).

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Maintained a professional appearance consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraint).

ADDITIONAL (Jurisdiction specific competencies)

Comments:

2. Demonstrates proper sanitary practices as expected from a food service employee.

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Washed hands as needed (e.g., prior to conducting inspection, after using restroom, after touching dirty surfaces, after touching face/body, after sneezing/coughing).

Protected bandages on hands, when necessary, to prevent contamination of food or food contact surfaces.

Did NOT contact ready-to-eat foods with bare hands.

Did NOT show any obvious signs of illness in accordance with jurisdiction’s employee health policy and/or current food code.

ADDITIONAL (Jurisdiction specific competencies)

Comments:
### V. Professionalism (continued)

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<td>3. Only reports substantiated findings as violations.</td>
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<td>Only reported findings that were directly observed or substantiated in accordance with jurisdiction’s policies and procedures.</td>
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<td>Findings are supported by fact (e.g., are NOT based on hunch or suspicion; are witnessed, are investigated).</td>
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<td>Did NOT note violations without visiting the establishment.</td>
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<td>Did NOT exaggerate details related to findings to support report conclusions.</td>
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<td>Did NOT modify report after leaving the establishment except as allowed by jurisdiction’s administrative procedures.</td>
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Comments:
### VI. Additional Performance Elements – Jurisdiction Specific

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<th>1. Uses an aseptic food sample collection method consistent with criteria established by the laboratory serving the jurisdiction.</th>
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</table>
## VI. Additional Performance Elements – Jurisdiction Specific (continued)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>YES</td>
<td>NO</td>
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<tr>
<td>2.</td>
<td>Uses an aseptic water sample collection method consistent with criteria established by laboratory serving jurisdiction.</td>
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<tr>
<td></td>
<td>Used proper hygiene before and during sample process (e.g., washed hands prior to sampling; did not touch sample container opening, inside lip, inside cap or did not blow into the bag to open it up.)</td>
<td>□</td>
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<td></td>
<td>Sample taken at site closest to source of water (prior to any treatment) if possible, or at a site (post treatment) per jurisdiction’s procedures.</td>
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<td></td>
<td>Sample taken from operational fixed type faucet – no swing type or leaking faucets.</td>
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<td></td>
<td>Removed aerator (if present) from faucet prior to sampling.</td>
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<td></td>
<td>Disinfected faucet with bleach or flame.</td>
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<td>Ran water through faucet for several minutes to clear line.</td>
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<td></td>
<td>Used a sterile, leak-proof lidded container, “whirl-pak” or zipper-lock type bag.</td>
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<td>Sample taken from midstream of the flowing faucet.</td>
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<td></td>
<td>Labeled all containers with required information (e.g., date, time, location, product name, FSIO initials) with corresponding information noted on inspection report or laboratory forms.</td>
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<td>Initiated written chain of custody including use of evidence seal.</td>
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<td></td>
<td>Stored and transported sample in a clean, refrigerated unit (e.g., ice chest with ice) within the prescribed time period.</td>
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<td></td>
<td>Maintained sample refrigerated until transport or shipping to the laboratory.</td>
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<tr>
<td></td>
<td>Sample packed and shipped in sterile, leak-proof, insulated container with refrigerant via the most rapid and convenient means available (e.g., courier, bus, express mail).</td>
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<td><strong>ADDITIONAL (Jurisdiction specific competencies)</strong></td>
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**Comments:**

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### VI. Additional Performance Elements – Jurisdiction Specific (continued)

<table>
<thead>
<tr>
<th>ADDITIONAL (Jurisdiction Specific Performance Element)</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
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<tr>
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<td>YES</td>
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<tr>
<td>(Jurisdiction specific competencies for Performance Element listed above)</td>
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Comments:
The CFP Field Training Manual for Regulatory Retail Food Safety Inspection Officers (FSIOs) should be reviewed prior to using the Abbreviated Field Training Worksheet. The manual provides jurisdictions with information that will be helpful in customizing the Field Training Worksheet and implementing a training process that meets the specific needs of the jurisdiction.

The Conference for Food Protection (CFP) has conducted a national research study and identified the basic minimum competencies that are needed to perform effective regulatory food safety inspections. The Abbreviated Field Training Worksheet has been designed to be used in conjunction with the CFP Training Plan and Log as a trainer’s tool during field training inspections. It provides a method for tracking a FSIO’s progress and accomplishments in successfully demonstrating performance element competencies specific to their job responsibilities.

There is no single correct way to use the worksheet. The Field Training Manual provides examples of ways to incorporate the worksheet into existing retail food protection training programs.

This abbreviated version of the Field Training Worksheet provides another option for regulatory retail food protection program trainers. It simply lists the performance elements for each of the inspection areas. It is intended to be used in conjunction with the CFP reference document – “Competencies for Each Performance Element” included at the end of this Attachment. It is intended for experienced trainers who have a solid command of the FSIO competencies that comprise each of the performance elements. The jurisdiction should determine the specific performance elements that apply to the FSIOs within their jurisdiction prior to initiating the field training process.

Included with this Abbreviated Field Training Worksheet is a reference document that lists examples of competencies for each performance elements. Trainers should review with the FSIO the competencies that will be included as part of the field training inspections. FSIOs are expected to successfully demonstrate these minimum competencies correctly prior to conducting independent food safety inspections.
## Conference for Food Protection
### ABBREVIATED - FIELD TRAINING WORKSHEET  
*(Performance Elements Only)*

**Retail Food, Restaurant, and Institutional Foodservice**  
**Food Safety Inspection Officer**

<table>
<thead>
<tr>
<th>Establishment Name:</th>
<th>Establishment Address:</th>
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<thead>
<tr>
<th>Food Safety Inspection Officer’s (FSIO) Name:</th>
<th>Food Safety Inspection Officer’s (FSIO) Agency:</th>
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<th>Trainer’s Name:</th>
<th>Trainer’s Agency:</th>
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<th>Date of Inspection led by the Trainee:</th>
<th>Time IN:</th>
<th>Time OUT:</th>
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### 1. Pre-Inspection

#### PERFORMANCE ELEMENTS

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<th>1. Has required equipment and forms to conduct inspection.</th>
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<th>2. Reviews establishment file for previous inspection report, complaints of file, and if applicable, required HACCP Plans or documents supporting the issuance of variance.</th>
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**ADDITIONAL (Jurisdiction Specific Performance Elements)**

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**Comments:**
## II. Inspection Observations and Performance

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<th>PERFORMANCE ELEMENTS</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
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<tbody>
<tr>
<td>☐ 1. Provides identification as a regulatory official to person in charge, confirming agency authority for inspection, and stating the purpose of visit.</td>
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<tr>
<td>☐ 2. Has knowledge of jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.</td>
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<tr>
<td>☐ 3. Uses 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.</td>
<td>☐ ☐</td>
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<td>☐ 4. Obtains immediate corrective action for out of compliance employee practices and management procedures (listed in Item 3 above) essential to the safe storage, preparation, and service of food</td>
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<td>☐ 5. Correctly assesses compliance status of other regulations (not included in Item 4 – Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.</td>
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<td>☐ 6. Verifies correction of out of compliance observations identified during previous inspection.</td>
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<tr>
<td>☐ 7. Correctly uses inspection equipment during joint inspections.</td>
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**ADDITIONAL (Jurisdiction Specific Performance Elements)**

Comments:
## III. Oral Communication

### PERFORMANCE ELEMENTS

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### ADDITIONAL (Jurisdiction Specific Performance Elements)

Comments:

### IV. Written Communication

### PERFORMANCE ELEMENTS

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### ADDITIONAL (Jurisdiction Specific Performance Elements)

Comments:
### V. Professionalism

<table>
<thead>
<tr>
<th>PERFORMANCE ELEMENTS</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
<td>NO</td>
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<tr>
<td>□ 1. Maintains a professional appearance consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraint).</td>
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<tr>
<td>□ 2. Demonstrates proper sanitary practices as expected from a food service employee.</td>
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<tr>
<td>□ 3. Only reports substantiated findings as violations.</td>
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<tr>
<td><strong>ADDITIONAL (Jurisdiction Specific Performance Elements)</strong></td>
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Comments:

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### VI. Additional Inspection Area—Sample Collection and Evidence Development

<table>
<thead>
<tr>
<th>PERFORMANCE ELEMENTS</th>
<th>Opportunity occurred for FSIO to demonstrate competency during joint field training inspection</th>
<th>Competency demonstrated during joint field training inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>□ 1. Uses an aseptic food sample collection method consistent with criteria established by laboratory serving jurisdiction.</td>
<td></td>
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</tr>
<tr>
<td>□ 2. Uses an aseptic water sample collection method consistent with criteria established by laboratory serving jurisdiction.</td>
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<tr>
<td><strong>ADDITIONAL (Jurisdiction Specific Performance Elements)</strong></td>
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Comments:

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</thead>
</table>
Conference for Food Protection
REFERENCE DOCUMENT
Competencies for Each Performance Element

PREREQUISITE TRAINING COURSES

<table>
<thead>
<tr>
<th>Food Safety Inspection Officer (FSIO) has successfully completed prerequisite training courses as specified in FDA Voluntary National Retail Food Regulatory Program Standards: Standard #2 – Trained Regulatory Staff.</th>
</tr>
</thead>
</table>

- OPTION 1: Completed the FDA ORA-U prerequisite (“Pre”) courses/examinations AND training on the jurisdiction’s prevailing statutes, regulations, and/or ordinances.

- OPTION 2: Submitted documentation of completing coursework equivalent to the FDA-ORA prerequisite (“Pre”) curriculum, AND training on the jurisdiction’s prevailing statutes, regulations, and/or ordinances, AND has certificate or documentation of successfully passing one of the written examination options in Program Standard #2.

**NOTE:** A jurisdiction can begin the field training process with FSIOs while they are still in the process of completing their prerequisite coursework. However, the prerequisite coursework should be completed prior to conducting any independent inspections of foodservice or retail food facilities.

INSPECTION AREAS

The Food Safety Inspection Officer Field Training Worksheet is divided into (six) 6 inspection areas:

I. Pre-Inspection;
II. Inspection Observations and Performance;
III. Oral Communication;
IV. Written Communication;
V. Professionalism; and
VI. Additional Inspection Areas (The Field Training Worksheet includes as an additional area Sample Collection and Evidence Development for those jurisdiction where Food Safety Inspection Officers are expected to take aseptic food and/or water samples.)

The performance elements for each of the 6 inspection categories were derived from research of current regulatory retail food protection program training curriculums and competency areas. Flexibility has been built into the training process to allow regulatory jurisdictions the ability to customize training so that it reflects a jurisdiction’s administrative policies, procedures, and inspection protocol. If a performance element competency is part of the FSIO’s job responsibility it should be included in the training plan. Competencies that are applicable to the FSIO’s job should not be arbitrarily removed or deleted from the Field Training Worksheet.

The competencies listed under each performance element are intended to serve as examples of job tasks that should be successfully demonstrated by the FSIO during field training inspections. Some of the competencies listed for a performance element may not be applicable to a FSIO within a given jurisdiction. For example, infrared thermometers may not be part of the standard issued equipment for inspection staff. The FSIO would not, therefore, be responsible for using this type of equipment. In such cases this competency is not included as part of the training.

Conversely, there may be competencies not listed under the performance element that are important for a jurisdiction to include. The trainer should review these additional competencies with the FSIO and include him/her as part of the field training process.
INSPECTION AREAS

I. Pre-Inspection

1. Has required equipment and forms to conduct inspection.
   - Necessary inspection forms and administrative materials.
   - Lab coat or equivalent protection to cover street clothes.
   - Head cover: baseball cap; hair net; or equivalent.
   - Calibrated thermocouple temperature measuring device.
   - Maximum registering thermometer or temperature sensitive tapes for verifying hot water warewashing final rinse temperature.
   - Chemical test kits for chlorine, iodophor, and quaternary ammonia sanitizers.
   - Flashlight.
   - Alcohol swabs.

2. Reviews establishment file for previous inspection report, complaints on file, and if applicable, required HACCP Plans or documents supporting the issuance of a variance.
   - Reviewed previous inspection report noting documented out of compliance observations.
   - Reviewed establishment file for complaint reports.
   - Reviewed establishment file for documentation indicating a need for a HACCP Plan.
   - Reviewed establishment file for documentation of food production or processes operating under a variance issued by the jurisdiction.

II. Inspection Observations and Performance

1. Provides identification as a regulatory official to person in charge, confirming agency authority for inspection, and stating the purpose of visit.
   - Verbally provided name and agency to the person in charge.
   - Presented regulatory identification or business card.
   - Stated the purpose of the visit.
   - Requests and confirmed permission to conduct inspection from the person in charge prior to initiating the inspection.

2. Has knowledge of jurisdiction’s laws, rules, and regulations required for conducting retail food/foodservice inspections.
   - Verified the correct critical limit and or standard specified in the jurisdiction’s rules/regulations to the observation made.
   - Correctly cited the rule/regulation for each out of compliance observation.

3. Uses 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.
   - Verified Demonstration of Knowledge of the person in charge.
   - Verified approved food sources (e.g., food from regulated food processing plants; shellfish documentation; game animal processing; parasite destruction for certain species of fish intended for raw consumption; receiving temperatures).
   - Verified food safety practices for preventing cross-contamination of ready-to-eat food.
• Verified food contact surfaces are clean and sanitized, protected from contamination from soiled cutting boards, utensils, aprons, etc., or raw animal foods.
• Verified the restriction or exclusion of ill employees.
• Verified no bare hand contact with ready-to-eat foods (or use of a pre-approved, alternative procedure).
• Verified employee handwashing.
• Verified cold holding temperatures of foods requiring time/temperature control for safety (TCS food), or when necessary, verified that procedures are in place to use time alone to control bacterial growth and toxin production.
• Verified date marking of ready-to-eat foods TCS food held for more than 24 hours.
• Verified cooking temperatures to destroy bacteria and parasites.
• Verified hot holding temperatures of TCS food or when necessary, that procedures were in place to use time alone to prevent the outgrowth of spore-forming bacteria.
• Verified cooling temperatures of TCS food to prevent the outgrowth of spore-forming or toxin-forming bacteria.
• Verified reheating temperatures of TCS food for hot holding.
• Verified the availability of a consumer advisory for foods of animal origin served raw or undercooked.
• Identified food processes and/or procedures that require a HACCP Plan per the jurisdiction’s regulations.

4. Obtains immediate corrective action for out of compliance employee practices and management procedures (listed in Item 3 above) essential to the safe storage, preparation, and service of food.

• Notified the person in charge/employee(s) of the out of compliance observations.
• Reviewed corrective actions with the person in charge/employee(s).
• Observed the person in charge/employee(s) immediately take corrective action for out of compliance observations (e.g., movement of food to ensure product temperature or prevent contamination; reconditioning food; restriction/exclusion of ill employees; discarding of food product) in accordance with local jurisdiction’s procedures.
• Identified conditions requiring issuance of an embargo/stop sale/food destruction order per jurisdiction’s administrative procedures.

5. Correctly assesses compliance status of other regulations (not included in Item 4 – Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.

• Correctly assessed compliance status of other regulations (not included in Item 4 above - Good Retail Practices) that are included in jurisdiction’s prevailing statutes, regulations and/or ordinances.

6. Verifies correction of out of compliance observations identified during previous inspection.

• Verified correction of out of compliance observations identified during previous inspection

7. Correctly uses inspection equipment during joint inspections.

• Used temperature measuring devices/probes in accordance with manufacturer’s instructions.
• Cleaned and sanitized (alcohol swabs) temperature measurement probes to prevent food contamination.
• Used infrared thermometer in accordance with manufacturer’s instructions. Verified any out of compliance product temperatures registered on the infrared with a thermocouple.
• Used maximum registering thermometer or heat sensitive tapes in accordance with manufacturer’s instructions to verify final rinse dishwasher temperature.
• Used chemical test strips in accordance with manufacturer’s instructions to measure sanitizer concentrations in manual and mechanical dishwashing operations; wiping cloth solutions; and spray bottle applicators.
• Used flashlight to assess observations in areas with no or low light.
• Photographs taken support regulatory findings or conditions observed.
III. Oral Communication

1. Asks questions and engages in a dialogue with person in charge/employees to obtain information relevant to inspection.
   - Asked open ended questions (questions that cannot be answered with “yes” or “no”).
   - Did not interrupt when the person in charge/employee was speaking.
   - Paraphrased/summarized statements from the person in charge to confirm understanding.

2. Provides the person in charge/employees with accurate answers to inspection-related questions or admits not knowing the answer.
   - Answered inspection-related questions accurately.
   - Admitted not knowing the answer to a question and arranges to contact the establishment with the answer.
   - Used trainer as a resource when unsure of an answer.

3. Uses available means (e.g., interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers.
   - Avoided using jargon and acronyms, without explanation.
   - Used interpreter, drawings, demonstrations, or diagrams to overcome language or communication barriers.
   - Checked the person in charge’s understanding of information/instructions by asking the operator to paraphrase or demonstrate the information/instructions.

4. Follows jurisdiction’s policy in regard to disclosure of confidential information.
   - Explained confidentiality laws, policies and procedures to the person in charge when necessary. (If the need to explain confidential laws did not occur during the joint field training inspections, the FSIO explained confidentiality laws, policies and procedures to the trainer).
   - Applied the confidentiality policy per the jurisdictional requirements (e.g., FSIO did not reveal confidential information to the operator during the inspection).

5. Uses effective communication and conflict resolution techniques to overcome inspection barriers.
   - Identified challenges faced by the person in charge and offered possible solution(s).
   - Did not become argumentative (e.g., remained calm and focused).
   - Removed himself/herself from a confrontation or threat that may impact personal safety.

6. Conducts exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.
   - Explained the public health significance of the inspection observations.
   - Reviewed all findings with the person in charge with emphasis on contributing factors to foodborne illness and Food Code Interventions (listed in Section II, Item 3).
   - Used foodborne illness data to highlight contributing factors.
   - Answered all questions or concerns pertaining to items on the inspection report.
   - Provided contact information to the person in charge for follow up questions or additional guidance.
IV. Written Communication

1. Completes inspection form per jurisdiction’s administrative procedures (e.g., observations; corrective actions; public health reason; applicable code reference; compliance dates).
   - Used correct inspection form.
   - Completed a legible report.
   - Accurately documented observations made during inspection.
   - Completed inspection form in accordance with jurisdiction’s administrative procedures.
   - Cited correct code provisions/rules/regulations.
   - Documented immediate corrective action for out-of-compliance foodborne illness contributing factors and Food Code Interventions (listed in Section II, Item 3).
   - Documented time frames for correcting each out of compliance observation.
   - Signed completed inspection report.

2. Includes 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).
   - Referenced attached documents in inspection report.
   - Referenced documents are legible.
   - Referenced documents are accurate and reflect observations made during the inspection.
   - Attached referenced document(s) to the inspection report per jurisdiction’s administrative procedures.

3. Presents inspection report, and when necessary cross-referenced documents, to person in charge.
   - Presented complete inspection report, with referenced documents when necessary, to person in charge during exit interview.
   - Followed jurisdiction’s administrative procedures for delivering written inspection report.
   - Obtained signature of person in charge on inspection report.

V. Professionalism

1. Maintains a professional appearance consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraint).
   - Maintained a professional appearance consistent with jurisdiction’s policy (e.g., clean outer clothing, hair restraint).

2. Demonstrates proper sanitary practices as expected from a food service employee.
   - Washed hands as needed (e.g., prior to conducting inspection, after using restroom, after touching dirty surfaces, after touching face/body, after sneezing/coughing).
   - Protected bandages on hands, when necessary, to prevent contamination of food or food contact surfaces.
   - Did NOT contact ready-to-eat foods with bare hands.
   - Did NOT show any obvious signs of illness in accordance with jurisdiction’s employee health policy and/or current food code.
3. Only reports substantiated findings as violations.

- Only reported findings that were directly observed or substantiated in accordance with jurisdiction’s policies and procedures.
- Findings are supported by fact (e.g., are NOT based on hunch or suspicion; are witnessed, are investigated).
- Did NOT note violations without visiting the establishment.
- Did NOT exaggerate details related to findings to support report conclusions.
- Did NOT modify report after leaving the establishment except as allowed by jurisdiction’s administrative procedures.
ADDITIONAL INSPECTION AREAS

VII. Sample Collection and Evidence Development

1. Uses an aseptic food sample collection method consistent with criteria established by laboratory serving jurisdiction.

- Used proper hygiene before and during sample process (e.g., washed hands prior to sampling; did not touch sample container opening, inside lip, inside cap or did not blow into the bag to open it up.)
- Used sample collection method specified by the jurisdiction (e.g., original container if available; collection of a representative sample from a large quantity or container).
- Used sterile, leak-proof lidded container or zipper-lock type bags.
- Used a separate sterile utensil to collect each different sample item.
- Labeled all containers with required information (e.g., date, time, location, product name, FSIO initials) with corresponding information noted on inspection report or laboratory forms.
- Initiated written chain of custody including use of evidence seal.
- Stored and transported sample in a clean, refrigerated unit (e.g., ice chest with ice) within the prescribed time period.
- Maintained sample refrigerated or frozen until transport or shipping to laboratory.
- Sample packed and shipped in sterile, leak-proof, insulated container with refrigerant (wet or dry ice) via the most rapid and convenient means available (e.g., courier, bus, express mail).

2. Uses an aseptic water sample collection method consistent with criteria established by laboratory serving jurisdiction.

- Used proper hygiene before and during sample process (e.g., washed hands prior to sampling; did not touch sample container opening, inside lip, inside cap or did not blow into the bag to open it up.)
- Sample taken at site closest to source of water (prior to any treatment) if possible, or at a site (post treatment) per jurisdiction’s procedures.
- Sample taken from operational fixed type faucet – no swing type or leaking faucets.
- Removed aerator (if present) from faucet prior to sampling.
- Disinfected faucet with bleach or flame.
- Ran water through faucet for several minutes to clear line.
- Used a sterile, leak-proof lidded container, “whirl-pak” or zipper-lock type bag.
- Sample taken from midstream of the flowing faucet.
- Labeled all containers with required information (e.g., date, time, location, product name, FSIO initials) with corresponding information noted on inspection report or laboratory forms.
- Initiated written chain of custody including use of evidence seal.
- Stored and transported sample in a clean, refrigerated unit (e.g., ice chest with ice) within the prescribed time period.
- Maintained sample refrigerated until transport or shipping to the laboratory.
- Sample packed and shipped in sterile, leak-proof, insulated container with refrigerant via the most rapid and convenient means available (e.g., courier, bus, express mail).
## 2005 FDA Food Code – Annex 5
### Table 1
#### Appendix B-3: Risk Categorization of Food Establishments

<table>
<thead>
<tr>
<th>RISK CATEGORY</th>
<th>DESCRIPTION</th>
<th>FREQUENCY#/YR</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Examples include most convenience store operations, hot dog carts, and coffee shops. Establishments that serve or sell only pre-packaged, nonpotentially hazardous foods (non time/temperature control for safety (TCS) foods). Establishments that prepare only nonpotentially hazardous foods (nonTCS foods). Establishments that heat only commercially processed, potentially hazardous foods (TCS foods) for hot holding. No cooling of potentially hazardous foods (TCS foods). Establishments that would otherwise be grouped in Category 2 but have shown through historical documentation to have achieved active managerial control of foodborne illness risk factors.</td>
<td>1</td>
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<tr>
<td>2</td>
<td>Examples may include retail food store operations, schools not serving a highly susceptible population, and quick service operations. Limited menu. Most products are prepared/cooked and served immediately. May involve hot and cold holding of potentially hazardous foods (TCS foods) after preparation or cooking. Complex preparation of potentially hazardous foods (TCS foods) requiring cooking, cooling, and reheating for hot holding is limited to only a few potentially hazardous foods (TCS foods). Establishments that would otherwise be grouped in Category 3 but have shown through historical documentation to have achieved active managerial control of foodborne illness risk factors. Newly permitted establishments that would otherwise be grouped in Category 1 until history of active managerial control of foodborne illness risk factors is achieved and documented.</td>
<td>2</td>
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<tr>
<td>3</td>
<td>An example is a full service restaurant. Extensive menu and handling of raw ingredients. Complex preparation including cooking, cooling, and reheating for hot holding involves many potentially hazardous foods (TCS foods). Variety of processes require hot and cold holding of potentially hazardous food (TCS food). Establishments that would otherwise be grouped in Category 4 but have shown through historical documentation to have achieved active managerial control of foodborne illness risk factors. Newly permitted establishments that would otherwise be grouped in Category 2 until history of active managerial control of foodborne illness risk factors is achieved and documented.</td>
<td>3</td>
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<tr>
<td>4</td>
<td>Examples include preschools, hospitals, nursing homes, and establishments conducting processing at retail. Includes establishments serving a highly susceptible population or that conduct specialized processes, e.g., smoking and curing; reduced oxygen packaging for extended shelf-life.</td>
<td>4</td>
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</table>
**APPENDIX B-4: TRAINING RECORD SUMMARY**

It is necessary to maintain a record of the training status of all retail Food Safety Inspection Officers (FSIOs). The following chart may be used as a summary record to demonstrate compliance with Standard 2. Other manual or automated training summaries may be used as a self-assessment tool as long as the pertinent data elements are present. Certificates, field training records and the other source documents specified as quality records in Standard 2 must be maintained in good order by the regulatory authority to support a summary record. These quality records must be available to verify the summary information for the purposes of a verification audit.

**Training Record Summary for each employee (\* = completion date required)**

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Date of hire or reassignment to food program</th>
<th>Training Prerequisite Curriculum (Prior to conducting independent inspections)</th>
<th>25 Joint Inspections &amp; successful completion of Field training using process similar to the one described in Appendix B-2</th>
<th>25 Independent Inspections &amp; completion of the Program Standard 2 curriculum (18 months)*</th>
<th>Standardization (18 months)*</th>
<th>No. of Education Contact hours/3 yrs</th>
<th>Meets criteria Yes/No</th>
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</table>

Ninety percent (90%) of all employees doing retail food inspections have met the training requirements within the time frames; therefore, we meet Standard 2.

__________YES  _______NO

Name and Signature of Self-Assessor  Date
# APPENDIX C - SUPPLEMENT TO STANDARD 3 - INSPECTION PROGRAM BASED ON HACCP PRINCIPLES

## TABLE C-1 – INSPECTION PROGRAM WORKSHEET

<table>
<thead>
<tr>
<th>Criteria</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The inspection form in use is designed to:</td>
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<tr>
<td>a. identify risk factors and interventions</td>
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</tr>
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<td>b. document in, out, not observed, and not applicable status</td>
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<tr>
<td>c. document compliance and enforcement activities</td>
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<td>1a.</td>
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<td>1b.</td>
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<td>1c.</td>
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<tr>
<td>2. Your jurisdiction uses a written process that groups food establishments into at least three categories based on potential and inherent food safety risks.</td>
<td></td>
<td>2.</td>
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<tr>
<td>3. Your jurisdiction assigns an annual inspection frequency to each food establishment based on its assigned food safety risk category.</td>
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<tr>
<td>4. Your jurisdiction has an implemented, written policy that requires:</td>
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<tr>
<td>a. On-site corrective actions</td>
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<td>4a.</td>
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<tr>
<td>b. Discussion of long-term control options</td>
<td></td>
<td>4b.</td>
</tr>
<tr>
<td>c. Follow-up activities</td>
<td></td>
<td>4c.</td>
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<tr>
<td>4a.</td>
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<td>4b.</td>
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<td>4c.</td>
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<tr>
<td>5. Your jurisdiction has an implemented written policy that addresses code variance requests related to risk factors and interventions.</td>
<td></td>
<td>5.</td>
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<tr>
<td>6. Your jurisdiction has an implemented written policy for the verification and validation of HACCP plans when a plan is required by the code.</td>
<td></td>
<td>6.</td>
</tr>
</tbody>
</table>

A “yes” affirmation to each statement is required to meet Standard 3. The source documents specified as quality records in Standard 3 must be maintained in good order by the regulatory authority to support this summary record and must be made available for purposes of a verification audit.

I affirm that the information represented on this record is true and correct. This jurisdiction meets all the requirements for Standard 3, _____ YES _____ NO

______________________________
Printed Name and Signature of Self-Assessor

__________
Date

______________________________
Name and Address of the Jurisdiction
APPENDIX D - SUPPLEMENT TO STANDARD 4 – UNIFORM INSPECTION PROGRAM

Use Table D-2 or a similar manual or automated form to document the success of a jurisdiction’s quality assurance program in meeting Standard 4. In the first column, identify the inspector by name or by a code. In the Establishment ID column, identify the establishment by name or by code. In the “DATE” column, record the dates of the field visit and file review. Items 1 through 10 below summarize the desired activities and competencies of an inspector. Note that some items (such as 5, 6, 8, and 9) cannot be verified without a review of the file for the establishment visited. Place a check mark in the corresponding column of Table D-2 when the activity or competency is verified.

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 is noted on the inspection form) through observation and investigation;
2. Completes an inspection report that is clear, legible, concise, and accurately records findings and observations;
3. Interprets and applies laws, regulations, policies and procedures correctly;
4. Cites the proper local 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 actions;
7. Obtains on-site corrective action;
8. Discusses and documents discussion of options for implementing food safety systems, when required;
9. Confirms that the facility is assigned to the correct risk category and inspection frequency; and
10. Files reports and other documentation in a timely manner.

NOTE TO AGENCIES HAVING LESS THAN 10 INSPECTORS: When dealing with samples this small, it is statistically necessary to group all the item ratings together, disregarding the score for each individual Item (1) – (10). Agencies having less than 4 inspectors 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 inspections large enough to statistically measure the uniformity of your inspection program fairly. Therefore, do not calculate the “% compliance” row for each item at the bottom of Table D-2. Instead use Chart D-1 and Table D-1 to determine the program’s rating.
### Chart D-1 Method of Calculation for Jurisdictions with Less Than Ten Inspectors

<table>
<thead>
<tr>
<th># of inspectors</th>
<th># inspections needed</th>
<th># of items needed to be marked in compliance in order to pass</th>
</tr>
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<tbody>
<tr>
<td>&lt;4</td>
<td>8 minimum</td>
<td>65 (out of 80 possible Items)</td>
</tr>
<tr>
<td>4-9</td>
<td>2 per inspector</td>
<td>4 inspectors = 65 (out of 80 possible Items)</td>
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<td></td>
<td>5 inspectors = 82 (out of 100 possible Items)</td>
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<td></td>
<td></td>
<td>6 inspectors = 99 (out of 120 possible Items)</td>
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<td></td>
<td>7 inspectors = 116 (out of 140 possible Items)</td>
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<td></td>
<td></td>
<td>8 inspectors = 133 (out of 160 possible Items)</td>
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<td>9 inspectors = 150 (out of 180 possible Items)</td>
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</table>

Example: For 6 inspectors, there will be 2 field visits per inspector = 12 visits
12 visits X 10 Items per visit = 120 Total Possible Items

These minimum passing scores are comparable to the 75% per aspect passing rate for jurisdictions with 10 or more inspectors.

### Table D-1 Calculation of Uniformity for Jurisdictions with Less Than Ten Inspectors

<table>
<thead>
<tr>
<th>Period from to</th>
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</thead>
<tbody>
<tr>
<td>1. Number of inspectors in the jurisdiction</td>
</tr>
<tr>
<td>2. Number of inspections used in the calculation (minimum of 8)</td>
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<tr>
<td>3. Total number of items marked as correct during joint field visits and corresponding file reviews and recorded on Table D-2.</td>
</tr>
<tr>
<td>4. Total number of possible items based on the number of inspections (10 items times the # of inspections – see Chart D-1, column 3)</td>
</tr>
</tbody>
</table>

Indicate Pass or Fail as determined by chart D-1, column 3
TABLE D-2 CALCULATION OF UNIFORMITY FOR JURISDICTIONS WITH TEN OR MORE INSPECTORS
Period from __________ to __________

<table>
<thead>
<tr>
<th>INSPECTOR ID.</th>
<th>Establishment ID</th>
<th>Date</th>
<th>ITEM (1)</th>
<th>ITEM (2)</th>
<th>ITEM (3)</th>
<th>ITEM (4)</th>
<th>ITEM (5)</th>
<th>ITEM (6)</th>
<th>ITEM (7)</th>
<th>ITEM (8)</th>
<th>ITEM (9)</th>
<th>ITEM (10)</th>
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<td>1.</td>
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</table>

% In Compliance

A check mark indicates the inspector complies with the item. Conduct at least two field visits and file reviews per inspector during each three-year self-assessment period. For each item, compute the Percent In Compliance by dividing the number of checks in each column by the number of field inspections observed and multiplying the result by 100. Each column must show at least a 75% In Compliance rate for the program to conform to the Standard. See instructions on page D-1 for jurisdictions with less than ten inspectors.
EXPLANATION OF THE STATISTICAL MODEL

This is an explanation of the thinking that determined the statistical model relating to the criteria used for evaluating the inspection performance of jurisdictions. The FDA Program Standards Workgroup and the Retail Food Steering Committee agreed this model to, with guidance from the CFSAN Division of Mathematics.

Evaluation of the performance of large jurisdictions

For large jurisdictions (jurisdictions with 10 or more inspectors) the evaluation is based on direct oversight of two inspections per inspector, with respect to 10 items of performance. If 10 or more inspectors are being evaluated in the program, then we will see 20 or more scores of satisfactory or unsatisfactory for each item. The standard for approval of the inspection performance is a passing score of 75% on each of the 10 items. An individual item receives a passing score if at least 75 percent of the instances of observation are completed in a satisfactory manner. For example, with 10 inspectors, we must have at least 15 (that is 75 percent of 20 inspections) completed correctly for item number 1. Similarly, for item number 2, we would need to see at least 15 inspections done correctly. In order for the program to pass the evaluation successfully with respect to inspection performance, all of the 10 items would be required to show satisfactory completion of at least 15 out of the 20 ratings. For those jurisdictions with more than 10 inspectors, we simply apply the 75 percent rule as we did for the jurisdiction with 10 inspectors. Using two overseen inspections for each inspector, record the observations for each item, figure the percent correct for each item, and round up to the next higher whole number when the percent is not a whole number.

The 75 percent per item rule was determined by the consensus of several highly experienced individuals working in the retail food safety team. We view the set of overseen inspections as a sample from a much larger set of total inspections performed. In this approach to program evaluation, the statistical measure does not evaluate any individual inspector. The emphasis is on the overall performance of the team, with respect to any item. Even if an inspection were observed in which one inspector fails all 10 items, the program would not necessarily fail.

The jurisdiction’s quality assurance program, however, must address individual inspector’s performance to ensure a standard of uniformity among the team. If each inspection were successful only 75 percent of the time for each item, the team as a whole would almost always fail. This is because they would almost always dip below 75 percent on at least one of the 10 items. For example, a team that scored 70, 70, 70, 75, 75, 75, 75, 80, 80, and 80 on each of the 10 items would be successful 75 percent of the time, but they would fail three times over since three items scored below 75. However, for a team with 10 inspectors exactly, if their chance of getting each item right improved to 88 percent at each inspection, then they would have a much better chance of keeping all 10 results at 75 percent or higher. Under the simple statistical assumption of independent sampling, a team achieving 88 percent at each inspection would pass the evaluation 75 percent of the time. Therefore, this 88 percent level of performance was used as a simple representation of a team that is good enough that we want them to have a good chance of passing, but not so good that they would not find it advantageous to improve.
Evaluation of performance of small jurisdictions

A statistical issue was to determine a reasonable standard for those jurisdictions with less than 10 inspectors. When the sample gets this small, the relative error in the estimated fractions gets so large that the “each of 10 items rule” will fail good programs too frequently. Therefore, the 88 percent level of performance at each inspection was the feature of the standard that was kept constant in designing the sample sizes for the smaller jurisdictions.

In jurisdictions with less than 10 inspectors, the statistical solution is to group all of the individual ratings, disregarding the individual items. For 5 inspectors we would review 5 x 2 = 10 inspections, with respect to all 10 items combined. This gives 100 observations. It is not possible to make a total observation test mimic exactly a 10 item test, but the minimum passing rates will be about as stringent as the 75 percent for each of 10 aspects test.

For 4 to 9 inspectors, conduct two co-inspections for each inspector. Chart D-1 shows the lowest total passing score out of the complete set of combined items that would give at least a 75 percent chance of passing for a team with an 88 percent chance of getting any particular observation correct. For a team of three or less, it is recommended that extra oversight inspections be performed to produce a total of 8 inspections. This is an intuitive judgment call that any set smaller than 8 could randomly turn out to be odd enough to produce an unfair rating.
### APPENDIX E - SUPPLEMENT TO STANDARD 5 - FOODBORNE ILLNESS AND FOOD DEFENSE PREPAREDNESS AND RESPONSE

<table>
<thead>
<tr>
<th>Criteria</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. INVESTIGATION PROCEDURES</strong></td>
<td></td>
<td></td>
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<tr>
<td>a. The program has written operating procedures for responding to and/or conducting investigations of foodborne illness and food-related injury* that clearly identify the roles, duties and responsibilities of program staff and how the program interacts with other relevant departments and agencies. (The procedures may be contained in a single source document or in multiple documents.)</td>
<td></td>
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<tr>
<td>b. The program maintains contact lists for individuals, departments, and agencies that may be involved in the investigation of foodborne illness, food-related injury* or contamination of food.</td>
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<tr>
<td>c. The program maintains a written operating procedure or a memorandum of Understanding (MOU) with the appropriate epidemiological investigation program/department to conduct foodborne illness investigations and to report findings. The operating procedure or MOU clearly identifies the roles, duties, and responsibilities of each party.</td>
<td></td>
<td></td>
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<tr>
<td>d. The program maintains logs or databases for all complaint or referral reports from other sources alleging food-related illness, food-related injury or intentional food contamination. The final disposition for each complaint is recorded in the log or database and is files in or linked to the establishment record for retrieval purposes.</td>
<td></td>
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<tr>
<td>e. Program procedures describe the disposition, action or follow-up and reporting requirement for each type of complaint or referral report.</td>
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<tr>
<td>f. Program procedures require disposition, action or follow-up on each complaint or referral report alleging food-related illness or injury within 24 hours.</td>
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<tr>
<td>g. The program has established procedures and guidance for collecting information on the suspect foods’ preparation, storage or handling during on-site investigations of food-related illness, food-related injury*, or outbreak investigations.</td>
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<tr>
<td>h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected.</td>
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</table>
i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a product that originated outside the agency’s jurisdiction or has been shipped interstate.

### 2. REPORTING PROCEDURES

- Possible contributing factors to the food-related illness, food-related injury* or intentional food contamination are identified in each on-site investigation report.

- The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreaks* with CDC.

### 3. LABORATORY SUPPORT DOCUMENTATION

- The program has a letter of understanding, written procedures, contract or MOU acknowledging that a laboratory(s) is willing and able to provide analytical support to the jurisdiction’s food program. The documentation describes the type of biological, chemical, radiological contaminants or other food adulterants that can be identified by the laboratory. The laboratory support available includes the ability to conduct environmental sample analysis, food sample analysis and clinical sample analysis.

- The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food-related emergency exceeds the capability of the primary support lab(s) listed in paragraph 3.a. This list should also identify potential sources of laboratory support such as FDA, USDA, CDC, or environmental laboratories for specific analysis that cannot be performed by the jurisdiction’s primary laboratory(s).

### 4. TRACE-BACK PROCEDURES

- Program management has an established procedure to address the trace-back of foods implicated in an illness, outbreak or intentional food contamination. The track-back procedure provides for the coordinated involvement of all appropriate agencies and identifies a coordinator to guide the investigation. Trace-back reports are shared with all agencies involved and with CDC.

### 5. RECALLS

- Program management has an established procedure to address the recall of foods implicated in an illness, outbreak or intentional food contamination.
b. When the jurisdiction has the responsibility to request or monitor a product recall, written procedures equivalent to 21 CFP, Part 7 are followed.

c. Written policies and procedures exist for verifying the effectiveness of recall actions by firms (effectiveness checks) when requested by another agency.

6. MEDIA MANAGEMENT

a. The program has a written policy and procedure that defines a protocol for providing information to the public regarding a foodborne illness outbreak or food safety emergency. The policy/procedure should address coordination and cooperation with other agencies involved in the investigation. A media person is designated in the protocol.

7. DATA REVIEW AND ANALYSIS

a. At least once per year, the program conducts a review of the data in the complaint log or database and the foodborne illness and food-related injury* investigations to identify trends and possible contributing factors that are most likely to cause foodborne illness or food-related injury*. These periodic reviews of foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention.

b. The review is conducted with prevention in mind and focuses on, but is not limited to, the following:
   i. Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* in a single establishment;
   ii. Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Disease Outbreaks* in the same establishment type;
   iii. Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* implicating the same food;
   iv. Foodborne Disease outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* associated with similar food preparation processes;
   v. Number of confirmed foodborne disease outbreaks*;
   vi. Number of foodborne disease outbreaks* and suspect foodborne disease outbreaks*;
   vii. Contributing factors most often identified;
   viii. Number of complaints involving real and alleged threats of intentional food contamination; and
   ix. Number of complaints involving the same agent and any complaints involving unusual agents when agents are identified.
c. In the event that there have been no food-related illness or food-related injury* outbreak investigations conducted during the twelve months prior to the data review and analysis, program management will plan and conduct a mock foodborne illness investigation to test program readiness. The mock investigation should simulate response to an actual confirmed foodborne disease outbreak* and include on-site inspection, sample collection and analysis. A mock investigation must be completed at least once per year when no illness outbreak investigations occur.

*Note: See the Standards Definitions for the meaning of these defined terms.

A “yes” affirmation to each statement is required to meet Standard 5. If an appendix item contains multiple questions, then all questions must be answered in the affirmative in order to meet that element of the Standard.

The source documents, such as the various policies and procedures, that support this summary record must be maintained in good order by the regulatory authority and must be made available upon request for purposes of a verification audit.

I affirm that the information represented on this record is true and correct. This jurisdiction meets all the requirements for Standard 5, ________Yes _______NO

__________________________________  _______________________
Signature of Self-assessor    Date

Printed Name of Self-assessor and Title

Name and Address of Jurisdiction
APPENDIX F - SUPPLEMENT TO STANDARD 6 - COMPLIANCE AND ENFORCEMENT

WORK SHEET INSTRUCTIONS

This Standard applies to all voluntary and regulatory activities used by a jurisdiction to achieve compliance with regulatory requirements. The desired outcome is an effective compliance and enforcement program that consistently follows through on documented violations and achieves compliance. The sequence and type of follow-up activity a particular jurisdiction elects to use may vary. However, when an out-of-control risk factor or intervention is documented on an inspection report, the expectation is that actions taken to correct the violation will also be documented in the establishment file. For the purposes of self-assessment, follow-up actions have been divided into three types.

- On-site corrective action that occurs at the time of a routinely scheduled inspection,
- Follow-up action that occurs after the routine inspection, such as re-inspections, training, risk control plans, and informal conferences, and
- Enforcement activities such as fines, permit suspension, hearings, mandated training, restriction of operations, embargo, etc.

The measure of success for a compliance and enforcement program under Standard 6 is based on a review of randomly selected establishment files to determine whether documented violations have been resolved satisfactorily in the establishment.

In order to track documented violations through the compliance and enforcement process for a period of time long enough to determine resolution, a fixed point in time must be chosen as the starting point. It is expected that follow-up or subsequent inspections of that facility should show correction of the violations documented at the starting point. The Standard 6 measure uses a concept called the ‘start-point inspection.’

The ‘start-point inspection’ will be the third oldest routine inspection in the establishment’s file if it shows a violation of one of the risk factors or Food Code interventions. If no risk factor or Food Code intervention violation is shown on that inspection, then the fourth oldest routine inspection may be used if it shows a risk factor or Food Code intervention violation. The third oldest routine inspection is determined by starting from the most recent routine inspection in the establishment’s file and working backward chronologically. The fourth oldest routine inspection would be the one prior to the third oldest. If no violation of a risk factor or Food Code intervention is documented on the third or fourth oldest routine inspection, then no ‘start-point inspection’ exists for that establishment.

A sampling of files will be reviewed for compliance and enforcement performance based on the ‘start-point inspection’ concept. The following section provides instructions for the proper construction of a list of sample files and a required alternate list of sample files.
SELECTING THE SAMPLE

Jurisdictions with less than 400 total establishments will select at least 20 files for review. Jurisdictions with over 400 establishments will select a sample equal to 5% of the total establishments up to a maximum of 70 files. This initial selection of sample files will be the initial sample and will be the first files reviewed. Sample selection using a table of random numbers or a random number generator is the preferred method of sample selection and can be used with a card file, ledger, list, or automated data system. However, two alternative sample selection techniques acceptable for retail food program self-assessments are presented here.

1. Method 1. The first alternative technique to the use of a random number generator requires that each establishment be identified by a card or strip of paper having the establishment’s name and address, permit number, file number, or other means of positive identification. These identifying cards or slips of paper are thoroughly mixed and the establishment files to be reviewed are drawn one at a time until the required number is obtained.

2. Method 2. The second alternative technique to the use of a random number generator utilizes a card file, ledger, list or data processing record system. When this procedure is used, all the establishments in the program must be subject to sampling. The frequency interval may be determined by dividing the total number of retail food establishments by the number of files needed in the sample. [For example, if there are 800 establishments within the jurisdiction, a sample of 40 would be needed (5% of 80). The frequency interval would be 800 divided by 40, or 20. Thus every 20th establishment shall be selected to make up the initial sample.] To establish a starting point when using a frequency interval of 20, write numbers 1 – 20, inclusive, on separate strips of paper and draw one slip at random. The number appearing on that strip of paper represents the first establishment to be drawn. If a ledger or list is being used for sampling and the number drawn is 7, then the seventh entry in the ledger or list would be the first establishment in the sample. The second establishment would be the 27th entry, the third would be the 47th entry and so forth, until the sample of 40 is drawn.

ALTERNATE SAMPLE LIST

Deletion of an establishment from the sample of files to be reviewed will be limited to those establishments which have not been in business long enough to have at least three regularly scheduled inspections or those files where no risk factor or Food Code intervention violation is documented on the “start-point inspection.”

When an establishment file is eliminated from the initial random draw, a new establishment file will be drawn from a pre-determined alternate sample list. Alternate files will be drawn in the same manner as the original sample and at the same time as the original sample selection. It is suggested that the number of alternate files selected be at least 30 percent of the original sample size. If a large number of files selected in the initial draw do not have risk factor or Food Code intervention violations on the “start-point inspection,” then a larger
alternate sample will be needed.

The sample list of alternate files shall be kept separate from the original sample list. When an original selected file cannot be rated because it has not been in business long enough to have received at least three routine inspections or because it has no risk factor/intervention violation on the start-point inspection, a substitute file from the pre-selected alternate list will be reviewed. Substitute files from the alternate list will be used in the order in which the files were drawn.

If a random number generator or a table of random numbers is used for the initial sample selection, then this same method should be used to select the appropriate number of files for the alternate sample list. Again, this is the easiest and preferred method of sample selection.

If method 1 is used for the random selection, the alternate sample files will be the last files drawn. For example, if the sample size required is 20, then 26 files will be selected, and the last 6 files drawn will be designated as alternative files.

If method 2 is used for the random selection, a separate drawing of the alternate files will be made using an interval determined as follows: the number of establishments in the inventory, minus the number of files drawn for the original sample, divided by the number of alternate files needed. Using our example from method 2 above:

\[
\frac{800 \text{ (inventory)} - 40 \text{ (files drawn in the original sample)}}{12 \text{ (30\% of the original sample)}} = 63
\]

To establish a starting point for the new interval of 63, write the numbers 1 – 63 inclusively on separate slips of paper and draw one at random. The number drawn will be the first file selected for the alternate sample and every 63rd file afterward until 12 files are drawn.

**REVIEWING AND RATING THE FILES**

**Step 1.** Identify the items on the local inspection report that correspond to each of the risk factors and interventions on the worksheet. Record the local item numbers on the “reference key” line of the worksheet. If there is no corresponding local requirement for a particular FDA Code risk factor or intervention, record “NA” for not applicable. You may find the Standard No. 1, Appendix A Worksheets, helpful in making this comparison. Note that the program is not penalized under Standard No. 6 for sections of the Food Code that have not been adopted.

**Step 2.** Open the first establishment inspection file that was randomly selected in Step 1 above. Identify the third oldest routine inspection report in the file, starting at the current date and working back chronologically. This inspection will be the “start-point inspection” for the review of this file. Using the reference key line on the worksheet, determine which risk factors and interventions were out of compliance at the time of this “start-point inspection.” Place a check under each item that is out of compliance on the horizontal status line. If there is no risk factor/intervention that was out of compliance on the third oldest
inspection in the file, you may move to the fourth oldest inspection in the file and use it for the “start-point inspection” if it contains a risk factor/intervention that was out of compliance. If there is no risk factor/intervention that was out of compliance on the third or fourth oldest inspection, eliminate this file from the review and select a substitute file from the alternate list.  

*NOTE: Be sure to indicate the date of the start-point inspection on the Appendix F worksheet for each reviewed file. This will aid the reviewer during a validation audit.*

**Step 3.** Review all of the documentation in the establishment file from the start-point inspection forward to the current date and determine whether follow-up action was taken and documented for each of the out-of-compliance risk factors and interventions that were out of compliance on the start-point inspection. Determine whether there was at least one type of follow-up activity for each item that was marked out of compliance. Place “Yes” in the appropriate line and column to indicate that follow-up action was documented in the establishment file. Make a notation below each “Yes” to indicate the type of action taken such as “RH” for Reheat, “WL” for warning letter or “RCP” for risk control plan. If there is no documentation in the establishment file to indicate that follow-up action was taken for each specific risk factor or intervention that was out of compliance, the presumption is that follow up did not occur. Indicate by “yes” or “no” in the last column whether follow-up actions complied with the jurisdiction’s written step-by-step procedure for compliance and enforcement.

In order for an individual establishment file to pass, each column marked with a violation at the start-point inspection must have a subsequent “yes” answer to indicate that at least one type of follow-up action was taken. Actions must have complied with the jurisdiction’s written step-by-step procedure for compliance and enforcement. A single start-point violation without a final resolution, either correction or a compliance/enforcement activity causes the file to fail. A single failure to follow the jurisdiction’s written procedures also causes the file to fail. Circle the appropriate “pass” or “fail” notation at the bottom of the work sheet.

**Repeat Steps 2 and 3** with each of the randomly selected establishment files. When all of the files have been reviewed, total the number of files that passed and divide by the total number of files that met the sample selection criteria that were reviewed. To meet Standard No. 6, eighty percent (80%) of the files must pass.

See the following example and blank Worksheet.
**EXAMPLE:**

**SAMPLE WORK SHEET - COMPLIANCE AND ENFORCEMENT**

File No: 1

<table>
<thead>
<tr>
<th>Establishment Name</th>
<th>Risk Factors and Food Code Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seafood Palace</td>
<td></td>
</tr>
<tr>
<td>Permit Number</td>
<td></td>
</tr>
<tr>
<td>339</td>
<td></td>
</tr>
<tr>
<td>Inspection Date</td>
<td></td>
</tr>
<tr>
<td>(start point)</td>
<td>3 May 2000</td>
</tr>
<tr>
<td>Reference Key to local inspection items</td>
<td>1 2,34, 5 6,7 8,11 13 14 15 NA NA 16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Point Inspection Violations</th>
<th>X</th>
<th>X</th>
<th>X</th>
<th>X</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was on site corrective action taken?</td>
<td>Yes RH</td>
<td>YES EM</td>
<td>Yes Glove</td>
<td></td>
</tr>
<tr>
<td>Was follow up corrective action taken?</td>
<td>Yes RCP</td>
<td>Yes TR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was enforcement action taken?</td>
<td>Yes WL</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Each column in which a violation is noted must receive a yes response to one of the three questions in order for the file to pass. Additionally, written procedures must have been followed.

In this example, the file passes because each of the violations noted on the start point inspection, dated 3 May 2000, has documented follow-up action in the file. The "NA" under Consumer Advisory indicates that the jurisdiction does not have a requirement for this intervention. The "yes" in the last column indicates that the compliance and enforcement procedure of the jurisdiction was followed.

*Define the acronyms and notations used to reflect follow-up action. RH = Reheat to safe temperature, RCP = risk control plan successfully completed, WL = warning letter sent, EM = embargo, TR = training required*
## WORK SHEET - COMPLIANCE AND ENFORCEMENT

<table>
<thead>
<tr>
<th>Establishment Name</th>
<th>Permit Number</th>
<th>Inspection Date (Start Point)</th>
<th>Unsafe Source</th>
<th>Inadequate Cooking</th>
<th>Improper holding Temperatures</th>
<th>Hot &amp; Cold Time/Temp Parameter not met (Time as a control, date marking, rapid cooling)</th>
<th>Bare hand contact with ready-to-eat PHF</th>
<th>Poor Personal Hygiene</th>
<th>Contaminated Food Contact Surfaces &amp; Equipment</th>
<th>Consumer Advisory (when required)</th>
<th>Demonstration of Knowledge by PIC</th>
<th>Employee Health Control system or policy implemented</th>
<th>Was the Written Procedure Followed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference Key to local inspection items</td>
<td>CIRCLE ONE</td>
<td>YES</td>
<td>or</td>
<td>NO</td>
<td>Each column in which a violation is noted must receive a yes response to one of the three questions in order for the file to pass. Additionally, written procedures must have been followed.</td>
<td>CIRCLE ONE</td>
<td>PASS/FAIL</td>
<td></td>
<td></td>
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</table>

*Define the acronyms and notations used to reflect follow up action.

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APPENDIX G - SUPPLEMENT TO STANDARD 7 - INDUSTRY AND COMMUNITY RELATIONS

It is necessary to maintain records of the Industry and Consumer Interaction forums and of the Educational Outreach activities over the last 24-month period. The following chart is used to document that status. Meeting minutes, agendas, by-laws, charters, membership criteria and lists, frequency of meetings, roles, performed actions and documentation of food safety educational efforts are to be maintained by the regulatory authority.

**INDUSTRY AND CONSUMER INTERACTION FORUMS**

<table>
<thead>
<tr>
<th>Forum Title</th>
<th>Regulatory Participants by Organization</th>
<th>Industry Participants by Organization</th>
<th>Consumer Participants by Organization</th>
<th>Meeting Dates</th>
<th>Summary of Activities Related to Control of Risk Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>


**EDUCATIONAL OUTREACH**

<table>
<thead>
<tr>
<th>Dates</th>
<th>Summary of Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>
OTHER OUTREACH ACTIVITIES

Please list any additional outreach activities of note below.

<table>
<thead>
<tr>
<th>Dates</th>
<th>Summary of Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
### APPENDIX H - SUPPLEMENT TO STANDARD 8- PROGRAM SUPPORT AND RESOURCES

**Program Support and Resources Worksheet**

Do you have sufficient funds, staff, equipment, and resources necessary to meet the following Standards? Answer “yes” or “no” in each block. A “no” answer requires an explanation. Use additional pages as needed. Disclosure and analysis only is required for Standards 1 through 7 and 9. Standard 8 requires a positive response to the three identified items. ****The row at the bottom for “other shared resources” provides a place for you to identify needs that may not be easily attached to a specific Standard (i.e. copy machines, data lines, etc.)

<table>
<thead>
<tr>
<th>Standard #</th>
<th>Funding</th>
<th>Staffing</th>
<th>Equipment</th>
<th>Other resources needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
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<td>8</td>
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<td>9</td>
<td></td>
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</tr>
</tbody>
</table>

****Other shared resources

*Do you meet the full-time equivalent (FTE) staff to inspection ratio as required in Standard 8? **Do your inspectors have the equipment provided and available as required in Standard 8? ***Does your department have the equipment and supplies necessary to maintain the records and reports system that supports the program as required in Standard 8?

The requirements of Standard 8 are met. _______Yes _______No

Signature: ___________________________ Title: ___________________________ Date: ________
# FDA National Registry Report

## Jurisdiction Reporting
<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Date</th>
</tr>
</thead>
</table>

## To:
FDA Regional Retail Food Specialist

### Enrollment Only:  □  Self Assessment: □  Verification Audit: □  Baseline Survey: □

<table>
<thead>
<tr>
<th>Standard #</th>
<th>Standard Met (✓ all that apply &amp; add the date met)</th>
<th>Verification Audit Confirmed</th>
<th>Original: □  Update: □</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td>Date: (required)</td>
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<td>5.</td>
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<td>Date: (required)</td>
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</tr>
<tr>
<td>6.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
<tr>
<td>9.</td>
<td></td>
<td>Date: (required)</td>
<td>Date:</td>
</tr>
</tbody>
</table>

Survey Audit Confirmed: □
Date:

### Risk Reduction Confirmed
- Yes: □  No: □

## Self Assessment Completed by:
- Name (printed):  
- Signature:  
- Title:  
- Agency:  

## Verification Audit Completed by:
- Name (printed):  
- Signature:  
- Title:  
- Agency:  

## Baseline Survey Completed by:
- Name (printed):  
- Signature:  
- Title:  
- Agency:  

## Baseline Survey-Update Completed by:
- Name (printed):  
- Signature:  
- Title:  
- Agency:  

## Action Plan Completed by:
- Name:  
- Signature:  
- Title:  
- Agency:  

Public reporting burden for this collection of information is estimated to average 92 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Food and Drug Administration, Office of Food Safety, Retail Food and Cooperative Programs Coordination Staff (HFS – 320), CFSAN, 5100 Paint Branch Parkway, College Park, Maryland 20740. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**Signed Affidavit of Permission to Publish in National Registry transmitted with this report?**
- Yes: □  No: □

<table>
<thead>
<tr>
<th>Program Manager Name: (print)</th>
<th>Signature of Program Manager:</th>
<th>Date</th>
</tr>
</thead>
</table>
RELEASE RECORD AND AGREEMENT – PERMISSION TO PUBLISH IN NATIONAL REGISTRY

I, the undersigned, am enrolling ______________________________ as participant in the Voluntary National Retail Food Regulatory Program Standards.

I, the undersigned, confirm, that a Self-Assessment of the __________________________ Retail Food Program, has been completed in accordance with the U.S. Food and Drug Administration (FDA) Voluntary National Retail Food Regulatory Program Standards on __________ (date).

I, the undersigned, confirm that ______________________________ (Name of Jurisdiction) has completed a baseline survey on the occurrence of foodborne illness risk factors.

I, the undersigned, confirm, that I have:

- Requested ______________________________ (Auditor) perform a Verification Audit of the above-named Retail Food Program Self-assessment.
- Reviewed and agree with the findings of the Verification Audit report dated __________.
- Requested that the Auditor forward the Verification Audit report, dated __________, to the FDA.

On behalf of the state or local regulatory agency, permission is hereby granted to publish the following in the FDA National Registry of Retail Food Protection Programs via the Internet:

- Enrollment information
- Self-assessment findings
- Baseline survey completion date and trend, if applicable
- Verification audit findings

Public reporting burden for this collection of information is estimated to average less than 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Food and Drug Administration, Food and Drug Administration, Office of Food Safety, Retail Food and Cooperative Programs Coordination Staff (HFS – 320), CFSAN, 5100 Paint Branch Parkway, College Park, Maryland 20740. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Signed: ______________________________ Title: ______________________________

Jurisdiction: ______________________________ Date: ______________________________
## APPENDIX J - SUPPLEMENT TO STANDARD 9 – PROGRAM ASSESSMENT

Retail Food Program Database of Foodborne Illness Risk Factors

**BASELINE DATA COLLECTION FORM**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time In:</th>
<th>Time Out:</th>
<th>Inspector:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Collected During:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishment:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Address:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State:</td>
<td></td>
<td>Zip:</td>
<td>County:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Facility Type:</td>
</tr>
</tbody>
</table>

**Certified Food Protection Manager:**  
- YES
- NO

- **41°F (5°C) or 45°F (7°C) or 41°F (5°C) + 45°F (7°C) is the cold holding requirement for this jurisdiction.**

### STATUS OF OBSERVATIONS:

<table>
<thead>
<tr>
<th>STATUS</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN</td>
<td>Item found in compliance (IN Compliance marking must be based on actual observations)</td>
</tr>
<tr>
<td>OUT</td>
<td>Item found out of compliance (OUT of Compliance marking must be based on actual observations)</td>
</tr>
<tr>
<td>NO</td>
<td>Not observable (NO marking is made when the data item is part of the establishment’s operation or procedures, OR is seasonal and is not occurring at the time of the inspection)</td>
</tr>
<tr>
<td>NA</td>
<td>Not applicable (NA marking is made when the data item is NOT part of the establishment’s operation or procedures)</td>
</tr>
</tbody>
</table>

### CDC RISK FACTORS

**CDC RISK FACTOR - FOODS FROM UNSAFE SOURCE**

#### FOOD SOURCE

**STATUS 1. Approved Source**

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>A. All food from Regulated Food Processing Plants/ No home prepared/canned foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN</td>
<td>OUT</td>
<td>B. All Shellfish from NSSP listed sources. No recreationally caught shellfish received or sold</td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>C. Game, wild mushrooms harvested with approval of Regulatory Authority</td>
</tr>
</tbody>
</table>

**STATUS 2. Receiving / Sound Condition**

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>A. Food received at proper temperatures/ protected from contamination during transportation and receiving/food is safe, unadulterated</th>
</tr>
</thead>
</table>
**CDC RISK FACTOR-INADEQUATE COOK**

### PATHOGEN DESTRUCTION

#### STATUS 4. Proper Cooking Temperature Per Potentially Hazardous Food (PHF)

*(NOTE: Cooking temperatures must be taken to make a determination of compliance or non-compliance. Do not rely upon discussions with managers or cooks to make a determination of compliance or non-compliance. If one food item is found out of temperature, that PHF category must be marked as OUT of compliance.)*

<table>
<thead>
<tr>
<th>IN OUT NA NO</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Raw shell eggs broken for immediate service cooked to 145°F (63°C) for 15 seconds. Raw shell eggs broken but not prepared for immediate service cooked to 155°F (68°C) for 15 seconds</td>
</tr>
<tr>
<td>B.</td>
<td>Comminuted Fish, Meats, Game animals cooked to 155°F (68°C) for 15 seconds</td>
</tr>
<tr>
<td>C.</td>
<td>Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as Chart specified and according to oven parameters per Chart. <em>(NOTE: This data item includes beef roasts, corned beef roasts, pork roasts, and cured pork roasts such as ham).</em></td>
</tr>
<tr>
<td>D.</td>
<td>Poultry; stuffed fish, stuffed meat, stuffed pasta, stuffed poultry, stuffed ratites, or stuffing containing fish, meat, poultry or ratites cooked to 165°F (74°C) for 15 seconds</td>
</tr>
<tr>
<td>E.</td>
<td>Wild game animals cooked to 165°F (74°C) for 15 seconds</td>
</tr>
<tr>
<td>F.</td>
<td>Raw animal foods cooked in microwave are rotated, stirred, covered, and heated to 165°F (74°C). Food is allowed to stand covered for 2 minutes after cooking</td>
</tr>
<tr>
<td>G.</td>
<td>Pork, ratites, injected meats are cooked to 155°F (68°C) for 15 seconds. Specify product and temperature in the space below. <em>(NOTE: Pork observed cooked between 145°F (63°C) and 155°F (68°C), would be marked OUT here, but marked IN under Supplemental Item 17 A. Please make notes in the comment section.)</em></td>
</tr>
<tr>
<td>H.</td>
<td>All other PHF cooked to 145°F (63°C) for 15 seconds</td>
</tr>
</tbody>
</table>
STATUS 5. Rapid Reheating For Hot Holding

IN OUT NA NO
A. PHF that is cooked and cooled on premises is rapidly reheated to 165°F (74°C) for 15 seconds for hot holding
B. Food reheated in a microwave is heated to 165°F (74°C) or higher
C. Commercially processed ready to eat food, reheated to 140°F (60°C) or above for hot holding
D. Remaining unsliced portions of roasts are reheated for hot holding using minimum oven parameters

**CDC RISK FACTOR - IMPROPER HOLD**
LIMITATION OF GROWTH OF ORGANISMS OF PUBLIC HEALTH CONCERN

STATUS 6. Proper Cooling Procedure

(NOTE: Record any temperature above 41°F (5°C) on blank lines. Production documents as well as statements from managers, person-in-charge (PIC), and employees, regarding the time the cooling process was initiated, may be used to supplement actual observations.)

IN OUT NA NO
A. Cooked PHF is cooled from 140°F (60°C) to 70°F (21°C) within 2 hours and from 140°F (60°C) to 41°F (5°C) or below within 6 hours
B. PHF (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
C. Foods received at a temperature according to Law are cooled to 41°F (5°C) within 4 hours

STATUS 7. Cold Hold (41°F (5°C))

(NOTE: For the purposes of this Baseline, 41°F (5°C) or below will be used as the criteria for assessing all PHF that are maintained/held cold. If one product is found out of temperature the item is marked OUT of compliance.)

IN OUT
A. PHF is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling or when time is used as a public health control. (Record products and temperatures in the space below.)
### STATUS 8. Hot Hold (140°F (60°C))

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NA</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>PHF is maintained at 140°F (60°C) or above, except during preparation, cooking, or cooling or when time is used as a public health control. <em>(NOTE: Products held between 135°F (57°C) and 140°F (60°C) should be marked OUT in 8A, but IN under supplemental item number 18A. Record actual product and measured temperatures in the space below.)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>B.</td>
<td>Roasts are held at a temperature of 130°F (54°C) or above</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### STATUS 9. Time

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NA</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Ready-to-eat PHF held for more than 24 hours is date marked as required (prepared on-site)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>B.</td>
<td>Discard RTE PHF and/or opened commercial container exceeding 7 days at ≤ 41°F (5°C) or 4 days at ≤ 45°F (7°C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>C.</td>
<td>Opened Commercial container of prepared ready-to-eat PHF is date marked as required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>D.</td>
<td>When time only is used as a public health control, food is cooked and served within 4 hours as required</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CDC RISK FACTOR-CONTAMINATED EQUIPMENT**

### STATUS 10. Separation / Segregation / Protection

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NA</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Food is protected from cross contamination by separating raw animal foods from raw ready-to-eat food and by separating raw animal foods from cooked ready-to-eat food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>B.</td>
<td>Raw animal foods are separated from each other during storage, preparation, holding, and display</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>C.</td>
<td>Food is protected from environmental contamination – critical items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IN</td>
<td>OUT</td>
<td>NA</td>
<td>NO</td>
</tr>
<tr>
<td>D.</td>
<td>After being served or sold to a consumer, food is not re-served</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### STATUS 11. Food-Contact Surfaces

*(NOTE: This item will require some judgment to be used when marking this item IN or OUT of compliance. This item should be marked OUT of compliance if observations are made that supports a pattern of non-compliance with this item. One dirty utensil, food contact surface or one sanitizer container without sanitizer would not necessarily support an OUT of compliance mark. You must provide notes concerning an OUT of compliance mark on this item.)*

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Food-contact surfaces and utensils are clean to sight and touch and sanitized before use</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CDC RISK FACTOR-POOR PERSONAL HYGIENE**

### STATUS 12. Proper, Adequate Handwashing

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Hands are clean and properly washed when and as required</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### STATUS 13. Good Hygienic Practices

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Food employees eat, drink, and use tobacco only in designated areas / do not use a utensil more than once to taste food that is sold or served / do not handle or care for animals present. Food employees experiencing persistent sneezing, coughing, or runny nose do not work with exposed food, clean equipment, utensils, linens, unwrapped single-service or single-use articles</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### STATUS 14. Prevention of Contamination From Hands

<table>
<thead>
<tr>
<th>IN</th>
<th>OUT</th>
<th>NA</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Employees do not contact exposed, ready-to-eat food with their bare hands. <em>(NOTE: In determining the status of this data item, an assessment of alternative methods when otherwise approved is to be made to determine implementation in accordance with the guidelines contained in Annex 3, 2001 Food Code, page 289.)</em></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## STATUS 15. Handwash Facilities

**IN OUT**
A. Handwash facilities conveniently located and accessible for employees
B. Handwash facilities supplied with hand cleanser / sanitary towels / hand drying devices

```
__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________
```

** CDC RISK FACTOR - OTHER **

## FOREIGN SUBSTANCES

**STATUS 16. Chemicals**

**IN OUT**
A. If used, only approved food or color additives. Sulfites are not applied to fresh fruits and vegetables intended for raw consumption
B. Poisonous or toxic materials, chemicals, lubricants, pesticides, medicines, first aid supplies, and other personal care items are properly identified, stored and used
C. Poisonous or toxic materials held for retail sale are properly stored

```
__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________
```

## SUPPLEMENTAL ITEMS

*(NOTE: The following items will be included as part of FDA’s 2003 Baseline. These are additional items to the original 42 data items (contained in Section 1 – 16) that were assessed as part of the original baseline.)*

**STATUS 17. Proper Cooking Temperature (Supplement to Item 4G)**

**IN OUT**
A. Pork is cooked to 145°F (63°C) or above for 15 seconds. *(NOTE: Final cooking temperatures of Pork Roasts are recorded under data item 4C.)*
B. Ratites and injected meats are cooked to 155°F (68°C) for 15 seconds

```
__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________
```

**STATUS 18. Hot Hold (135°F (57°C)) – (Supplement to Item 8A)**

**IN OUT**
A. PHF is maintained at 135°F (57°C) or above, except during preparation, cooking, or Cooling when time is used as a public health control. *(NOTE: Products held between 135°F (57°C) and 140°F (60°C) should be marked OUT in 8A. Record actual product and measured temperatures.)*
STATUS 19. Employee Health Policy

IN OUT A. Facility has a written policy that is consistent with 2-201 of the Food Code for excluding and restricting employees on the basis of their health and activities as they relate to diseases that are transmissible through food. Written policy includes a statement regarding employee responsibility to notify management of symptoms and illnesses identified in the Food Code.

__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________

STATUS 20. Treating Juice

IN OUT NA NO A. When packaged in a food establishment, juice is treated under a HACCP Plan to reduce pathogens or be labeled as specified in the Food Code.

__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________

STATUS 21. Cooling – Raw Shell Eggs

IN OUT NA NO A. After receiving, raw shell eggs are immediately placed under refrigeration that maintains ambient air temperature of 45°F (7°C) or less.

__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________

STATUS 22. Cold Holding – Raw Shell Eggs

IN OUT NA NO A. After receipt, raw shell eggs are stored in refrigerated equipment that maintains ambient air temperature of 45°F (7°C) or less.

__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________

STATUS 23. Food & food preparation for highly susceptible populations

(NOTE: These items pertain specifically to those facilities that serve Highly Susceptible Populations as defined in the Food Code. Establishments would include such facility types as Hospitals, Nursing Homes and Elementary Schools.)

IN OUT NA NO A. Prepackaged juice/beverage containing juice with a warning label (21 CFR, Section 101.17(g)) not served.

IN OUT NA NO B. Pasteurized eggs or egg products substituted for raw shell eggs in preparation of foods that are not cooked to minimum required temperatures, (specified in Section 4.0 of this Baseline Form), unless cooked to order & immediately served; broken immediately before baking and thoroughly cooked; or included as an ingredient for a recipe supported by a HACCP plan that controls Salmonella Enteritidis.

IN OUT NA NO C. Raw or partially cooked animal food and raw seed sprouts not served.

__________________________________________________________________________________________
__________________________________________________________________________________________
______________________________________________________________________________
SHEET-MARKING INSTRUCTIONS
Retail Food Program Database of Foodborne Illness Risk Factors
Data Collection Form

Date: ____________________________
Time In: ____________________________ Time Out: ____________________________ Inspector: ____________________________

Data Collected During: ____________________________ Establishment: ____________________________ Manager: ____________________________
Physical Address: ____________________________ City: ____________________________ Industry Segment: ____________________________
State: ____________________________ Zip: ____________________________ County: ____________________________ Facility Type: ____________________________

Certified Food Protection Manager: YES NO

YES marking indicates that there is a food protection manager present at the time of inspection who has been certified through a CFP recognized program.

NO marking indicates that there are NO certified food protection managers in the establishment at the time of inspection OR certification has been obtained through a program NOT recognized by the Conference for Food Protection.

_____ 41°F (5°C) or _____ 45°F (7°C) or _____ 41°F (5°C) + 45°F (7°C) is the cold holding requirement for this jurisdiction.

STATUS OF OBSERVATIONS:
IN = Item found in compliance (IN Compliance marking must be based on actual observations)
OUT = Item found out of compliance (OUT of Compliance marking must be based on actual observations)
NO = Not observable (NO marking is made when the data item is part of the establishment’s operation or procedures, OR is seasonal and is not occurring at the time of the inspection)
NA = Not applicable (NA marking is made when the data item is NOT part of the establishment’s operation or procedures)

CDC RISK FACTORS

**CDC RISK FACTOR - FOODS FROM UNSAFE SOURCE**

FOOD SOURCE

STATUS 1. Approved Source

A. All food from Regulated Food Processing Plants/ No home prepared/canned foods

IN / OUT This item should be marked either IN or OUT. If it is marked OUT of compliance make notes as to why it is OUT of compliance.
B. All Shellfish from NSSP listed sources. No recreationally caught shellfish received or sold

**IN / OUT**
This item may be marked either **IN** or **OUT**. If it is marked **OUT** of compliance make notes as to why it is **OUT** of compliance.

**NA**
This item is marked **NA** if no shellfish are sold at the establishment.

C. Game, wild mushrooms harvested with approval of Regulatory Authority

**IN / OUT**
This item may be marked either **IN** or **OUT**. If it is marked **OUT** of compliance make notes as to why it is **OUT** of compliance.

**NA**
This item is marked **NA** if no game or wild mushrooms are sold at the establishment.

**NO**
This item is marked **NO** if no game or wild mushrooms are in the facility at the time. Mark **NO** if game/wild mushrooms are a seasonal or an occasional menu item but are not being used at the time of inspection.

**STATUS 2. Receiving / Sound Condition**

A. Food received at proper temperatures/protected from contamination during transportation and receiving/food is safe, unadulterated.

**IN / OUT**
This item may be marked **IN** or **OUT** of compliance on any one of the listed items. If the food is safe and unadulterated, but you are not able to check any temperatures of food during receiving or are not able to determine the condition of foods transported, mark the item **IN** compliance with an explanation on the lines below as to what the **IN** represents. If one or all the listed items are **OUT** of compliance, make appropriate notes as to why the item is marked out of compliance.

**STATUS 3. Records**

A. Shellstock tags/labels retained for 90 days from the date the container is emptied.

**IN / OUT**
This item may be marked **IN** or **OUT** of compliance with notes made concerning the reason it is marked **OUT** of compliance.

**NA**
This item is marked **NA** if shell stock is not used in the establishment.

**NO**
This item is marked **NO** when shellstock is a seasonal or occasional item and has not been sold or used within the establishment within the past 90 days or you were unable to determine from invoices or purchases records whether shellstock was used or sold within the past 90 days.
B. As required, written documentation of parasite destruction maintained for 90 days for fish products.

IN / OUT This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if these types of fish products are not used in the establishment.

NO This item may be marked NO if fish products of this type are a seasonal or occasional item and no fish products of this type are in the facility during visit and you are unable to determine compliance through purchase records, on-site documentation or invoices.

C. CCP monitoring records maintained in accordance with HACCP plan when required.

IN / OUT This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if these types of records are not required for the operation of the establishment.

**CDC RISK FACTOR – INADEQUATE COOK**

PATHOGEN DESTRUCTION

STATUS 4. Proper Cooking Temperature Per Potentially Hazardous Food (PHF)

(NOTE: Cooking temperatures must be taken to make a determination of compliance or non-compliance. Do not rely upon discussions with managers or cooks to make a determination of compliance or non-compliance. If one food item is found out of temperature, that PHF category must be marked as OUT of compliance.)

A. Raw shell eggs broken for immediate service cooked to 145°F (63°C) for 15 seconds. Raw shell eggs broken but not prepared for immediate service cooked to 155°F (68°C) for 15 seconds.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA when raw shell eggs are not used in the establishment, including raw shell eggs not used in recipes.

NO This item is marked NO if raw shell eggs are used in the establishment, but you are unable to determine the cooking temperature.
B. Comminuted Fish, Meats, Game Animals (commercially raised) cooked to 155°F (68°C) for 15 seconds

IN / OUT  This item may be marked IN or OUT of compliance for one or all of the types of meat, with notes made concerning the reason if it is marked OUT of compliance.

NA  This item is marked NA if no comminuted meats are used in the establishment.

NO  This item is marked NO if one or more types of meat are used, but you are unable to determine the cooking temperature for any of them.

C. Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as chart specified and according to oven parameters per chart. (NOTE: This data item includes beef roasts, corned beef roasts, pork roasts, and cured pork roasts such as ham).

IN / OUT  This item may be marked IN or OUT of compliance for one or all of the types of meat, with notes made concerning the reason if it is marked OUT of compliance.

NA  This item is marked NA when roasts or formed roasts are not cooked in the establishment.

NO  This item is marked NO if one or more of these meat items are used, but you are unable to determine the cooking temperature for any of them.

D. Poultry; stuffed fish, stuffed meat, stuffed pasta, stuffed poultry, stuffed ratites, or stuffing containing these items cooked to 165°F (74°C) for 15 seconds

IN / OUT  This item may be marked IN or OUT of compliance for one or all of the types of stuffed items or stuffing containing these items with notes made concerning the reason it is OUT of compliance.

NA  This item is marked NA if none of the types of stuffed items or stuffing containing these items are used in the establishment.

NO  This item is marked NO if one or more of these food items are used, but you are unable to determine the cooking temperature for any of them.

E. Wild game animals cooked to 165°F (74°C) for 15 seconds

IN / OUT  This item may be marked IN or OUT of compliance with notes made concerning the reason it is OUT of compliance.

NA  This item is marked NA if no wild game animals are used in the establishment.

NO  This item is marked NO if wild game animals are used, but you are unable to determine the cooking temperature for any of them.
F. Raw animal foods cooked in microwave are rotated, stirred, covered, and heated to 165°F (74°C). Food is allowed to stand covered for 2 minutes after cooking.

IN / OUT
This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA
This item is marked NA if raw animal foods are not cooked in a microwave.

NO
This item is marked NO if raw animal foods are cooked in a microwave but you are unable to determine the cooking temperatures during your inspection.

G. Pork, Ratites and injected meats are cooked to 155°F (68°C) for 15 seconds.

IN / OUT
This item may be marked IN or OUT of compliance for one or all of the foods listed, with notes made concerning the reason it is marked OUT of compliance. (NOTE: Pork observed cooked between 145°F (63°C) and 155°F (68°C), would be marked OUT here, but marked IN under supplemental item number 17. Please make notes in the comment section.)

NA
This item is marked NA if NONE of the listed foods are cooked in the establishment.

NO
This item is marked NO if one or more of the listed foods are cooked in the establishment, but you are unable to determine the cooking temperature during your visit.

H. All other PHF cooked to 145°F (63°C) for 15 seconds.

IN / OUT
This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA
This item is marked NA if no other PHF foods are cooked in the establishment.

NO
This item is marked NO if one or more of the food types for this category are cooked in the establishment, but you are unable to determine the cooking temperature during your visit.

STATUS 5. Rapid Reheating For Hot Holding

A. PHF that is cooked and cooled on premises is rapidly reheated to 165°F (74°C) for 15 seconds for hot holding

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA
This item is marked NA if foods are not held over for a second service.

NO
This item is marked NO if foods are held over for a second service, but you are unable to check the reheating procedure. Do not depend solely on discussions with management or cooks to make a determination on this item.
B. Food reheated in a microwave is heated to 165°C (74°F) or higher.

IN / OUT  This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA  This item is marked NA if foods are not reheated in a microwave in the establishment.

NO  This item is marked NO if foods are reheated in a microwave but you were unable to make a determination of compliance.

C. Commercially processed ready to eat food reheated to 140°F (60°C) or above for hot holding.

IN / OUT  This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA  This item is marked NA if commercially processed ready to eat foods are not reheated in the establishment.

NO  This item is marked NO if commercially processed ready to eat foods are reheated in the establishment but you were unable to make a determination of compliance.

D. Remaining unsliced portions of roasts are reheated for hot holding using minimum oven parameters.

IN / OUT  This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA  This item is marked NA if remaining unsliced portions of beef roasts are not used or reheated in the establishment.

NO  This item is marked NO if remaining unsliced portions of beef roasts are reheated in the establishment, but you were unable to make a determination of compliance.
**CDC RISK FACTOR - IMPROPER HOLD**

LIMITATION OF GROWTH OF ORGANISMS OF PUBLIC HEALTH CONCERN

*(NOTE: Record any temp above 41 °F (5 °C) on blank lines. Production documents as well as statements from managers, person-in-charge (PIC), and employees regarding the time the cooling process was initiated may be used to supplement actual observations.)*

STATUS 6. Proper Cooling Procedure

A. Cooked PHF is cooled from 140°F (60°C) to 70°F (21°C) within 2 hours and from 140°F (60°C) to 41°F (5°C) or below within 6 hours.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if the establishment is a cook-serve establishment type or does not cool or reheat food.

NO This item is marked NO if the establishment does cool PHF for a second service, but you were unable to make a determination of compliance.

B. PHF is cooled to 41°F (5°C) or below within 4 hours (prepared from ingredients at ambient temperature)

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if the establishment has no PHF that are prepared from ingredients at ambient temperature.

NO This item is marked NO if these types of foods are prepared, but you were unable to make a determination of compliance.

C. Foods received at a temperature according to Law are cooled to 41°F (5°C) within 4 hours.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if the establishment does not receive raw shell eggs, shellstock, milk or other products that have a transport temperature above 41°F (5°C).

NO This item is marked NO if the establishment does receive raw shell eggs, shellstock, milk or other products that have a transport temperature above 41°F (5°C), but you were unable to determine if these products were cooled down as described above.
7. Cold Hold

(NOTE: For the purposes of this Baseline, 41°F (5°C) or below will be used as the criteria for assessing all PHF that are maintained/held cold. If one product is found out of temperature the item is marked OUT of compliance.)

A. PHF is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling or when time is used as a public health control.

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

8. Hot Hold

(NOTE: If one product is found out of temperature the item is marked OUT of compliance. Record all temperatures taken.)

A. PHF is maintained at 140°F (60°C) or above, except during preparation, cooking, or cooling or when time is used as a public health control.

(NOTE: Products held between 135°F (57°C) and 140°F (60°C) should be marked OUT in 8.A. but IN under supplemental item number 18A. Record actual product and measured temperatures taken.)

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA
This item is marked NA if there is no PHF hot holding in the establishment.

NO
This item is marked NO only in rare instances when you are unable to determine compliance. Inspections should be conducted during a time when hot holding temperatures can be taken.

B. Roasts are held at a temperature of 130°F (54°C) or above

IN / OUT
This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA
This item is marked NA if roast is not a menu item.

NO
This item is marked NO only when you are unable to determine compliance. Inspections should be conducted during a time when hot holding temperatures can be taken.
STATUS  9. Time

A. Ready-to-eat PHF held for more than 24 hours is date marked as required (prepared on site)

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if there are no RTE PHF held for more than 24 hours

NO This item is marked NO when RTE PHF are held for more than 24 hours and you are unable to determine compliance. Do not depend solely on information from managers or cooks.

B. Discard RTE PHF and/or opened commercial container exceeding 7 days at < 41°F (5°C) or 4 days at < 45°F (7°C).

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA, such as when there is no RTE PHF prepared-on-premises, or opened commercial container held for more than 24 hours.

NO This item is marked NO if no date marking is done in the establishment and you are unable to determine compliance based on other information provided by PIC, manager or employees.

C. Opened commercial container of prepared ready-to-eat PHF is date marked as required.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if there are no commercially prepared RTE PHF held.

NO This item is marked NO when commercially prepared RTE PHF are date marked and you are unable to determine compliance. Do not depend solely on information from managers or cooks.

D. When time only is used as a public health control, food is cooked and served within 4 hours as required.

IN / OUT This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

NA This item is marked NA if time is not used as a public health control.

NO This item is marked NO when time is used for a public health control and you are unable to determine compliance. Do not depend solely on information from managers or cooks.
**CDC RISK FACTOR-CONTAMINATED EQUIPMENT**

PROTECTION FROM CONTAMINATION

<table>
<thead>
<tr>
<th>STATUS</th>
<th>10. Separation / Segregation / Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>______</td>
<td>A. Food is protected from cross-contamination by separating raw animal foods from raw ready-to-eat food and by separating raw animal foods from cooked ready-to-eat food.</td>
</tr>
<tr>
<td>IN / OUT</td>
<td>This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.</td>
</tr>
<tr>
<td>NA</td>
<td>This item is marked NA, such as when there is a vegetarian menu or only commercially pre-cooked animal foods are used.</td>
</tr>
<tr>
<td>NO</td>
<td>This item is marked NO when raw animal foods are used or served seasonally and you are unable to determine compliance.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>______</th>
<th>B. Raw animal foods are separated from each other during storage, preparation, holding, and display.</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN / OUT</td>
<td>This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.</td>
</tr>
<tr>
<td>NA</td>
<td>This item is marked NA when there are NO raw animal foods used or only one raw animal species is used.</td>
</tr>
<tr>
<td>NO</td>
<td>This item is marked NO when raw animal foods are used or served seasonally and you are unable to determine compliance.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>______</th>
<th>C. Food is protected from environmental contamination – critical items.</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN / OUT</td>
<td>This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>______</th>
<th>D. After being served or sold to a consumer, food is not re-served.</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN / OUT</td>
<td>This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance. <em>(NOTE: Actual observation of the disposition of unwrapped/unprotected, served food being returned to the kitchen must be made.)</em></td>
</tr>
<tr>
<td>NA</td>
<td>This item may be marked NA for retail operations for which there is no opportunity for re-service of foods, such as carry-out service only in restaurants or meat, produce and seafood depts. within retail food stores.</td>
</tr>
<tr>
<td>NO</td>
<td>This item may be marked NO if you are not able to observe the disposition of unwrapped/unprotected foods after they have been served to the public and returned to the kitchen or food preparation area.</td>
</tr>
</tbody>
</table>
STATUS 11. Food Contact Surfaces

(Note: This item will require some judgment to be used when marking this item IN or OUT of compliance. This item should be marked OUT of compliance if observations are made that supports a pattern of non-compliance with this item. One dirty utensil, food contact surface or one sanitizer container without sanitizer would not necessarily support an OUT of compliance mark. You must provide notes concerning an OUT of compliance mark on this item.)

A. Food contact surfaces and utensils are clean to sight and touch and sanitized before use

IN / OUT This item may be marked IN or OUT of compliance with notes made concerning the reason if it is marked OUT of compliance.

**CDC RISK FACTOR-POOR PERSONAL HYGIENE**

PERSONNEL

STATUS 12. Proper, Adequate Handwashing

(Note: Maximum effort must be made to observe all sections of PERSONNEL.)

A. Hands are clean and properly washed when and as required.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance. This item must be marked OUT of compliance if one person is observed with dirty hands or hands that have not been properly washed as required.

NO This item may be marked NO for retail operations only in the case where no food workers are present to observe, such as a retail food store produce section where the display aisle has been fully stocked prior to the inspection.

STATUS 13. Good Hygienic Practices

A. Food Employees eat, drink, and use tobacco only in designated areas / do not use a utensil more than once to taste food that is sold or served / do not handle or care for animals present. Food employees experiencing persistent sneezing, coughing, or runny nose do not work with exposed food, clean equipment, utensils, linens, unwrapped single-service or single-use articles

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance. This item must be marked OUT of compliance if one person is observed to be out of compliance with this item.

NO This item may be marked NO for retail operations only in the case where no food workers are present.
14. Prevention of Contamination From Hands

A. Employees do not contact exposed, ready-to-eat food with their bare hands.

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance. This item must be marked OUT of compliance if one person is observed to be out of compliance with this item. *(NOTE: In determining the status of this data item, an assessment of alternative methods when otherwise approved is to be made to determine implementation in accordance with the guidelines contained in Annex 3, 2001 Food Code, page 289.)*

NA  This item may be marked NA for facilities that do not prepare ready-to-eat foods, such as retail meat or seafood department.

NO  This item may be marked NO for retail operations that prepare ready-to-eat foods only in the case where no food workers are present.

15. Handwash Facilities

A. Handwash facilities conveniently located and accessible for employees.

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

B. Handwash facilities supplied with hand cleanser / sanitary towels / hand drying devices

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

**CDC RISK FACTOR - OTHER**

FOREIGN SUBSTANCES

16. CHEMICAL

A. If used, only approved food or color additives. Sulfites are not applied to fresh fruits and vegetables intended for raw consumption.

IN  This item is marked IN compliance if no unapproved additives are on site; or if sulfites are on the premises, but they are used properly.

OUT  This item is marked OUT of compliance if unapproved additives are found on premises or approved additives are improperly used, i.e. on fresh fruits & vegetables.

NA  This item is marked NA if the food establishment does not use any additives.
B. Poisonous or toxic materials, chemicals, lubricants, pesticides, medicines, first aid supplies, and other personal care items properly identified, stored and used.

**IN / OUT**

This item may be marked **IN** or **OUT** of compliance, with notes made concerning the reason if marked **OUT** of compliance. It may be marked **OUT** of compliance for improper storage or use of any one of the listed items.

C. Poisonous or toxic materials held for retail sale are properly stored.

**IN / OUT**

This item may be marked **IN** or **OUT** of compliance, with notes made concerning the reason if it is marked **OUT** of compliance. It may be marked **OUT** of compliance for improper storage or use of any one of the items.

**NA**

This item may be marked **NA** if the establishment does not hold “poisonous or toxic materials for retail sale.”

**SUPPLEMENTAL ITEMS**

(Note: The following items will be included as part of FDA’s 2003 Baseline. These are additional items to the original 42 data items (contained in Section 1 – 16) that were assessed as part of the original baseline.)

**STATUS 17. Proper Cooking Temperature (Supplement to Item 4G)**

A. Pork is cooked to 145°F (63°C) or above for 15 seconds.  *(NOTE: Final cooking temperatures of Pork Roasts are recorded under data item 4C.)*

**IN / OUT**

This item may be marked **IN** or **OUT** of compliance for pork, with notes made concerning the reason it is marked **OUT** of compliance. Please make note of actual temperature in the comment section.

**NA**

This item may be marked **NA** if pork is not cooked in the establishment

**NO**

This item may be marked **NO** if pork is cooked in the establishment, but you are unable to determine the cooking temperature during your visit.

B. Ratites and injected meats are cooked to 155°F (68°C) or above for 15 seconds.

**IN / OUT**

This item may be marked **IN** or **OUT** of compliance for ratites or injected meats, with notes made concerning the reason it is marked **OUT** of compliance. Make notes of actual temperatures in the comments section.

**NA**

This item may be marked **NA** if no ratites or injected meats are prepared in the establishment.

**NO**

This item may be marked **NO** if ratites or injected meats are cooked in the establishment, but you are unable to determine the cooking temperature during your visit.
18. Hot Hold (135°F (57°C)) – (Supplement to Item 8A.)

A. PHF is maintained at 135°F (57°C) or above, except during preparation, cooking, or cooling or when time is used as a public health control.

(NOTE: Products held between 135°F (57°C) and 140°F (60°C) should be marked OUT in 8A. Record actual product and measured temperatures.)

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance.

NA This item may only be marked NA if there is no PHF hot holding in the establishment.

NO This item should be marked NO only in rare instances, when you are unable to determine compliance. Inspections should be conducted during a time when hot holding temperatures can be taken.

19. Employee Health Policy

A. Facility has a written policy that is consistent with 2-201 of the Food Code for excluding and restricting employees on the basis of their health and activities as they relate to diseases that are transmissible through food. Written policy includes a statement regarding employee responsibility to notify management of symptoms and illnesses identified in the Food Code.

IN / OUT This item must be marked IN or OUT of compliance, with notes made concerning the reason if it is marked OUT of compliance. (NOTE: In order to mark this item IN the establishment must have a WRITTEN employee health policy.)

20. Treating Juice

A. When packaged in a food establishment, juice is treated under a HACCP Plan to reduce pathogens or be labeled as specified in the Food Code.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason it is marked OUT of compliance.

NA This item is marked NA when juice is not packaged in the food establishment.
STATUS 21. Cooling – Raw Shell Eggs

A. After receiving, raw shell eggs are immediately placed under refrigeration that maintains ambient air temperature of 45°F (7°C) or less.

IN / OUT This item may be marked IN or OUT only if you are there to observe receipt of raw shell eggs and their disposition.

NA This item is marked NA when the establishment does not receive raw shell eggs.

NO This item is marked NO only when raw shell eggs are received but you are not there to observe their actual receipt and immediate disposition OR raw shell eggs are only a seasonal item.

STATUS 22. Cold Holding – Raw Shell Eggs

A. After receipt, raw shell eggs are stored in refrigerated equipment that maintains ambient air temperature of 45°F (7°C) or less.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason it is marked OUT of compliance.

NA This item is marked NA when the establishment does NOT receive raw shell eggs.

NO This item is marked NO when raw shell eggs are received but there were no raw shell eggs on the premises at this time and you were unable to determine compliance. Additionally NO is marked when raw shell eggs are a seasonal or a limited use item within the establishment and none are on the premises at the time of your inspection.

STATUS 23. Food & Food Preparation for Highly Susceptible Populations

*(NOTE: These items pertain specifically to those facilities that serve Highly Susceptible Populations as defined in the Food Code. Establishments would include such facility types as Hospitals, Nursing Homes and Elementary Schools.)*

A. Prepackaged juice/beverage containing juice with a warning label (21 CFR, Section 101.17(q)) not served.

IN / OUT This item may be marked IN or OUT of compliance, with notes made concerning the reason if marked OUT of compliance.

NA This item is marked NA if no highly susceptible population is served or if the facility does not serve any juice.

NO This item is marked NO if juice is served to a highly susceptible population, but no juice or packages containing juice are present within the establishment to verify compliance.
B. Pasteurized eggs or egg products substituted for raw shell eggs in preparation of foods that are not cooked to minimum required temperatures, (specified in Section 4.0 of this Baseline Form), unless cooked to order & immediately served; broken immediately before baking and thoroughly cooked; or included as an ingredient for a recipe supported by a HACCP plan that controls Salmonella Enteritidis.

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if marked OUT of compliance.

NA
This item is marked NA if no highly susceptible population is served or if eggs are not served.

NO
This item is marked NO if eggs are used in the preparation of foods in an establishment that serves a highly susceptible population and the preparation of eggs is not observed and no eggs or pasteurized egg /pasteurized egg products are in the establishment.

C. Raw or partially cooked animal food and raw seed sprouts not served.

IN / OUT
This item may be marked IN or OUT of compliance, with notes made concerning the reason if marked OUT of compliance.

NA
This item is marked NA if raw or partially cooked animal food or raw seed sprouts are not prepared for service within an establishment that services a highly susceptible population.
# BASELINE DATA COLLECTION
## REFERENCE SHEET

### 1997 FOOD CODE

<table>
<thead>
<tr>
<th>CDC Risk Factor</th>
<th>FOODS FROM UNSAFE SOURCES</th>
<th>CDC Risk Factor</th>
<th>INADEQUATE COOK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Food Source</strong></td>
<td><strong>Data Item – 1A</strong></td>
<td><strong>Pathogen Destruction</strong></td>
<td></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-201.11* Compliance with Food Law</td>
<td>3-401.11(A)(1)(a)* Raw Animal Foods</td>
<td></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-201.12* Food in A Hermetically Sealed Container.</td>
<td>3-401.11(A)(2)* Raw Animal Foods</td>
<td></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-201.13* Fluid Milk and Milk Products</td>
<td></td>
<td><strong>Data Item – 1B</strong></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-201.14* Fish</td>
<td>3-401.11(A)(2)* Raw Animal Foods</td>
<td></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-201.15* Molluscan Shellfish</td>
<td></td>
<td><strong>Data Item – 1C</strong></td>
</tr>
<tr>
<td>1. Approved Source</td>
<td>3-202.18* Shellstock Identification</td>
<td>3-401.11(A)(3)* Raw Animal Foods</td>
<td></td>
</tr>
<tr>
<td><strong>Data Item – 1C</strong></td>
<td>3-201.16* Wild Mushrooms</td>
<td><strong>Data Item – 4A</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Data Item – 1C</strong></td>
<td>3-201.17* Game Animals</td>
<td>3-401.11(A)(3)* Raw Animal Foods</td>
<td></td>
</tr>
<tr>
<td>2. Receiving/Sound Condition</td>
<td><strong>Data Item – 2A</strong></td>
<td><strong>Data Item – 4B</strong></td>
<td></td>
</tr>
<tr>
<td>2. Receiving/Sound Condition</td>
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<td>2. Receiving/Sound Condition</td>
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<td>3-401.11(B)(1)(2)* Raw Animal Foods</td>
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<td><strong>Data Item – 4D</strong></td>
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<td><strong>Data Item – 4F</strong></td>
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<td>3-401.12* Microwave Cooking</td>
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<td><strong>Data Item – 5A</strong></td>
<td>3-403.11(A)* Reheating for Hot Holding</td>
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<td><strong>Data Item – 5B</strong></td>
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<td>3-201.12* Food in A Hermetically Sealed Container.</td>
<td>3-403.11(B)* Reheating for Hot Holding - Microwave</td>
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<td><strong>Data Item – 3B</strong></td>
<td><strong>Data Item – 5C</strong></td>
<td>3-403.11(C)* Reheating for Hot Holding – Commercially Processed RTE Food</td>
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1997 FOOD CODE

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### 6. Proper Cooling Procedure

**Data Item 6A**
3-501.14(A)* Cooling – Cooked PHF

**Data Item 6B**
3-501.14(B)* Cooling – PHF prepared from ingredients at ambient temperature

**Data Item 6C**
3-501.14(C)* Cooling – PHF receipt of foods allowed at >41°F (5°C) during shipment

### 7. Cold Hold (41°F (5°C))

**Data Item 7A**
3-501.16(B)* PHF, Hot and Cold Holding
(For the purposes of this Baseline, 41°F (5°C) or below will be used as the criteria for assessing all PHF that are maintained/held cold.)

### 8. Hot Hold (140°F (60°C))

**Data Item 8A**
3-501.16(A)* PHF, Hot and Cold Holding

**Data Item 8B**
3-501.16(A)* PHF, Hot and Cold Holding

### 9. Time

**Data Item 9A**
3-501.17(A)(1)(2)* Ready-to-Eat, PHF, Date Marking – On-premises Preparation
(Food is to be date marked at the time of preparation with the “consume by” date. This consume by date should include the day if preparation and is:
(1) ≤ 7 calendar days at 41°F (5°C) or less; or
(2) ≤ 4 calendar days at 45°F (7°C)

**Data Item 9B**
3-501.18* Ready-to-Eat, PHF, Disposition
(Food shall be discarded if not consumed within ≤ 7 calendar days at 41°F (5°C) or less; or ≤ 4 calendar days at 45°F (7°C))

**Data Item 9C**
3-501.17(C)* Ready-to-Eat, PHF, Date Marking – commercially processed food
(Commercially processed food containers shall be clearly marked, at the time originally opened in a food establishment, with the consume by date which is, including the day the original container is opened:
(1) ≤ 7 calendar days at 41°F (5°C) or less; or
(2) ≤ 4 calendar days at 45°F (7°C)

**Data Item 9D**
3-501.19* Time as a Public Health Control
### Baseline Data Collection
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#### 1997 FOOD CODE

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<td><strong>10. Separation / Segregation /Protection</strong></td>
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| **Data Item 10A** | 3-302.11(A)(1)* Packaged and Unpackaged Food – Separation, Packaging, and Segregation  
(Separate raw animal foods from raw RTE and cooked RTE foods) |
| **Data Item 10B** | 3-302.11(A)(2)* Packaged and Unpackaged Food – Separation, Packaging, and Segregation  
(Separate raw animal foods by using separate equipment, special arrangement of food in equipment to avoid cross contamination of one type with another, or by preparing different types of food at different time or in separate areas) |
| **Data Item 10C** | 3-302.11(A)(4-6)* Packaged and Unpackaged Food – Separation, Packaging, and Segregation  
3-304.11(B)* Food Contact with Equipment and Utensils |
| **Data Item 10D** | 3-306.14(A)(B)* Returned Food, Reservice or Sale |

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<th>CDC Risk Factor</th>
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<td><strong>12. Proper, Adequate Handwashing</strong></td>
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| **Data Item 12A** | 2-301.11* Clean Condition  
2-301.12* Cleaning Procedure  
2-301.14* When to Wash  
2-301.15* Where to Wash |
| **13. Good Hygiene Practices** | |
| **Data Item 13A** | 2-401.11* Eating, Drinking, or Using Tobacco  
2-401.12* Discharges from the Eyes, Nose and Mouth  
2-403.11* Handling Prohibition – Animals  
3-301.12* Preventing Contamination when Tasting |
| **14. Prevention of Contamination from Hands** | |
| **Data Item 14A** | 3-301.11* Preventing Contamination from Hands |

| **15. Handwash Facilities** | |
| **Data Item 15A** | 5-203.11* Handwashing Lavatory-Numbers and Capacity  
5-204.11* Handwashing Lavatory-Location and Placement  
5-205.11* Using a Handwashing Lavatory-Operation and Maintenance |
| **Data Item 15B** | 6-301.11 Handwashing Cleanser, Availability  
6-301.12 Hand Drying Provision |
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<tr>
<td>3-202.12* Additives</td>
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<td>3-302.14* Protection from Unapproved Additives</td>
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<td>(NOTE: Regarding SULFITES – Refers to any sulfites added in the food establishment, not to foods processed by a commercial processor or that come into the food establishment already on foods)</td>
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<td><strong>Data Item 16B</strong></td>
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<td>7-101.11* Identifying Information, Prominence-Original Containers</td>
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<td>7-102.11* Common Name-Working Containers</td>
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**Operational Suppliers and Applications**
- 7.201.11* Separation-Storage
- 7-202.11* Restriction-Presence and Use
- 7-203.11* Poisonous or Toxic Material Containers – Prohibitions
- 7-204.11* Sanitizers, Criteria-Chemicals
- 7-204.12* Chemicals for Washing Fruits and Vegetables
- 7-204.13* Boiler Water Additives, Criteria
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- 7-205.11* Incidental Food Contact, Criteria-Lubricants
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<td>3-401.11(A)(1)* Raw Animal Foods (pork)</td>
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<td>3-401.11(A)(2)* Raw Animal Foods (ratites and injected meats)</td>
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<td><strong>18. Hot Hold (135° F) (supplement to 8A – 2005 Food Code(proposed))</strong></td>
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<td><strong>19. Employee Health Policy</strong></td>
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<td><strong>Data Item 19A</strong></td>
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<td>2-201.11 Responsibility of Person in Charge</td>
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<td>2-201.12* Exclusions and Restrictions</td>
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<td>2-201.13 Removal of Exclusions and Restrictions</td>
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<td>2.201.14* Responsibility of a Food Employee or an Applicant to Report to the Person in Charge</td>
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<td>2-201.15* Reporting by the Person in Charge</td>
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<td>3-202.110 Juice Treated</td>
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<td>3-404.11  Treating Juice</td>
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<td>3-501.14(D)* Cooling</td>
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<td>3-801.11(D)* Prohibited Foods</td>
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**LEGEND**

C = Celsius  
F = Fahrenheit  
RTE = Ready-to-Eat  
PHF = Potentially Hazardous Food  
R.A. = Regulatory Authority
Title:
Report - Food Contact and Utensil Barrier Usage Committee

Issue you would like the Conference to consider:
The Food Contact and Utensil Barrier Usage Committee seeks Council II's acknowledgement of the Committee Report which is made up of the Reference Document and PowerPoint presentation.

Public Health Significance:
The Committee recognizes the need for a Brand neutral guidance document illustrating the effective use of barriers and utensils when handling foods, including the use of disposable gloves, and the process of barrier use related to hand hygiene.

The purpose of the Reference document and PowerPoint presentation is to:

1. Reflect industry best practices regarding bare hand contact barriers
2. Provide a training and teaching tool that can be used by industry and regulatory agencies
3. Demonstrate alternatives to bare hand contact

Recommended Solution: The Conference recommends...:
acknowledgement of the work of the Food Contact and Utensil Barrier Usage Committee and thanks the Committee for their hard work and dedication to this issue.

The Conference further recommends that this Committee be disbanded as they have completed their charges.
Submitter Information:
Name: Stephen Posey, Chair
Organization: Food Contact and Utensil Barrier Usage Committee
Address: Brinker International 6700 LBJ Freeway, Suite 3105
City/State/Zip: Dallas, TX 75240
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E-mail: stephen.posey@brinker.com

Attachments:
- "1. Food Contact and Utensil Barrier Usage Committee Final Report"
- "2. Barrier to Bare Hand Contact Reference Document - English"
- "3. Barrier to Bare Hand Contact Reference Document - Spanish"
- "4. Barrier to Bare Hand Contact Power Point Presentation - English"
- "5. Barrier to Bare Hand Contact Power Point Presentation - Spanish"
- "6. Food Contact and Utensil Barrier Usage 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.*
BARRIERS TO BARE HAND CONTACT

Scoops
Chopsticks
Deli Papers
Forks and Ladles
Toothpicks
Tongs
Spatulas

Utensils to Prepare Ready To Eat Foods

Draft submitted for approval: April 2010
Thank you again for your efforts and focus on Food Safety and support of the Barriers to Bare Hand Contact.

Special thanks to the Conference for Food Protection Food Contact Utensil Barrier Usage Committee members:

2009-2010 Committee
Julie Albrecht, University of Nebraska-Lincoln
Anthony Carotenuto, Navy and Marine Corps Public Health Center
LeAnn Chuboff, SQFI
Sharon Ferguson, FDA
Andrew Harris, Division of Environmental Health, Summit County Health District
Stephen Posey, Brinker International
Jim Wagner, The Steritech Group, Inc.
Lisa Whitlock, FDA - Alternate

2007-2008 Committee
Michelle Motsinger
Janet Anderberg, Washington State Department of Health
Joseph Comello
Diane Benjamin, FDA
Jeannie Riess
Robert Joyce
Lacie Thrall, FoodHandler, Inc.
Doris Rittenmeyer, FoodHandler, Inc.
Jane Griffith, WaWa, Inc.
Frank Ferko, US Foodservice
Linda McClurg, Dunkin Brands, Inc.
Dr. Esah Yip, Malaysian Rubber Export Council
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Introduction

The Barriers to Bare Hand Contact Training Manual has been developed to be used as a teaching and training tool for consumers, industry, and regulatory to demonstrate the industry’s best practices regarding bare hand contact barriers and alternatives to bare hand contact.

A Power Point presentation is available at the end of this document.
Barriers to Bare Hand Contact

Reference Material
SECTION 1 – SINGLE USE GLOVES

Section 1.1 – Glove Information
1. The correct use of glove barriers is important during food handling tasks. Single-use gloves can be an effective barrier against the transmission of microorganisms, such as bacteria & viruses, from fingertips or foods.
2. Handwashing is a primary barrier to cross contamination while barrier utensils & gloves are a secondary barrier.
3. Single-use gloves are defined as a “utensil” in the FDA Food Code.
4. Glove barriers work when handling any ready-to-eat (RTE) food while another utensil does not provide the hand dexterity for the task. (example: slicing carrots or celery). One glove may work on one hand with a utensil used by the other hand.

Section 1.2 – When Should a Food Employee Use Single Use Gloves?
1. If a food handler has a bandage, infection, cut, or sore on hands or arms, they must temporarily avoid direct bare hand contact during food handling duties.
2. When food employees wear artificial nails or fingernail polish, they must wear disposable gloves when handling food.
3. Glove use may be optional to handle raw meats, but can be used for preparation tasks such as breading/battering meats, poultry, seafood, or vegetables.

Section 1.3 – Glove Barriers Must be Task Specific
1. Use gloves for designated food tasks only. Disposable gloves are task-specific and should never be worn continuously.
2. Gloves designated for food use should not be used for non-food tasks, such as taking out the garbage, handling money, cleaning surfaces, etc.
3. Use vinyl, nitrile synthetic, or latex gloves when handling foods near a heat source cooking area, rather than poly (polyethylene) gloves, which are not resistant to heat.

Section 1.4 – Avoid Cross Contamination by Washing Hands and Changing Gloves
1. If someone handles raw meats, poultry, or seafood with gloves on, they must not touch RTE or cooked foods without washing hands and changing gloves.
2. Remove or change gloves when changing activity (for example from making sandwiches to making change) or whenever leaving the workstation. Hands must be washed before re-gloving.
3. Task-specific colored gloves are another option for cross contamination prevention.

Section 1.5 – Glove Change Frequency
1. Change gloves periodically and wash hands each time before changing gloves.
2. After handwashing, dry hands thoroughly before donning gloves to make them easier to slip on.
3. Base the frequency of glove changing on task changes.
4. Remove gloves if doing different tasks when not handling RTE foods.
5. Change gloves to handle a raw food or different raw species (for example raw chicken to raw beef).
6. Change gloves to handle another RTE food that might transfer a flavor or food allergen.
7. Wash hands and re-glove if a glove develops a hole or tear during usage.
8. Change gloves after sneezing, coughing, or touching hair or face.

Section 1.6 – Four Common Glove Materials
1. Polyethylene (Poly) Gloves
2. Latex Gloves
3. Vinyl Gloves
4. Nitrile Gloves

Section 1.7 – Glove Size
1. Glove size is important for safety and comfort.
2. Select the right size for hands— from small to extra large.
3. Poly, Vinyl, Latex, & Nitrile usually come in 4 or 5 sizes – Small, Medium, Large, X or XX-Large
4. Glove sizes are measured across the widest part of the palm as shown.

Section 1.8 – Avoid Cross Contamination with Cut Resistant Gloves
1. If wearing a cut-resistant glove to cut or handle raw or RTE food, wear a larger disposable glove over it to avoid cross-contamination of the reusable cut-resistant glove.
2. Wash, rinse & sanitize the cut-resistant glove between uses.

Section 1.9 – Glove Removal
1. To remove disposable gloves correctly, grasp at the cuff and peel them off inside-out.
2. DO NOT remove and re-use gloves OR re-wash single-use food contact gloves for multiple tasks.
Section 1.10 – Selecting the Right Glove for the Right Job
1. Consider specific tasks when determining the type of glove to be used.
2. Nitrile & Latex may be more durable for longer single tasks. Vinyl & Polyethylene may work better for shorter general food handling tasks. Be aware that some individuals may have allergen concerns with latex.
3. Polyethylene may work better for light duty tasks which involve high dexterity & durability.
4. Textured gloves may improve grip, tactile sensitivity or comfort.
5. Color-coding may help for cross-contamination prevention & visibility when handling foods.
6. Heat resistance may help around cooking equipment.
7. Cuff length extended (elbow length) can be considered depending on the tasks.
8. Dispensing stations should be located for easy quick access with close proximity to RTE food handling & handwashing.

Section 1.11 – Powdered or Powder Free Glove Barriers
1. Powder makes gloves easier to put on & absorbs perspiration, but some users prefer no powder.
2. Amount of powder (if used)
   – Powdered gloves do not exceed 120 mg trace powder per glove (vinyl, nitrile, latex)
     • Powder must be a Sterile Absorbable Dusting Powder
d     • Acts as a donning lubricant
d     • Must be minimal
d     • No talc or unsterilized powders
   – Powder-free gloves (vinyl, nitrile, latex)
     • Contain no more than 2 mg trace powder per glove
     • Some form-fit gloves are polyurethane coated or washed in chlorine to eliminate powder
     • Poly gloves contain no powder

Section 1.12 – Basic Poly or Cast Poly Gloves
1. “Basic seamed poly” glove – known as “blown polyethylene” & can be white, opaque, or colored. Usually a loose fit. Less dexterity than form-fit gloves. Seamed on the edges.
2. “Cast poly” has a better fit & softer feel than basic blown poly. Easier to slip on & sometimes textured for better grip.
3. A “Poly” glove is designed for light duty, short tasks. It is not designed for handling heat (approx. melt point 200°F(93°C)).
4. Elbow length gloves are for special light duty tasks requiring arm length reach or deep containers.

Section 1.13 – Rapid Dispensing or Short Task Poly Gloves
1. Loose fitting gloves are also designed in fingered glove or a mitt with unique dispensing systems to enable quick one-handed donning.
2. Applications may only use one glove for single tasks that require frequent glove changing in a fast-paced environment..
3. High Density Polyethylene (HDPE) which uses a different resin is more heat-resistant at 240°F(115°C) than Low Density Polyethylene at 200°F(93°C). However, it is not recommended for hot food tasks.

SECTION 2 - SCOOPS, SPOONS, AND LADLES

Section 2.1 – When Should a Food Employee Use Scoops, Spoons, and Ladles?
1. Spoons, scoops and ladles are used by foodhandlers, servers, and customers when preparing, portioning, or serving liquid or solid foods.
2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.
3. All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.
4. When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F(57°C).
5. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored:
   - In food with their handles above the top of the food and the container.
   - On a clean portion of the food preparation table or cooking equipment that has been cleaned and sanitized.
   - In running water with a water velocity sufficient to flush particles to the drain for moist foods such as potatoes or ice cream.
   - In a washed and sanitized container of water, if the water is maintained at a temperature of at least 135°F (57°C).
   - In a clean protected location if utensils (such as ice scoops) are used for non-potentially hazardous foods (Time/Temperature Control for Safety Food).

6. In-use utensils may not be stored in chemical sanitizer or ice.

Section 2.2 – Using Scoops
1. Scoops are available in many different sizes and are an ideal utensil for portion control.
2. When using a scoop with a release trigger, the release trigger should be prevented from touching the food. This prevents pathogens from the hand transferring to the food.
3. Scoops can be used with or without the use of other barriers. Scoops are a practical alternative to handling food with bare hands in many situations. Scoops may be used as a stand alone tool or in conjunction with another barrier such as gloves.

Section 2.3 – Using Spoons
1. Spoons typically have no predetermined serving size or shape.
2. Spoons used for tasting must be washed, rinsed, and sanitized between uses. Disposable or single serving utensils can work well for this task.
3. Improper use of tasting spoons can lead to foodborne illness.
4. Spoons can be used with or without the use of other barriers. Spoons are a practical alternative to handling food with bare hands in many situations.

Section 2.4 – Using Ladles
1. Ladles are available in many different sizes and are an ideal utensil for portion control.
2. Ladles can be used with or without the use of other barriers. Ladles are a practical alternative to handling food with bare hands in many situations.
3. Ladles may be used as a stand alone tool or in conjunction with another barrier such as gloves.

SECTION 3 – SPATULAS

Section 3.1 – When Should a Food Employee Use Spatulas?

1. Spatulas are used to stir, scoop, spread, or lift food by foodhandlers, servers and customers.
2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.
3. All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.
4. When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F.
5. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored:
   - In food with their handles above the top of the food and the container.
   - On a clean portion of the food preparation table or cooking equipment that has been cleaned and sanitized.
   - In running water with a water velocity sufficient to flush particles to the drain for moist foods such as potatoes or ice cream.
   - In a washed and sanitized container of water, if the water is maintained at a temperature of at least 135°F (57°C).
   - In a clean protected location if utensils (such as ice scoops) are used for non-potentially hazardous foods (Time/Temperature Control for Safety Food).
6. In-use utensils may not be stored in chemical sanitizer or ice.

Section 3.2 – Using Spatulas
1. Spatulas are available in generalized and highly adapted designs widely available for specific tasks.
2. Spatulas should be dedicated to a specific task.
3. Spatulas can be used with or without the use of other barriers. Spatulas are a practical alternative to handling food with bare hands in many situations.

SECTION 4 – TONGS

Section 4.1 – When Should a Food Employee Use Tongs?
1. Tongs are used by foodhandlers and servers to grip or lift food, to move a food from one location to another, and to rotate food during cooking, especially during grilling.
2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.
3. All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.
4. When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F (57°C).
5. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored:
   - In food with their handles above the top of the food and the container.
   - On a clean portion of the food preparation table or cooking equipment that has been cleaned and sanitized.
   - In running water with a water velocity sufficient to flush particles to the drain for moist foods such as potatoes or ice cream.
   - In a washed and sanitized container of water, if the water is maintained at a temperature of at least 135°F (57°C).
• In a clean protected location if utensils (such as ice scoops) are used for non-potentially hazardous foods (Time/Temperature Control for Safety Food).

6. In-use utensils may not be stored in chemical sanitizer or ice.

Section 4.2 - Using Tongs

1. Tongs are a practical alternative to handling food with bare hands in many situations.
2. Tongs are available in generalized and highly adapted designs widely available for specific tasks.
3. Specific tongs are designed for picking up items such as sugar cubes, asparagus, shredded cheese, ice, salad, spaghetti, hamburgers, fish bones, melon balls, bagels, cooked crabs, garnishes and tea bags.
4. Tongs should be dedicated to a specific task.
5. Tongs can be used with or without the use of other barriers. Tongs are a practical alternative to handling food with bare hands in many situations.

SECTION 5 – FORKS

Section 5.1 – When Should a Food Employee Use Forks?

1. Forks are used by foodhandlers and servers to grip or lift food, to move a food from one location to another, to rotate food during preparation, and to hold or grip a food while cutting or carving.
2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.
3. All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.
4. When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F(57°C).
5. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored:
• In food with their handles above the top of the food and the container.
• On a clean portion of the food preparation table or cooking equipment that has been cleaned and sanitized.
• In running water with a water velocity sufficient to flush particles to the drain for moist foods such as potatoes or ice cream.
• In a washed and sanitized container of water, if the water is maintained at a temperature of at least 135°F (57°C).
• In a clean protected location if utensils such as ice scoops are used for non-potentially hazardous foods (Time/Temperature Control for Safety Food).

6. In-use utensils may not be stored in chemical sanitizer or ice.

Section 5.2 - Using Forks
1. Forks are a practical alternative to handling food with bare hands in many situations.
2. Forks should be dedicated to a specific task.
3. Forks which are designed and intended for single-use only must be discarded after each use.
4. Forks can be used with or without the use of other barriers. Forks are a practical alternative to handling food with bare hands in many situations.

SECTION 6 – DELI PAPERS

Section 6.1 – When Should a Food Employee Use Deli and Bakery Wrap?
1. Deli and Bakery Wrap are used by foodhandlers, servers/wait-staff, and customers to provide a sanitary barrier between the bare hand and food.

Section 6.2 – Selecting Bakery or Deli Wrap
1. Operators or purchasing agents must ensure all wrap components are in compliance with the FDA, Title 21, CFR 177.1520.
2. Deli wrap papers must be manufactured in accordance to Good Manufacturing Practices. Manufacturers of food contact wraps or sheets must demonstrate that all components are safe for use and do not leech components or toxic elements onto the food.
3. Deli wrap papers can be purchased in a variety of sheet sizes and packages from a foodservice supply vendor.

4. Wrap can be dry waxed or without wax. Dry wax will absorb some liquid and prevent the seeping of product liquid onto the hands. Wraps without wax are generally intended to be used for bakery products.

5. Dispensing packages must be well made to prevent contamination of the sheets from external debris and permit easy access to the sheet.

6. Food service operators should select wrap based on intended purpose.

Section 6.3 – Using Deli and Bakery Wrap

1. Sheets should be dispensed one at a time without tearing or contaminating the remaining sheets.

2. If sheets are used as the primary barrier, foodhandlers should discard used sheets immediately after use. Sheets should not be reused or remain with the food.

3. The dispensing container must be stored in a location to prevent cross contamination from other food or debris.

SECTION 7 – CHOPSTICKS

Section 7.1 – When Should a Food Employee Use Chopsticks?

1. Chopsticks are usually used by consumers for eating but foodhandlers may use chopsticks to move food from one location to another during preparation or service.

2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.
3. All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.

4. When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F(57°C).

5. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored:
   - In food with their handles above the top of the food and the container.
   - On a clean portion of the food preparation table or cooking equipment that has been cleaned and sanitized.
   - In running water with a water velocity sufficient to flush particles to the drain for moist foods such as potatoes or ice cream.
   - In a washed and sanitized container of water, if the water is maintained at a temperature of at least 135°F (57°C).
   - In a clean protected location if utensils such as ice scoops are used for non-potentially hazardous foods (Time/Temperature Control for Safety Food).

6. In-use utensils may not be stored in chemical sanitizer or ice.

Section 7.2 - Using Chopsticks

1. Chopsticks may be an alternative to handling food with bare hands.

2. Chopsticks should be used for a specific task.

3. Chopsticks constructed to be a multi-use item must be washed, rinsed, sanitized, and air dried between different tasks.

4. Chopsticks designed and intended for single-use only must be discarded after each use.

5. Chopsticks may be used as a stand alone tool or in conjunction with another barrier such as gloves.

SECTION 8 – TOOTHPICKS

Section 8.1 – When Should a Food Employee Use Toothpicks?

1. Toothpicks are typically used by foodhandlers to prevent bare hand contact with RTE foods such as hors devours. However, toothpicks are also used to hold stacked/layered sandwiches or other items together and/or upright.
2. The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.

Section 8.2 - Using Toothpicks

1. Toothpicks should be placed in food by staff prior to service, or presented and/or provided to consumer in a manner that will prevent possible contamination of the food contact portion of the toothpick, such as, upright in a small/slender glass or container.

2. Toothpicks are usually designed to be a single-use item and must be discarded after use.

3. If designed to be multi-use, toothpicks must be washed, rinsed, sanitized, air dried between tasks.
Frequently Asked Questions:

1. **What is the purpose of this document?**
   The Barriers to Bare Hand Contact Training Manual has been developed to be used as a teaching and training tool for consumers, industry, and regulators to demonstrate the industry’s best practices regarding bare hand contact barriers and alternatives to bare hand contact.

2. **How should I use this document?**
   This document can be used to educate and inform consumers, industry, and regulators of best practices and options for use of bare hand contact barriers.

3. **Is this manual approved by health departments?**
   This document has been developed in conjunction with the combined efforts of the Conference for Food Protection and input from federal, state, and local regulators, industry, academia, and consumers.

4. **Can I use information from this document in my presentations?**
   This information can be used for educational purposes.

5. **Who should I contact if I have additional questions?**
   Please contact your local health department or the Conference for Food Protection if you have additional questions.

6. **What if I have a question about a utensil that is not mentioned?**
   This document is not meant to take the place of local regulatory requirements. Please consult your local health department for final requirements.

7. **Do utensils have to be certified?**
   Please consult your local health department to determine utensil certification requirements.
Appendix / Tools
References

2005 Model Food Code sections applicable to Barriers to Bare Hand Contact.

1-2 DEFINITIONS
1-201 – Applicability and Terms Defined
Ready-to-Eat Food
Utensil

2-3 PERSONAL CLEANLINESS
2-301 Hands and Arms
2-301.11 Clean Condition Fingernails (refers to glove use)
2-301.12 Cleaning Procedure
2-301.14 When to Wash (refers to glove use)
2-301.15 Where to Wash

3-3 PROTECTION FROM CONTAMINATION AFTER RECEIVING
Preventing Contamination by Employees
3-301.11 Preventing Contamination from Hands (refers to deli tissue, spatulas, tongs, single-use gloves, or dispensing equipment
3-301.11(B) Preventing contamination from hands

PREVENTING CONTAMINATION FROM EQUIPMENT, UTENSILS, AND LINENS
3-304.11 – Food Contact with Equipment and Utensil
3-304.12 In-use utensils, between-use storage
3-304.15 – Gloves, Use Limitation
3-304.16 Using clean tableware for second portions and refills
3-502.12 Reduce oxygen packaging, criteria
3-502.12(B) (5) (a) (prohibits bare hand contact)
3-801.11 Pasteurized Foods, prohibited re-service and prohibited food
3-801.11(F) (3) (b) (prohibits bare hand contact)

4-1 MATERIALS FOR CONSTRUCTION AND REPAIR
Single-Service and Single Use
4-101.17 Wood, use limitations
4-102.11 Characteristics (single-service and single use
4-102.11 Characteristics
4-2 Design and Constructions
4-201.11 Equipment and utensils
4-205.10 Food Equipment, certification and classification
4-302.11 Utensils, consumer self-service
4-502.11 Single-service and single-use, required
4-502.13 Single-service and single-use, use limitations
4-6 Cleaning of Equipment and utensils
4-7 Sanitization of equipment and utensils
4-9 Protection of clean items

**4-9 PROTECTION OF CLEAN ITEMS**
Storing
4-903.11 – Equipment, Utensils, Linens, and Single Service and Single Use Articles

Annex 3: Public Health Reasons/Administrative Guidelines:
Each Code Section will have back ground information or guidance in this Section of the Food Code.
A separate presentation is available to support this reference document
BARRERAS AL CONTACTO CON LAS MANOS DESCUBIERTAS

Palas
Palillos
Papel de envoltura
Tenedores y Cucharones
Guantes Desechables
Palillos para dientes
Pinzas
Espátulas

Utensilios para Alimentos Listos para Comer

Borrador sometido a aprobación: Abril de 2010
Quisiéramos agradecer nuevamente sus esfuerzos y enfoque en la Seguridad Alimentaria y su apoyo al Comité de Barreras al Contacto Con Manos Descubiertas (FCUBU).

Nuestro especial agradecimiento a los miembros del Comité del Uso de Utensilios de Barrera para el Contacto con Alimentos de la Conference for Food Protection:

Comité 2009-2010
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Doris Rittenmeyer, FoodHandler, Inc.
Jane Griffith, WaWa, Inc.
Frank Ferko, US Foodservice
Linda McClurg, Dunkin Brands, Inc.
Dr. Esah Yip, Malaysian Rubber Export Council
Introducción

El Manual de Entrenamiento para el Contacto Con Manos Descubiertas ha sido desarrollado para su utilización como una
herramienta de enseñanza y entrenamiento para consumidores,
la industria y las autoridades regulatorias para demostrar las
mejores prácticas en la industria del servicio de alimentos en lo
referente a las barreras al contacto con las manos descubiertas y
las alternativas al contacto con las manos descubiertas.

Usted encontrará una presentación en Power Point al final de
este documento.

Barreras al Contacto con
Manos Descubiertas
Material de Referencia

SECCIÓN 1 – USO DE GUANTES DESECHABLES
Sección 1.1 – Información referente a los guantes

1. El uso correcto de guantes como barrera es muy importante durante las distintas tareas de manipulación de los alimentos. El uso de guantes desechables puede establecer una barrera efectiva contra la transmisión de microorganismos como bacterias y/o virus que se pudieran alojar en las puntas de los dedos o los alimentos. El lavado de manos es la primera barrera para prevenir la contaminación cruzada mientras el uso de utensilios de barrera o guantes constituye una barrera secundaria.

2. Los guantes desechables han sido clasificados como “utensilios” en el Código Alimentario de la FDA.

3. Las barreras de guante son efectivas para la manipulación de alimentos listos para comer (RTE) cuando ningún otro utensilio puede proveer la destreza manual requerida para la tarea en cuestión (por ejemplo, rebanar zanahorias o apio). Se puede utilizar un guante en una mano mientras se sostiene algún otro utensilio con la otra mano.

Sección 1.2 – ¿Cuándo debe usar Guantes Desechables un empleado que manipula alimentos?

1. En caso de que alguien tenga una curita, infección o herida en las manos o brazos se deberá suspender cualquier actividad que involucre el contacto de los alimentos con las manos descubiertas.

2. En caso de que los empleados que manipulan alimentos usen uñas postizas o esmalte para las uñas se deberá utilizar guantes desechables al manipular alimentos.

3. El uso de guantes es opcional para la manipulación de carnes crudas pero pueden ser utilizados para desempeñar actividades de preparación como emopanizar/capear carnes, aves, mariscos o vegetales.

Sección 1.3 – Las Barreras de Guante deben ser específicas para cada tarea

1. Use sólo los guantes designados para las labores específicas. Los guantes desechables son específicos para cada tarea y no deben ser usados de manera indefinida.

2. Los guantes asignados para manipular alimentos no deben ser utilizados para ninguna otra tarea como sacra la basura, manipular dinero, limpiar superficies, etc.
3. Use guantes de vinilo, nitrilo sintético o látex cuando vaya a preparar (cocinar) alimentos cerca de fuentes de calor en vez de guantes de polietileno ya que éstos no son resistentes al calor.

**Sección 1.4 – Evite la contaminación cruzada mediante el lavado de manos y cambio de guantes**

1. En caso de que alguien esté manipulando carne, aves o mariscos con guantes, no podrá tocar alimentos RTE sin haber lavado sus manos y cambiado los guantes previamente.
2. Se deberán remover o cambiar los guantes cada vez que se cambie de actividad (por ejemplo, de la preparación de sandwiches a alguna otra actividad) o bien cuando se abandone la estación de trabajo. Antes de volver a colocarse los guantes debe haber un lavado de manos previo.
3. Los guantes de colores para tareas específicas son otra opción para la prevención de la contaminación cruzada.

**Sección 1.5 – Frecuencia de Cambio de Guantes**

1. Cambie los guantes periódicamente y lave sus manos cada vez que realice cambio de guantes.
2. Seque bien sus manos después de lavarlas para facilitar la colocación del nuevo par de guantes.
3. Establezca una base de frecuencia para el cambio de guantes durante el cambio de tareas.
4. Retire los guantes si realiza actividades distintas de la manipulación de alimentos listos para comer (RTE).
5. Cambie los guantes para manipular alimentos crudos o la carne cruda de distintas especies (pollo crudo a crane de res cruda).
6. Cambie los guantes para manipular cualquier alimento listo para comer que pudiera transferir sabor o algún alérgeno alimentario.
7. Lave sus manos y cambie los guantes en caso de que los guantes que esté usando se rompan o rasguen.
8. Cambie los guantes después de estornudar, toser o tocarse la cara o el cabello.

**Sección 1.6 – Los cuatro materiales de guantes más comunes**

1. Guantes de Polietileno
2. Guantes de Látex
3. Guantes de Vinilo
4. Guantes de Nitrilo

**Sección 1.7 – La Talla de los Guantes**
1. La talla de los guantes es importante para trabajar con seguridad y comodidad.
2. Elija la talla correcta para sus manos — de chico (s) a extra grande (xl).
3. A los guantes de Polietileno, Vinilo, Látex, y Nitrilo se les puede encontrar en 4 o 5 tallas – Chico (S), Mediano (M), Grande (L), Extra o Extra Extra Grande (XL o XXL).
4. La talla de los guantes se mide a través de la parte más ancha de la palma de la mano como se muestra en la ilustración.

Sección 1.8 – Evite la contaminación cruzada mediante el uso de guantes resistentes a las cortaduras
1. En caso de que utilice un guante resistente a las cortaduras para cortar o manipular alimentos RTE, coloque un guante desechable más grande para evitar la contaminación cruzada del guante resistente a las cortaduras reutilizable.
2. Lave, enjuague y desinfecte el guante resistente a las cortaduras entre las distintas tareas que realice.

Sección 1.9 – Para retirar los Guantes
1. Para retirar los guantes desechables de un modo apropiado, sostenga el borde de la muñeca y jale desde adentro hacia afuera.
2. POR NINGÚN MOTIVO retire y reutilice los guantes O los lave con el propósito de emplearlos en múltiples tareas.

Sección 1.10 – Eligiendo el guante correcto para la tarea apropiada
1. Tome en cuenta las tareas específicas para las que destinará el tipo de guante a utilizar.
2. Los guantes de Nitrilo y Látex son más durables para tareas individuales prolongadas. Los guantes de Vinilo y Polietileno podrían ser los más adecuados para períodos breves de manipulación de alimentos. Tome en cuenta que algunas personas podrían tener alergias relacionadas con el uso de Látex.
3. Los guantes de Polietileno podrían ser los más apropiados para trabajos sencillos que requieran destreza y durabilidad.
4. Los guantes texturizados podrían mejorar la adherencia entre superficies, la sensibilidad táctil o comodidad.
5. El utilizar guantes bajo un esquema de código de colores podría ayudar a prevenir la contaminación cruzada durante la manipulación de los alimentos.
6. La resistencia al calor de algunos materiales podría facilitar el trabajo en áreas cercanas a los equipos de cocción.
7. Se podría considerar el uso de guantes largos (hasta el codo) dependiendo de las tareas a desempeñar.
8. Los despachadores de guantes deberán estar localizados en sitios cercanos a las áreas de preparación y manipulación de alimentos listos para comer y de lavado de manos para facilitar su utilización.

Sección 1.11 – Barreras de guante con o sin Polvo Lubricante
1. El polvo lubricante facilita la colocación de los guantes y absorve la transpiración, sin embargo algunas personas prefieren guantes sin polvo lubricante.
2. Cantidad de polvo lubricante añadido (en caso de que se utilice este tipo de guantes)
   – **Guantes con Polvo Lubricante.** El contenido de polvo en los guantes no excede los 120 mg por guante (vinilo, nitrilo, látex)
     • Debe usarse únicamente como lubricante para la colocación del guante
     • Debe aplicarse la menor cantidad posible
     • No puede utilizarse talco o cualquier otro polvo no estéril
   – **Guantes Libres de Polvo Lubricante** (vinilo, nitrilo, látex)
     • Deberán contener trazas de polvo lubricante no superiores a 2 mg por guante
     • Algunos guantes ajustables tienen recubrimiento de poliureatno o son lavados en Cloro para eliminar el polvo lubricante
     • Los guantes de polietileno no contienen polvo lubricante

Sección 1.12 – Guantes de Polietileno Puro o de Mezclas de Polímeros
1. El guante “Básico de Polietileno con costura” consiste en una película extruida de polietileno conocida co “Polietileno Soplado” y puede ser blanca, opaca o de colores. Generalmente son de ajuste holgado. En el caso contrario de los guantes ajustables, este guante es útil para tareas que requieren un bajo nivel de destreza. Este guante tiene costuras en los bordes.
2. Los guantes elaborados con “mezclas de polímeros” tienen un mejor ajuste y son más suaves que los guantes de polietileno básico soplado. Esto guantes se
pueden colocar con mayor facilidad y en algunos casos están texturizados para dar un mejor agarre.

3. Estos guantes son útiles para tareas sencillas y breves y no son los más adecuados para áreas de cocción de productos (su punto de fusión aproximado es de 200° F).

4. Los guantes con manga hasta el codo están diseñados para el desempeño de tareas simples específicas que requieren un alcance del largo del brazo o recipientes profundos.

Sección 1.13 –Guantes de Polietiñeno de fácil acceso o tareas breves

1. Los guantes de ajuste holgado pueden tener dedos o ser de tipo “mitón” y ser despachados mediante dispositivos de fácil acceso para facilitar la colocación rápida con una sola mano.

2. Útiles para tareas únicas que requieren un cambio rápido de guantes en operaciones de alta demanda.

3. El Polietileno de Alta Densidad es más resistente al calor (distinta resina) que el Polietileno de Baja Densidad (LDPE, 200°F vs. 240°F para el HDPE), pero no es el apropiado para tareas que involucren alimentos calientes.
SECCIÓN 2 – PALAS, CUCHARAS Y CUCHARONES

Sección 2.1 – ¿Cuándo debe usar palas, cucharas o cucharones un empleado que manipula alimentos?

1. Las cucharas, palas y cucharones son empleadas por manipuladores de alimentos, personal de servicio y clientes al momento de preparar, porcionar o servir alimentos líquidos o sólidos.

2. El material de construcción y diseño de las superficies de contacto con alimentos debe cumplir con los requerimientos del Código Alimentario de la FDA mencionados en la sección 4-201.11 y debe ser durable y mantener sus cualidades características bajo condiciones de uso normal.

3. Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso y por lo menos cada cuatro horas mientras se les esté usando.

4. Cuando no se les esté utilizando, los utensilios deben ser almacenados de tal modo que se prevenga el desarrollo de bacterias, adentro del mismo alimento, en un medio ambiente limpio y protegido, dentro de un recipiente con agua corriente o bien en un recipiente con agua a una temperatura mínima de 135° F.

5. Durante pausas en la preparación o servicio de alimentos, los utensilios de preparación y servicio de alimentos deberán ser almacenados:
   - Dentro del mismo alimento con el mango encima del alimento y fuera del recipiente.
   - En una porción limpia de la mesa de preparación o de la superficie de cocción que esté limpia y desinfectada.
• En agua corriente cuya velocidad sea la suficiente para separar las partículas de alimentos húmedos como helado o puré de papa y ser drenada al exterior del recipiente.
• En un recipiente de agua limpia y desinfectada, siempre y cuando el agua se mantenga a una temperatura mínima de 135°F.
• En un sitio limpio y protegido en caso de que los utensilios como palas para hielo se utilicen para manipular alimentos que no sean potencialmente peligrosos (que no requieran control de tiempo/temperatura para mantenerlos seguros).
6. Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

Sección 2.2 – El uso de las Palas

1. A las palas se les encuentra en varias medidas y son el utensilio ideal para el control de porciones.
2. Cuando se utilice una pala con dispensador, es necesario que se evite el contacto del mecanismo del dispensador con el alimento. De este modo se podrá prevenir la transferencia de patógenos de las manos al alimento.
3. La palas se pueden utilizar con o sin el uso de otras barreras. Las palas son una alternativa práctica al amnejo de alimentos con las manos descubiertas en muchas situaciones. Las palas pueden ser empleadas como único utensilio o bien en conjunto con algún otro utensilio de barrera como los guantes.

Sección 2.3 – El uso de las Cucharas

1. Generalmente, las cucharas no tienen un tamaño de porción o forma predeterminados.
2. Las cucharas usadas para probar alimentos deben ser lavadas, enjuagadas y sanitizadas entre cada uso. Las cucharas desechables o utensilios de un sólo uso podrán ser una buena opción para este tipo de tareas.
3. El uso inapropiado de cucharas de prueba podría provocar enfermedades alimentarias.
4. Las cucharas pueden ser utilizadas con o sin la ayuda de otros utensilios de barrera. Las cucharas son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones.

Sección 2.4 – El uso de Cucharones
1. Los cucuarones están disponibles en varios tamaños y son un utensilio ideal para el control de porciones.
2. Los cucharones pueden ser utilizados con o sin la ayuda de otros utensilios de barrera. Los cucharones son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones.
3. Los cucharones se pueden utilizar solos o con la ayuda de otros utensilios de barrera como los guantes.

SECCIÓN 3 – ESPÁTULAS

Sección 3.1 – ¿Cuándo debe usar espátulas el empleado que manipula alimentos?
1. Los manipuladores de alimentos, el personal de servicio o los consumidores emplean las espátulas se usan para revolver, porcionar, untar o levantar los alimentos.
2. Los materiales de construcción y el diseño de las superficies en contacto con alimentos deben cumplir con los requerimientos establecidos por la sección 4-201.11 del Código Alimentario de la FDA y deben ser durables y conservar sus cualidades características bajo condiciones normales de uso.
3. Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso o al menos cada cuatro horas durante su uso continuo.
4. Cuando no se les esté utilizando, los utensilios deben ser almacenados de tal manera que se prevenga el desarrollo de microorganismos, dentro del mismo alimento, en un sitio limpio y protegido, en un recipiente con agua corriente o en un recipiente con agua caliente a una temperatura mínima de 135° F.
5. Durante pausas en la preparación o servicio de alimentos, los utensilios para preparar o server alimentos deberán ser almacenados:
   • Dentro del mismo alimento con el mango encima del alimento y fuera del recipiente.
   • En una porción limpia de la mesa de preparación o de la superficie de cocción que esté limpia y desinfectada.
   • En agua corriente cuya velocidad sea la suficiente para separar las partículas de alimentos húmedos como helado o puré de papa y ser drenada al exterior del recipiente.
   • En un recipiente de agua limpio y desinfectado, siempre y cuando el agua se mantenga a una temperatura mínima de 135°F (57°C).
   • En un sitio limpio y protegido en caso de que los utensilios como palas para hielo se utilicen para manipular alimentos que no sean potencialmente peligrosos (que no requieran control de tiempo/temperatura para mantenerlos seguros.
   • Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

6. Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

**Sección 3.2 – El uso de Espátulas**

1. A las espátulas se les encuentra disponibles tanto en diseños genéricos como sumamente adaptados para tareas específicas.
2. Sólo use la espátula indicada para cada tarea específica.
3. A las espátulas se les puede utilizar con o sin la ayuda de otros utensilios de barrera. Las espátulas son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones.

**SECCIÓN 4 – PINZAS**
Sección 4.1 – ¿Cuándo debe usar Pinzas un empleado que manipula alimentos?

1. Los empleados que manipulan y/o sirven alimentos emplean las pinzas para sostener o levantar alimentos, para mover alimentos de un sitio a otro y para voltear los alimentos mientras se cocinan, especialmente durante el asado.

2. Los materiales de construcción y el diseño de las superficies en contacto con alimentos deben cumplir con los requerimientos establecidos por la sección 4-201.11 del Código Alimentario de la FDA y deben ser durables y conservar sus cualidades características bajo condiciones normales de uso.

3. Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso o al menos cada cuatro horas durante su uso continuo.

4. Cuando no se les esté utilizando, los utensilios deben ser almacenados de tal manera que se prevenga el desarrollo de microorganismos, dentro del mismo alimento, en un sitio limpio y protegido, en un recipiente con agua corriente o en un recipiente con agua caliente a una temperatura mínima de 135° F.

5. Durante pausas en la preparación o servicio de alimentos, los utensilios para preparar o server alimentos deberán ser almacenados:
   - Dentro del mismo alimento con el mango encima del alimento y fuera del recipiente.
   - Dentro del alimento que no sea potencialmente peligrosos (que requiera control de tiempo/temperatura para mantenerlo seguro) con el mango encima del alimento dentro del mismo recipiente o equipos en recipientes y recipientes que puedan ser cerrados (como en el caso de azúcar o harina).
   - En una porción limpia de la mesa de preparación o de la superficie de cocción que esté limpia y desinfectada.
   - En agua corriente cuya velocidad sea la suficiente para separar las partículas de alimentos húmedos como helado o puré de papa y ser drenada al exterior del recipiente.
   - En un recipiente de agua limpia y desinfectada, siempre y cuando el agua se mantenga a una temperatura mínima de 135°F (57°C).
   - En un sitio limpio y protegido en caso de que los utensilios como palas para hielo se utilicen para manipular alimentos que no sean potencialmente peligrosos (que no requieran control de tiempo/temperatura para mantenerlos seguros).
   - Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

6. Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

Sección 4.2 - El uso de Pinzas
1. Las pinzas son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones.
2. A las pinzas se les encuentra disponibles tanto en diseños genéricos como altamente adaptados para tareas específicas.
3. Hay pinzas específicamente diseñadas para levantar artículos como cubos de azúcar, espárragos, queso rayado, hielo, ensalada, spaghetti, hamburguesas, espinas de pescado, perlas de melón, bagels, cangrejo cocido, garnituras y bolsas de té.
4. A cada pinza debe dársela el uso específico para el cual fue diseñada.
5. A las pinzas se les puede utilizar con o sin la ayuda de otros utensilios de barrera.

SECCIÓN 5 – TENEDORES

Sección 5.1 – ¿Cuándo un empleado que manipula alimentos debe usar los Tenedores?

1. Los empleados que manipulan y/o sirven alimentos utilizan los tenedores para sostener o levantar alimentos, para moverlos de un sitio a otro, para voltear los alimentos durante su preparación y para sostener los alimentos al cortarlos o tallarlos.
2. Los materiales de construcción y el diseño de las superficies en contacto con alimentos deben cumplir con los requerimientos establecidos por la sección 4-201.11 del Código Alimentario de la FDA y deben ser durables y conservar sus cualidades características bajo condiciones normales de uso.
3. Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso o al menos cada cuatro horas durante su uso contínuo.
4. Cuando no se les esté utilizando, los utensilios deben ser almacenados de tal manera que se prevenga el desarrollo de microorganismos, dentro del mismo alimento, en un sitio limpio y protegido, en un recipiente con agua corriente o en un recipiente con agua caliente a una temperatura mínima de 135° F.
5. Durante pausas en la preparación o servicio de alimentos, los utensilios para
preparar o server alimentos deberán ser almacenados:
- Dentro del mismo alimento con el mango encima del alimento y fuera del
recipiente.
- En una porción limpia de la mesa de preparación o de la superficie de
cocción que esté limpia y desinfectada.
- En agua corriente cuya velocidad sea la suficiente para separar las partículas
de alimentos húmedos como helado o puré de papa y ser drenada al exterior
del recipiente.
- En un recipiente de agua limpio y desinfectado, siempre y cuando el agua se
mantenga a una temperatura mínima de 135°F (57°C).
- En un sitio limpio y protegido en caso de que los utensilios como palas para
hielo se utilicen para manipular alimentos que no sean potencialmente
peligrosos (que no requieran control de tiempo/temperatura para
mantenerlos seguros).
- Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

6. Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

Sección 5.2 - El uso de Tenedores
1. Los tenedores son una alternativa práctica para la manipulación de alimentos
con las manos descubiertas en muchas situaciones.
2. Los tenedores deberán utilizarse para tareas específicas.
3. Los tenedores que han sido diseñados para usarse sólo una vez deberán ser
desechados después de haber sido usados.
4. Los tenedores pueden ser utilizados con o sin la ayuda de otros utensilios de
barrera.

SECCIÓN 6 – PAPEL DE ENVOLTURA

Sección 6.1 – ¿Cuándo debe usar Papel Delicatessen o Envoltura
de Panadería un empleado que manipula alimentos?
1. Los empleados que manipulan alimentos, el equipo de servicio/atención a clientes y los clientes emplean las envolturas de panadería o delicatessen para mantener una barrera sanitaria entre los alimentos y las manos decubiertas.

**Sección 6.2 – La selección de la Envoltura de Panadería o Delicatessen**

1. Los operadores de servicios de alimentos o representantes de compras deben asegurarse de que todos los componentes de las envolturas cumplen con los requerimientos de la sección 21, CFR 177.1520 de la FDA.
2. Las envolturas deben ser fabricadas mediante la aplicación de Buena Parácticas de Manufactura. Los fabricantes de envolturas para alimentos deben demostrar que todos los componentes utilizados son seguros y que no habrá migración de los componentes o de elementos tóxicos a los alimentos.
3. A las envolturas para alimentos se les encuentra disponibles en una gran variedad de tamaños y empaques en los almacenes de artículos para servicios de alimentos.
4. Las envolturas pueden ser enceradas o sin encerar. La envoltura encerada puede absorver un poco de líquido evitando que se ensucien las manos. La envoltura sin cera se usa generalmente para manipular productos de panadería.
5. Los paquetes o empaques dispensadores deben ser bien construidos, de modo tal que las envolturas no se contaminen con impurezas externas y que se permita tomar las hojas con facilidad.
6. Los operadores de servicios de alimentos debe seleccionar la envoltura apropiada tomando en consideración el uso que les dará.

**Sección 6.3 – El uso de Envolturas de Panadería y Delicatessen**

1. Las hojas de envoltura deben retirarse una a la vez sin que se rompan o se contamine el resto de las hojas.
2. Si se va a usar papel de envoltura como barrera primaria, los empleados que manipulan alimentos deben desechar inmediatamente las hojas usadas. Las hojas de envoltura no pueden ser reutilizadas ni los alimentos almacenarse en ellas.
3. El despachador de hojas debe ser almacenado en un sitio adecuado en el que se evite la contaminación cruzada con otros alimentos o impurezas externas.
SECCIÓN 7 – PALILLOS

Sección 7.1 – ¿Cuándo deben usar Palillos los empleados que manipulan alimentos?

1. Generalmente los consumidores usan los palillos para comer pero los empleados que manipulan alimentos los pueden usar para mover los alimentos de un sitio a otro durante la preparación o servicio de los mismos.

2. Los materiales de contrucción y el diseño de las superficies en contacto con alimentos deben cumplir con los requerimientos establecidos por la sección 4-201.11 del Código Alimentario de la FDA y deben ser durables y conservar sus cualidades características bajo condiciones normales de uso.

3. Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso o al menos cada cuatro horas durante su uso contínuo.

4. Durante pausas en la preparación o servicio de alimentos, los utensilios para preparar o server alimentos deberán ser almacenados:
   - Dentro del mismo alimento con el mango encima del alimento y fuera del recipiente.
   - En una porción limpia de la mesa de preparación o de la superficie de cocción que esté limpia y desinfectada.
   - En agua corriente cuya velocidad sea la suficiente para separar las partículas de alimentos húmedos como helado o puré de papa y ser drenada al exterior del recipiente.
   - En un recipiente de agua limpio y desinfectado, siempre y cuando el agua se mantenga a una temperatura mínima de 135°F (57°C).
   - En un sitio limpio y protegido en caso de que los utensilios como palas para hielo se utilicen para manipular alimentos que no sean potencialmente peligrosos (que no requieran control de tiempo/temperatura para mantenerlos seguros).
   - Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.
5. Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo.

**Sección 7.2 - El uso de los Palillos**

1. Los palillos pueden ser una alternativa para la manipulación de alimentos con las manos descubiertas.
2. Los palillos deben ser utilizados sólo para tareas específicas.
3. Los palillos fabricados con materiales reutilizables deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso.
4. Los palillos diseñados y fabricados para usarse sólo una vez deben ser desechados después de haber sido utilizados.
5. Los palillos pueden usarse con o sin la ayuda de otros utensilios de barrera como los guantes.

**SECCIÓN 8 – PALILLOS PARA DIENTES**

**Sección 8.1 – ¿Cuándo debe usar Palillos para Dientes un empleado que manipula alimentos?**

1. Los palillos para dientes se usan típicamente para evitar el contacto de las manos descubiertas con alimentos RTE como los entremeses. A los palillos para dientes también se les utiliza para sostener o mantener acomodados alimentos apilados o en capas como los sandwiches u otras preparaciones.
2. Los materiales de construcción y el diseño de las superficies en contacto con alimentos deben cumplir con los requerimientos establecidos por la sección 4-201.11 del Código Alimentario de la FDA y deben ser durables y conservar sus cualidades características bajo condiciones normales de uso.

**Sección 8.2 - El uso de Palillos para Dientes**

1. Los palillos para dientes deben ser colocados por el personal antes del servicio de los alimentos o bien presentados a los consumidores de tal manera que se evite una posible contaminación de la porción que estará en contacto con el alimento, de modo vertical en un recipiente angosto de plástico o vidrio.
2. Los palillos para dientes están típicamente diseñados para ser de un sólo uso y deben ser desechados una vez se les haya utilizado.
En el caso específico de que los palillos de dientes hayan sido diseñados para reutilizarse, éstos deberán ser lavados, enjuagados, desinfectados y secados al aire entre cada uso.
Preguntas Más Frecuentes
Preguntas más Frecuentes:

1. ¿Cuál es el propósito de este documento?
   El Manual de Entrenamiento para el Contacto Con Manos Descubiertas ha sido desarrollado para su utilización como una herramienta de enseñanza y entrenamiento para consumidores, la industria y las autoridades regulatorias para demostrar las mejores prácticas en la industria del servicio de alimentos en lo referente a las barreras al contacto con las manos descubiertas y las alternativas al contacto con las manos descubiertas.

2. ¿Cómo debo usar este documento?
   Este documento puede ser utilizado para instruir e informar a los consumidores, miembros de la industria del servicio de alimentos y las autoridades regulatorias acerca de las mejores prácticas en el uso de barreras a las manos descubiertas para la manipulación de alimentos.

3. ¿Los Departamentos de Salud aprueban este manual?
   Este documento se desarrolló con los esfuerzos conjuntos y la aportación de las instancias reguladoras federales, estatales y locales, la industria, académicos y los consumidores.

4. ¿Puedo utilizar la información de este documento para mis presentaciones?
   Esta información puede ser utilizada con propósitos educativos.

5. ¿Con quién me debo poner en contacto en caso de tener más preguntas?
   Si tiene preguntas adicionales por favor consulte con su Departamento de Salud local o con la Conferencia para la Protección de los Alimentos (Conference for Food Protection).

6. ¿Qué debo hacer si tengo una pregunta referente a un utensilio que no está incluido en este documento?
   Este documento no pretende reemplazar los requerimientos de la regulación local. Por favor consulte con su Departamento de Salud local acerca de los requerimientos definitivos.

7. ¿Los utensilios deben contar con alguna certificación?
   Por favor consulte con el Departamento de Salud de su localidad acerca de los requerimientos de certificación de utensilios.
Apéndice / Herramientas
Referencias

2005 Model Food Code sections applicable to Barriers to Bare Hand Contact.

Nota: La traducción de las referencias se encuentra en cursivas entre paréntesis facilitar la búsqueda debido a que el documento fuente (Código Alimentario) no tiene traducción al Español.

1-2 Definitions (Definiciones)
1-201 – Applicability and Terms Defined (Aplicabilidad y Definición de Términos)
Ready-to-Eat Food (Alimento Listo para Comer)
Utensil (Utensilio)

2-3 Personal Cleanliness (Limpieza del Personal)
2-301 Hands and Arms (Manos y Brazos)
2-301.11 Clean Condition Fingernails (refers to glove use) (Uñas limpias) (refiriéndose a uso de guantes)
2-301.12 Cleaning Procedure (Procedimiento de limpieza)
2-301.14 When to Wash (refers to glove use) (Cuándo lavar) (refiriéndose a uso de guantes)
2-301.15 Where to Wash (En dónde lavar)

3-3 Protection from Contamination After Receiving (Protección de la contaminación después de recibir)
Preventing Contamination by Employees (previniendo la contaminación por parte de los empleados)
3-301.11 Preventing Contamination from Hands (refers to deli tissue, spatulas, tongs, single-use gloves, or dispensing equipment) (Previniendo la contaminación de las manos) (refiriéndose a papel de envoltura, espátulas, pinzas, guantes desechables o equipo de servicio)
3-301.11(B) Preventing contamination from hands (previniendo la contaminación a través de las manos)

Preventing Contamination From Equipment, Utensils, and Linens (Previendo la contaminación proveniente de equipo, utensilios y textiles)
3-304.11 – Food Contact with Equipment and Utensil (Contacto de los alimentos con equipos y utensilios)
3-304.12 In-use utensils, between-use storage (Utensilios en uso, almacenamiento entre usos)
3-304.15 – Gloves, Use Limitation (Guantes, limitaciones de uso)
3-304.16 Using clean tableware for second portions and refills (Utilizando cubiertos limpios para segundas porciones y rellenos)
3-502.12 Reduce oxygen packaging, criteria (Empacado con reducción de Oxígeno, criterios)
3-502.12(B) (5) (a) (prohibits bare hand contact) (prohibición de contacto con manos descubiertas)
3-801.11 Pasteurized Foods, prohibited re-service and prohibited food (Alimentos pasteurizados, prohibida la reutilización, alimento prohibido)
3-801.11(F) (3) (b) (prohibits bare hand contact) (prohibición de contacto con las manos descubiertas)

4-1 Materials for Construction and Repair (Materiales de fabricación y reparación)
Single-Service and Single Use (Un sólo servicio y un sólo uso)

4-101.17 Wood, use limitations (Madera, limitaciones de uso)
4-102.11 Characteristics (single-service and single use) (Características) (un sólo servicio y un sólo uso)
4-102.11 Characteristics (Características)
4-2 Design and Constructions (Diseño y fabricación)
4-201.11 Equipment and utensils (Equipos y utensilios)
4-205.10 Food Equipment, certification and classification (Equipo para uso con alimentos, certificación y clasificación)
4-302.11 Utensils, consumer self-service (Utensilios, auto servicio para consumidores)
4-502.11 Single-service and single-use, required (Un sólo servicio y un sólo uso, requerido)
4-502.13 Single-service and single-use, use limitations (Un sólo servicio y un sólo uso, limitaciones de uso)
4-6 Cleaning of Equipment and utensils (Limpieza de equipos y utensilios)
4-7 Sanitization of equipment and utensils (Desinfección de equipos y utensilios)
4-9 Protection of clean items (Protección de artículos limpios)

4-9 Protection of Clean Items (Protección de artículos limpios)
Storing (Almacenamiento)
4-903.11 – Equipment, Utensils, Linens, and Single Service and Single Use Articles (Equipo, Utensilios, Textiles, artículos de un sólo servicio y artículos de un sólo uso)

Anexo 3: Motivos de Salud Pública / Lineamientos Administrativos:
Cada sección del Código tendrá información acerca de sus antecedentes o guías en esta Sección del Código Alimentario.
Presentación

A separate presentation is available
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CONFERENCE FOR FOOD PROTECTION
COMMITTEE FINAL REPORT

COMMITTEE NAME: The Food Contact and Utensil Barrier Usage Committee

COUNCIL (I, II, or III): II

DATE OF REPORT: December 4, 2009

SUBMITTED BY: Stephen Posey

COMMITTEE CHARGE(s):
- Develop content for the fifth category (Forks, Chopsticks, and Toothpicks)
- Identify potential languages for translation
- Evaluate the cost associated with translating the document
- Provide additional pictures and/or illustrations representing utensil use and identify dissemination strategies
- A complete review and sign off by all committee members to gain full support of the document
- Post the document to a Conference approved Internet site
- Submit a final report to the 2010 Biennial Meeting of the Conference

COMMITTEE ACTIVITIES AND RECOMMENDATIONS (Outcomes):
1. The committee decided the best way to present the information in the user friendly manner is to provide a reference document along with a separate PowerPoint presentation. The following tools and utensils are now included in the document: gloves, scoops, spoons, ladles, spatulas, tongs, forks, deli papers, chopsticks, and toothpicks.
2. The committee identified the need to have the documents translated into Spanish.
3. The Spanish translation has been provided with the committee report. The translation was provided at no cost through volunteer work. The translation was completed by one volunteer and reviewed by another volunteer.
4. The reference document and PowerPoint presentation now sufficiently include pictures and illustrations representing all tools and utensils.
5. The entire committee has provided input and collectively agreed on the attached documents.

RECOMMENDATIONS:
The Committee is submitting two issues for Council II's consideration:

Issue #1: Report – Food Contact and Utensil Barrier Usage Committee
- The Conference recommends acknowledgement of the work of the Food Contact & Utensil Barrier Usage Committee and to thank the Committee for their hard work and dedication to this issue.
- The Conference recommends that the committee has completed all charges and secured consensus among all Committee members and recommends disbanding the Committee at this time.
See attachment titled: Food Contact and Utensil Barrier Usage Committee Report

Issue #2: Barriers to Bare Hand Contact Training Materials
- The Conference recommends that the training materials created by the Committee be approved and posted on the Conference web site, including:
  - Barrier to Bare Hand Contact Reference Document – English and Spanish
Barrier to Bare Hand Contact PowerPoint Presentation – English and Spanish
See attachments titled:
Barrier to Bare Hand Contact Reference Document – English
Barrier to Bare Hand Contact Reference Document – Spanish
Barrier to Bare Hand Contact PowerPoint Presentation – English
Barrier to Bare Hand Contact PowerPoint Presentation - Spanish

COMMITTEE MEMBER ROSTER:
- See attached: Food Contact and Utensil Barrier Usage Committee Roster
Barriers to Bare Hand Contact

Scoops
Chopsticks
Deli Papers
Forks and Ladles
Single Use Gloves
Toothpicks
Tongs
Spatulas
Utensils to prepare ready-to-eat foods.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revised December 2009
There is a Tool for Every Job!

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
MISSION

Provide alternative best practices and tools to avoid bare hand contact

Purpose: identify alternative ways to handling food with bare hand contact and address right and wrong ways in handling utensils

Audience: developed for use by industry and regulatory as a training and teaching tool

Document: reflects industry's best practices regarding bare hand contact barriers and will demonstrates alternatives to bare hand contact
When Should a Food Worker Choose a Glove Barrier?

- The correct use of glove barriers is important during food handling tasks. Single-use gloves can be an effective barrier against the transmission of microorganisms, such as bacteria & viruses, from fingertips or foods.

- Hand washing is a primary barrier to cross contamination; barrier utensils & gloves are a secondary barrier.

- Single-use gloves are defined as a “utensil” in the FDA Food Code.

- Glove barriers work when handling any ready-to-eat food and another utensil does not provide the hand dexterity for the task (example: slicing carrots or celery). One glove may work on one hand with a utensil used by the other hand.
When Should a Food Worker Choose a Glove Barrier?

Gloves must be worn:

– If you have a bandage, infection, cut, or sore on hands or arms

– When food workers wear artificial nails or fingernail polish they must wear disposable gloves when handling food

• Glove use is optional to handle raw meats, but can be used for preparation tasks such as breading/battering meats, poultry, seafood, or vegetables

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Glove Barriers Must Be Task-Specific

- Use gloves for designated food task only. Disposable gloves are task-specific and should never be worn continuously.

- Gloves designated for food use should not be used for non-food tasks, such as taking out the garbage, handling money, cleaning surfaces, etc.

- Use vinyl, nitrile synthetic, or latex gloves when handling foods near a heat source cooking area, rather than poly (polyethylene) gloves, which are not resistant to heat.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
4 Most Common Materials Used for Food Contact Gloves

- Poly gloves
- Vinyl gloves
- Latex gloves
- Nitrile gloves

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Avoid Cross-contamination by Washing Hands & Changing Gloves

• If you handle raw meats, poultry, or seafood with gloves on, do not touch ready-to-eat or cooked foods without washing hands and changing gloves

• Remove or change gloves when you change activity (for example: making sandwiches or handling money) or whenever you leave your workstation; wash hands before putting on gloves

• Consider using task-specific colored gloves for cross contamination prevention
Hand washing

Always wash your hands before putting on a new pair of gloves. Follow these five steps to wash your hands properly:

1. Wet your hands with running water as hot as you can comfortably stand (at least 100°F (38°C)).

2. Apply Soap.

3. Vigorously scrub hands and arms for 10 to 15 seconds. Clean under fingernails and between fingers.

4. Rinse thoroughly under running water.

5. Dry hands and arms with a single-use paper towel or warm-air hand dryer or a hand drying device that uses high velocity pressurized air.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Glove Change Frequency

• Change gloves periodically and wash hands each time before & after gloving

• After hand washing, dry hands properly and thoroughly before donning gloves to make them easier to slip on

• Base the frequency of glove changing on TASK changes
  – remove gloves if doing different task not handling ready-to-eat foods;
  – change gloves to handle a raw food or different raw species (for example: raw chicken or raw beef);
  – change gloves to handle another ready-to-eat food that might transfer a flavor or food allergen

• Wash hands and re-glove if a glove develops a hole or tear during usage

• Change gloves after sneezing, coughing, or touching your hair or face

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Get the Correct Glove Fit

• Glove size is important for safety and comfort
• Select the right size for your hand—from small to extra large
• Poly, Vinyl, Latex, & Nitrile usually come in 4 or 5 sizes – Small, Medium, Large, X or XX-Large
• Glove sizes are measured across the widest part of the palm as shown

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Avoid Cross-contamination with Cut-resistant Gloves

- If wearing a cut-resistant glove to cut or handle raw or ready-to-eat food, wear a larger disposable glove over top to avoid cross-contamination of the reusable cut-resistant glove.
- Wash, rinse & sanitize the cut-resistant glove between uses.

<table>
<thead>
<tr>
<th>Cut-resistant Safety Glove Needed</th>
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<th>Disposable Glove Needed</th>
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<th>Disposable Glove Over Top</th>
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<td><img src="image2" alt="Disposable Glove" /></td>
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<td><img src="image3" alt="Disposable Glove Over Top" /></td>
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</table>

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Removing Gloves Correctly

• To remove disposable gloves correctly, grasp at the cuff and peel them off inside-out

★ DO NOT remove and re-use gloves OR re-wash single-use food contact gloves for multiple tasks

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Utensils
(scoops, spoons, ladles, spatulas, tongs, forks, chopsticks, toothpicks)

• The construction and design of the food contact surface should follow FDA Food Code requirements in section 4-201.11 and be durable and able to retain its characteristic qualities under normal conditions.

• All utensils should be washed, rinsed, sanitized and air dried between uses and at least every 4 hours when being used.

• All in-use utensils shall be changed at least every 4 hours during continual use.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Utensils
(scoops, spoons, ladles, spatulas, tongs, forks, chopsticks, toothpicks)

• When not in use, utensils must be stored in a manner to prevent bacterial growth such as in the food, in a clean and protected environment, under running water, or in a container at a minimum temperature of 135°F (57°C)

• In-use utensils may not be stored in chemical sanitizer or ice
Scoops

• Scoops are used by food preparers, servers and customers when preparing, portioning or serving liquid or solid food

• Scoops can be used with or without the use of other barriers

• When using a scoop with a release trigger, prevent the release trigger from touching the food. This prevents pathogens from the hand transferring to the food
Spoons

- Spoons typically have no predetermined serving size or shape

- Spoons are used by food preparers, servers and customers when preparing, portioning or serving liquid or solid food

- When using spoons for tasting, the spoon used for tasting must only be used once. Disposable or single serving utensils can be used for this task

- Improper use of tasting spoons can lead to foodborne illness

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Ladies

• Ladies are available in many different sizes and are an ideal utensil for portion control

• Ladies are used by food preparers, servers and customers when preparing, portioning or serving liquid or solid food

• Ladies can be used with our without the use of other barriers
Spatulas

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Spatulas

• Find a spatula that works best for the task. There are generalized and highly adapted designs widely available.

• Spatulas are used to stir, scoop, spread or lift food.

• Spatulas are a practical alternative to handling food with bare hands in many situations.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Using Spatulas

• Spatulas are used by food preparers and servers when preparing or serving food

• Spatulas should be dedicated to a specific task

• Wash, rinse, sanitize and air dry spatulas between different tasks

• Spatulas may be used as a stand alone tool or in conjunction with another barrier, such as gloves
A wide variety of tongs

Keeping hands off food

Color coded, different sizes, multi-use tongs

Tongs

Bread or pastry

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Tongs

• Tongs are a practical alternative to handling food with bare hands in many situations

• Tongs are a group of kitchen tools that are used to grip or lift food

• They are typically used to move a food from one location to another during preparation or service

• They can also be used to rotate food during cooking, especially during grilling
Tongs for the Task

• Find a tong that works for the task. There are generalized and highly adapted designs widely available. Tongs are a practical alternative to handling food with bare hands in many situations.

• There are specific designs that are intended to pick up and maneuver sugar cubes, asparagus, shredded cheese, ice, salad, spaghetti, hamburgers, fish bones, melon balls, bagels, cooked crabs, garnishes and tea bags.
Using Tongs

- Tongs should be dedicated to a specific task.

- Wash, rinse, sanitize, and air dry all tongs between different tasks.

- Use the right tong for the job. Tongs can be used as a stand alone tool or in conjunction with another barrier such as gloves.
Bagel or toast tongs

Garnish tongs

Asparagus tongs

Sushi tongs

Multi-purpose tongs

Tender touch pastry tongs

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
High Heat nylon tongs

Fine tip tongs

Pastry or meat tongs

Spaghetti tongs

Cake tongs

Pickle tongs

Buffet tongs

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Forks

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Forks

• Forks are a practical alternative to handling food with bare hands in many situations

• Forks are used to grip or lift food

• They are typically used to move food from one location to another or rotate food (while grilling for instance) during preparation

• They may also be used during service, such as, to hold or grip a roast on a meat carving station

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Using Forks

• forks should be dedicated to a specific task

• wash, rinse, sanitize and air dry forks between different tasks

• forks designed and intended for single-use only must be discarded after each use

• forks may be used as a stand alone tool or in conjunction with another barrier, such as gloves

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
DELI PAPER
Deli and Bakery Wrap

• Deli and Bakery Wrap can be used as a barrier to bare-hand contact

• Sheets are single-use and can be used in the foodservice area, by wait-staff, and customers

• Sheets can be purchased in a variety of sheet sizes and packages from any restaurant or foodservice supply vendor
Selecting Bakery or Deli Wrap

• The main purpose of the wrap is to act as a sanitary barrier between the bare hand and food. Food service operators should select wrap based on intended purpose.

• Wrap can be dry waxed or without wax. Dry wax will absorb some liquid and prevent the seeping of product liquid onto the hands.

• Wraps without wax are generally intended to be used for bakery products. Food service operators should select wrap based on intended purpose.
Selecting Bakery or Deli Wrap

• Operators or purchasing agents must ensure all wrap components are in compliance with the FDA, Title 21, CFR 177.1520

• Sheets are manufactured in accordance to Good Manufacturing Practices

• Manufacturers of food contact wraps or sheets must demonstrate that all components are safe for use and do not leach components or toxic elements onto the food

• Dispensing packages should be well made to prevent contamination of the sheets from external debris and permit easy access to the sheet
Deli and Bakery Wrap Benefits

• Dispensing container protects the sheets from contamination before use

• Easy to use for foodservice employees and customers

• Helps keep food fresh

• Absorbs grease and oil while acting as a barrier for food
Using Deli and Bakery Wrap

- Sheets should be dispensed one at a time without tearing or contaminating the remaining sheets.

- If sheets are used as the primary barrier, food preparers should discard used sheets immediately after use. Sheets should not be reused or remain with the food.

- Store the dispensing container in a location so as to prevent cross contamination from other food or debris.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Chopsticks

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Chopsticks

- Chopsticks may be an alternative to handling food with bare hands.

- They are typically or most commonly used for eating but may be used to move food from one location to another during preparation or service.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Using Chopsticks

• Chopsticks should be task specific

• Chopsticks may be constructed of a variety of woods, plastics or metals

• Chopsticks constructed to be a multi-use item must be washed, rinsed, sanitized, and air dried between different tasks

• Chopsticks designed and intended for single-use only must be discarded after each use

• Chopsticks are generally used as a stand alone tool/barrier, but may be used in conjunction with another barrier

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Toothpicks

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Toothpicks

- Toothpicks are typically used to prevent bare hand contact with ready-to-eat foods such as hors d’oeuvres, but are also used to hold stacked/layered sandwiches or other items together and/or upright.

- Toothpicks should be placed in food, by staff, prior to service or presented/provided to consumer in a manner that will prevent possible contamination of the food contact portion of the toothpick, such as, upright in a small/slender glass or container.

- Toothpicks may be constructed of a variety of woods, plastics or metals. In almost all cases, toothpicks are designed to be single-use items only, discarded after use.

- If designed to be multi-use, toothpicks must be washed, rinsed, sanitized, and air dried between tasks.

Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Presentation prepared by the Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection Revised December 2009
Barreras al Contacto con las Manos Descubiertas

- Palas
- Palillos
- Papel de Envoltura
- Tenedores y Cucharones
- Palillos para dientes
- Pinzas
- Espátulas
- Guantes Desechables

Utensilios para Alimentos Listos para Comer

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
¡Hay una Herramienta Para cada Tarea o Uso!

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Puede usar objetivo en vez de MISIÓN

• Proporcionar la mejore orientacion y utensilios para evitar contacto con las Manos descubiertas

Propósito: identificar maneras alternativas a la manipulación de alimentos con las manos descubiertas e indicar los modos correctos e incorrectos de manejar los utensilios

Audiencia: desarrollado para su uso por parte de la industria del servicio de alimentos y autoridades regulatorias como herramienta de entrenamiento y enseñanza

Documento: refleja Las mejores prácticas en la industria en cuanto a las barreras al contacto con las manos descubiertas y demuestra las alternativas al contacto con las manos descubiertas

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
¿Cuándo debe elegir una barrera de guante un empleado que manipula alimentos?

- El uso correcto de los guantes deschables es muy importante durante el desempeño de tareas de manipulación de alimentos. Los guantes desechables pueden ser una barrera efectiva para prevenir la transmisión de microorganismos como las bacterias y virus que se alojan en las puntas de los dedos o en los alimentos.
- El lavado de manos es la primera barrera contra la contaminación cruzada; los utensilios de barrera y guantes constituyen una barrera secundaria.
- A los guantes desechables se les ha definido como “utensilios” por el Código Alimentario de la FDA.
- Las barreras de guante son efectivas para la manipulación de alimentos listos para comer cuando ningún otro utensilio puede proveer la destreza manual requerida para la tarea en cuestión (por ejemplo, rebanar zanahorias o apio). Se puede utilizar un guante en una mano mientras se sostiene algún otro utensilio con la otra mano.
¿Cuándo debe elegir una barrera de guante un empleado que manipula alimentos?

Los guantes de vinil:

- En caso de que alguien tenga una curita, infección o herida en las manos o brazos deberá suspender cualquier actividad que involucre el contacto de los alimentos con las manos descubiertas.

- En caso de que los empleados que manipulan alimentos usen uñas postizas o esmalte para las uñas se deberá utilizar guantes desechables al manipular alimentos.

- El uso de guantes es opcional para la manipulación de carnes crudas pero pueden ser utilizados para desempeñar actividades de preparación como empanizar/capear carnes, aves, mariscos o vegetales.

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Las Barreras de Guante deben ser específicas para cada Tarea

• Use sólo los guantes designados para las labores específicas. Los guantes desechables son específicos para cada tarea y no deben ser usados de manera indefinida

• Los guantes asignados para manipular alimentos no deben ser utilizados para ninguna otra tarea como sacar la basura, manipular dinero, limpiar superficies, etc.

• Use guantes de vinilo, nitrilo sintético o látex cuando vaya a preparar (cocinar) alimentos cerca de fuentes de calor en vez de guantes de polietileno ya que éstos no son resistentes al calor
Los cuatro materiales de guantes más comunes

Guantes de Polietileno

Guantes de Látex

Guantes de Vinilo

Guantes de Nitrilo
Evite la contaminación cruzada mediante el lavado de manos y cambio de guantes

• En caso de que esté manipulando carne, aves o mariscos con guantes, no podrá tocar alimentos RTE sin haber lavado sus manos y cambiado los guantes previamente

• Deberá remover o cambiar los guantes cada vez que se cambie de actividad o bien cuando se abandone la estación de trabajo. Antes de volver a colocarse los guantes debe haber un lavado de manos previo

• Los guantes de colores para tareas específicas son otra opción para la prevención de la contaminación cruzada
**Lavado de Manos**

Siempre lave sus manos antes de colocarse un nuevo par de guantes. 
Siga estos cinco pasos para lograr un lavado de manos apropiado:

1. Remoje sus manos con agua a una temperatura que soporte cómodamente (al menos 100 F (38° C))

2. Aplique Jabón

3. frote vigorosamente sus manos y antebrazos durante 10 a 15 segundos. Lave bajo sus uñas y entre los dedos.

4. Enjuague sus manos vigorosamente bajo el chorro de agua

5. Seque sus manos y antebrazos con toalla de papel desechable o con secador de aire

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Frecuencia de Cambio de Guantes

- Cambie los guantes periódicamente y lave sus manos antes y después de que realice cambio de guantes.

- Seque bien sus manos después de lavarlas para facilitar la colocación del nuevo par de guantes.

- Establezca una frecuencia en vez de Establezca una base de frecuencia durante el cambio de tareas.
  - Retire los guantes si realiza actividades distintas de la manipulación de alimentos RTE.
  - Cambie los guantes para manipular alimentos crudos o la carne cruda de distintas especies (pollo crudo a carne de res cruda).
  - Cambie los guantes para manipular cualquier alimento listo para comer que pudiera transferir sabor o algún alérgeno alimentario.

- Lave sus manos y cambie los guantes en caso de que los guantes que esté usando se rompan o rasguen.

- Cambie los guantes después de estornudar, toser o tocarse la cara o el cabello.

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Deciembre 2009
Elija la Talla de Guantes Correcta

• La talla de los guantes es importante para trabajar con seguridad y comodidad
• Elija la talla correcta para sus manos — de chico (s) a extra grande (xl)
• A los guantes de Polietileno, Vinilo, Látex, y Nitrilo se les puede encontrar en 4 o 5 tallas – Chico (S), Mediano (M), Grande (L), Extra o Extra Extra Grande (XL o XXL)
• La talla de los guantes se mide a través de la parte más ancha de la palma de la mano como se muestra en la ilustración

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Evite la contaminación cruzada mediante el uso de guantes resistentes a las cortaduras

- En caso de que utilice un guante resistente a las cortaduras para cortar o manipular alimentos listos para comer, coloque un guante desechable más grande para evitar la contaminación cruzada del guante resistente a las cortaduras reutilizable.
- Lave, enjuague y desinfecte el guante resistente a las cortaduras entre las distintas tareas que realice.

Si se requiere Guante de Seguridad Resistente a las Cortaduras + También se requiere Guante Desechable = Guante Desechable Arriba
Para Retirar los Guantes Apropiadamente

• Para retirar los guantes desechables de un modo apropiado, sostenga el borde de la muñeca y jale desde adentro hacia afuera

★ POR NINGÚN MOTIVO retire y reutilice los guantes O los lave con el propósito de emplearlos en múltiples tareas

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Deciembre 2009
Utensilios
(palas, cucharas, cucharones, espátulas, pinzas, tenedores, palillos, palillos de dientes)

• El material de construcción y diseño de las superficies de contacto con alimentos debe cumplir con los requerimientos del Código Alimentario de la FDA mencionados en la sección 4-201.11 y debe ser durable y mantener sus cualidades características bajo condiciones de uso normal

• Todos los utensilios deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso

• Todos los utensilios en uso continuo deben ser cambiados al menos cada cuatro horas

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Utensilios
(palas, cucharas, cucharones, espátulas, pinzas, tenedores, palillos, palillos de dientes)

• Cuando no se les esté utilizando, los utensilios deben ser almacenados de tal modo que se prevenga el desarrollo de bacterias, adentro del mismo alimento, en un medio ambiente limpio y protegido, dentro de un recipiente con agua corriente o bien en un recipiente con agua a una temperatura mínima de 135° F

• Los utensilios en uso no podrán ser colocados en solución sanitizante o hielo

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Palas

- Las palas son utilizadas por el personal que prepara o sirve alimentos o por clientes para preparar, porcionar o servir alimentos sólidos o líquidos

- La palas se pueden utilizar con o sin el uso de otros utensilios de barrera

- Cuando se utilice una pala con dispensador, es necesario que se evite el contacto del mecanismo del dispensador con el alimento. De este modo se podrá prevenir la transferencia de patógenos de las manos al alimento
Cucharas

• Generalmente, las cucharas no tienen un tamaño de porción o forma predeterminados

• Las cucharas son utilizadas por el personal que prepara o sirve alimentos o por clientes para preparar, porcionar o servir alimentos sólidos o líquidos

• Las cucharas usadas para probar alimentos deben ser lavadas, enjuagadas y desinfectadas entre cada uso. Las cucharas desechables o utensilios de un sólo uso podrían ser una buena opción para este tipo de tareas

• El uso inapropiado de cucharas de prueba podría provocar enfermedades alimentarias

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Cucharones

- Los cucharones están disponibles en varios tamaños y son un utensilio ideal para el control de porciones.

- Los cucharones son utilizados por el personal que prepara o sirve alimentos o por clientes para preparar, porcionar o servir alimentos sólidos o líquidos.

- Los cucharones se pueden utilizar solos o con la ayuda de otros utensilios de barrera.

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Espátulas

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Espátulas

• Elija la espátula que mejor se adapte a la tarea a realizar. A las espátulas se les encuentra disponibles tanto en diseños genéricos como sumamente adaptados para tareas específicas

• Las espátulas se usan para revolver, dividir en porciones, untar o levantar los alimentos

• Las espátulas son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones
El Uso de Espátulas

• Los manipuladores de alimentos, el personal de servicio o los consumidores emplean las espátulas para revolver, dividir en porciones, untar o levantar los alimentos.

• Sólo use la espátula indicada para cada tarea específica

• Lave, enjuague, desinfecte y seque al aire las espátulas entre cada uso

• A las espátulas se les puede utilizar con o sin la ayuda de otros utensilios de barrera, como los guantes

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Hay gran variedad de pinzas

Con código de colores, distintos tamaños, pinzas para usos múltiples

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Deciembre 2009
Pinzas

- Las pinzas son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones

- Las pinzas son un grupo de utensilios de cocina que se usan para sostener o servir alimentos

- Típicamente se les usa para mover los alimentos de un sitio a otro durante su preparación o servicio

- También se les puede usar para voltear los alimentos durante su cocción, especialmente durante el asado

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Una pinza para cada uso

• Elija la pinza apropiada para la tarea que va a realizar. A las pinzas se les encuentra disponibles tanto en diseños genéricos como altamente adaptadas para tareas específicas. Las pinzas son una alternativa práctica a la manipulación de alimentos con las manos descubiertas en muchas situaciones.

• Hay pinzas específicamente diseñadas para levantar artículos como cubos de azúcar, espárragos, queso rayado, hielo, ensalada, spaghetti, hamburguesas, espinas de pescado, perlas de melón, bagels, cangrejo cocido, garnituras y bolsas de té.
El Uso de Pinzas

• A cada pinza debe dárselle el uso específico para el cual fue diseñada.

• Lave, enjuague, desinfecte y seque al aire las pinzas entre cada tarea

• Use la pinza apropiada para cada tarea. A las pinzas se les puede utilizar con o sin la ayuda de otros utensilios como son los guantes

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Pinzas para Sushi

Pinzas para Bagels o pan tostado

Pinzas para adornos

Pinzas para espárragos

Pinzas para piezas delicadas

Multi-purpose tongs

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Deciembre 2009
Pinzas de Nylon para altas temperaturas

Pinzas de punta delgada

Pinzas para Spaghetti

Pinzas para enfuntidos

Pinzas para productos horneados o carne

Pinzas para pastel

Pinzas de Buffet

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Tenedores

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Deciembre 2009
Tenedores

• Los tenedores son una alternativa práctica para la manipulación de alimentos con las manos descubiertas en muchas situaciones.

• Los tenedores se usan para sostener o levantar alimentos.

• Se les usa típicamente para sostener o levantar alimentos, para moverlos de un sitio a otro o para voltear los alimentos durante su preparación para sostener los alimentos al cortarlos o tallarlos.

• También se les puede usar durante el servicio para sostener los alimentos al cortarlos o tallarlos.
El uso de los Tenedores

• Se debe utilizar el tenedor apropiado para cada tarea

• Lave, enjuague, sanitice y seque al aire los tenedores entre cada tarea

• Los tenedores que han sido diseñados para usarse sólo una vez deberán ser desechados después de haber sido usados

• Los tenedores pueden ser utilizados con o sin la ayuda de otros utensilios como son guantes

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
PAPEL DE ENVOLTURA

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Papeles de Envoltura

• Los papeles de envoltura de panadería o delicatessen se usan para mantener una barrera sanitaria entre los alimentos y las manos decubiertas

• Los pliegos individuales son de un sólo uso y pueden ser utilizados en el área de servicio de alimentos, por meseros o clientes

• A las envolturas para alimentos se les encuentra disponibles en una gran variedad de tamaños y empaques en los almacenes de artículos para servicios de alimentos
Eligiendo el Papel de Envoltura Adecuado

- Los papeles de envoltura de panadería o delicatessen se usan para mantener una barrera sanitaria entre los alimentos y las manos decubiertas. Los operadores de servicios de alimentos debe seleccionar la envoltura apropiada tomando en consideración el uso que les dará.

- Las envolturas pueden ser enceradas o sin encerar. La envoltura encerada puede absorber un poco de líquido evitando que se ensucien las manos.

- Las envolturas sin encerar generalmente se usan para manipular productos de panadería.

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Eligiendo el Papel de Envoltura Adecuado

• Los operadores de servicios de alimentos o representantes de compras deben asegurarse de que todos los componentes de las envolturas cumplen con los requerimientos de la sección 21, CFR 177.1520 de la FDA.

• Las envolturas deben ser fabricadas mediante la aplicación de Buena Prácticas de Manufactura.

• Los fabricantes de envolturas para alimentos deben demostrar que todos los componentes utilizados son seguros y que no habrá migración de componentes o de elementos tóxicos a los alimentos.

• Los paquetes o empaques dispensadores deben ser bien construidos, de modo tal que las envolturas no se contaminen con impurezas externas y que se permita tomar las hojas con facilidad.

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Beneficios del uso de Papel de Envoltura

• Los distribuidores automaticos protegen las hojas de la contaminación previa a su uso

• Son fáciles de usar por parte de operadores de servicios de alimentos y clientes

• Ayudan a mantener los alimentos frescos

• Absorben grasa y aceite mientras actúan como barreras para proteger los alimentos
Uso de los Papeles de Envoltura

• Las hojas de envoltura deben retirarse una a la vez sin que se rompan o se contamine el resto de las hojas.

• Si se va a usar papel de envoltura como barrera primaria, los empleados que manipulan alimentos deben desechar inmediatamente las hojas usadas. Las hojas de envoltura no pueden ser reutilizadas ni los alimentos almacenarse en ellas.

• El distribuidor automático de hojas debe ser almacenado en un sitio adecuado en el que se evite la contaminación cruzada con otros alimentos o impurezas externas.
Palillos
Palillos

• Los palillos pueden usarse con sin la ayuda de otros utensilios como son los guantes

• Generalmente los consumidores usan los palillos para comer pero los empleados que manipulan alimentos los pueden usar para mover los alimentos de un sitio a otro durante la preparación o servicio de los mismos
El uso de los Palillos

• Los palillos deben ser utilizados sólo para tareas específicas
• Los palillos pueden ser fabricados con varios materiales derivados de maderas, plásticos o metales
• Los palillos fabricados con materiales reutilizables deben ser lavados, enjuagados, desinfectados y secados al aire entre cada uso
• Los palillos diseñados y fabricados para usarse sólo una vez deben ser desechados después de haber sido utilizados
• Los palillos pueden usarse con o sin la ayuda de otros utensilios de barrera como los guantes
Palillos para Dientes

Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Palillos para Dientes

• Los palillos para dientes se usan típicamente para evitar el contacto de las manos descubiertas con alimentos listos para comer como los entremeses. A los palillos para dientes también se les utiliza para sostener o mantener acomodados alimentos apilados o en capas como los sandwiches u otras preparaciones.

• Los palillos para dientes deben ser colocados por el personal antes del servicio de los alimentos o bien presentados a los consumidores de tal manera que se evite una posible contaminación de la porción que estará en contacto con el alimento, de modo vertical en un recipiente angosto de plástico o vidrio.

• Los Palillos para Dientes pueden ser fabricados con una variedad de materiales derivados de maderas, plásticos o metales. Los palillos para dientes están típicamente diseñados para ser de un sólo uso y deben ser desechados una vez se les haya utilizado.

• En el caso específico de que los palillos de dientes hayan sido diseñados para reutilizarse, éstos deberán ser lavados, enjuagados, desinfectados y secados al aire entre cada uso.
Presentación preparada por el Food Contact and Utensil Barrier Usage Committee for the Conference for the Food Protection - Revisada en Diciembre 2009
Title:
Barriers to Bare Hand Contact Training Materials

Issue you would like the Conference to consider:
The Food Contact and Utensil Barrier Usage Committee seeks Council II's approval of the following training materials:

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

See attachments to Issue titled: Report - Food Contact and Utensil Barrier Usage Committee

Public Health Significance:
The Committee recognizes the need for a Brand neutral guidance document illustrating the effective use of barriers and utensils when handling foods, including the use of disposable gloves, and the process of barrier use related to hand hygiene.

1. The committee decided the best way to present the information in a user friendly manner is to provide a reference document along with a separate PowerPoint presentation. The following tools and utensils are now included in the document: gloves, scoops, spoons, ladles, spatulas, tongs, forks, deli papers, chopsticks, and toothpicks.

2. The committee identified the need to have the documents translated into Spanish.

3. The Spanish translation has been provided with the committee report.

4. The reference document and PowerPoint presentation now sufficiently include pictures and illustrations representing the appropriate tools and utensils.
5. The entire committee has provided input and collectively agreed on the attached documents.

**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.

**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.*
Title:
Support & 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 Model Food Code. The cooperation and input of various stakeholders-including consumer, industry, and regulatory representatives-is crucial to the development of this important public health guidance document. Currently, consumer participation in the Conference is anemic, in part because of the financial cost of attending the Conference. Without adequate consumer participation, both the credibility and the substance of the Model 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 CFP, with a goal toward increasing consumer participation each cycle. Scholarships should be adequate to cover the cost of transportation to and from the conference, conference 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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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.
Title:

Limiting Committee Member Numbers

Issue you would like the Conference to consider:

Reconsider direction that an unlimited number of members should be included on committees. This is not addressed in the Constitution and Bylaws or the Conference Procedures Manual under the Council Committees. Some committees specify representation from respective groups of regulatory, industry, academia or stakeholders.

Committees having over 20 plus individuals find it difficult to achieve quorum, schedule mutually agreeable times for conference calls, and ensure that all present on conference calls had time to voice their opinions. A maximum limit of members should be established to facilitate consistent participation and progress on complex topic(s) that are given to committees to address.

Public Health Significance:

No public health significance is noted.

Recommended Solution: The Conference recommends...:

the Constitution and Bylaws Committee develop guidelines regarding committee structure, 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.

Submitter Information:

Name: Tressa Madden
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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.