









MECKLENBURG COUNTY
North Carolina
Public Health

2026

SAMUEL J. CRUMBINE CONSUMER PROTECTION AWARD

for Excellence in Food Protection at the Local Level

Application for Mecklenburg County Environmental Health

3205 Freedom Drive. Suite 8000 Charlotte, NC 28208 • https://eh.mecknc.gov/

MECKLENBURG COUNTY
North Carolina

Executive Summary

Mecklenburg County, formed in 1762, is the second most populous county in North Carolina with 1,162,168 citizens as of 2023. Mecklenburg County Health Department (MCHD) regulates more than 8800 establishments and completes the largest proportion of food inspections in the state at 12.5%. MCHD is structured into six key divisions: Office of the Health Director, Office of the Medical Director, Maternal and Child Health, Clinical Services, Population Health, and Preventive Health, which includes Environmental Health (MCEH).

MCEH protects public health through three major program areas: Groundwater and Wastewater Services, Pools and Environmental Health Services, and two food safety programs, Planning and Support Services (PASS) and Food and Facilities Sanitation (FFS). These programs enforce state and local regulations related to onsite wastewater, well construction, vector control, public swimming pools, tattoo artists, food service establishments, hotels, summer camps, bed & breakfasts, temporary food establishments at festivals, childcare and adult day centers, hospitals, nursing homes, schools, group homes, and local jails. MCEH began its journey with the Voluntary National Retail Food Regulatory Program Standards in 2010 with its first self-assessment.

During the COVID-19 pandemic, MCEH rapidly expanded its responsibilities, mobilizing COVID Ambassadors to address executive order compliance, conducting virtual consultations for food establishments with exposures, and staffing a quarantine shelter. During this same period, training for eight Environmental Health Specialists (EHS) shifted to a fully virtual platform to ensure continuity of MCEH's established training program. Amid uncertainty, a second-tier training team, Training 2.0, was also implemented to enhance competency and consistency as part of MCEH's long-term training strategy. Additionally, Mecklenburg County hosted the 2020 Republican National Convention, during which a Program Manager received the FDA Service of Excellence Award. Other accomplishments in 2020-21 included securing an Association of Food and Drug Officials grant to support Voluntary National Retail Food Regulatory Program Standard 2 and developing new Shared Kitchen guidance.

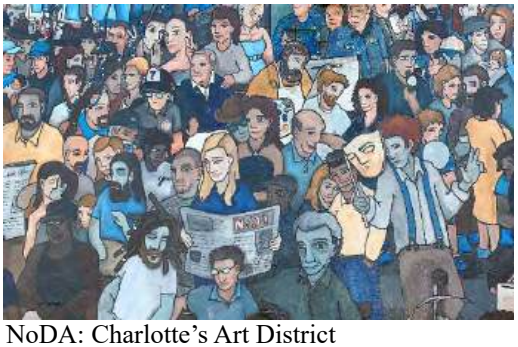
Through continuous quality improvement, MCEH has strengthened food safety on a local, state, and national level. Over the past six years, the department has trained 25 new Environmental Health Specialists (EHS) in food safety and added eight new positions to support growing demand. In 2023, the MCHD executive team formally incorporated achieving all nine Retail Program Standards (RPS) into the department's strategic business plan, solidifying Mecklenburg County's commitment to national excellence and expanding opportunities for grant funding and innovation.

Together, these efforts demonstrate a food protection program that is innovative, resilient, and deeply committed to public health, serving a community of more than one million residents and tens of millions of annual visitors. Through its leadership, commitment to consistency, and measurable results, MCEH exemplifies the excellence recognized by the Crumbine Award and serves as a model of best practice for agencies regionally and nationally.



2020: Virtual Team Settings


2020: RNC in action


NoDA: Charlotte's Art District

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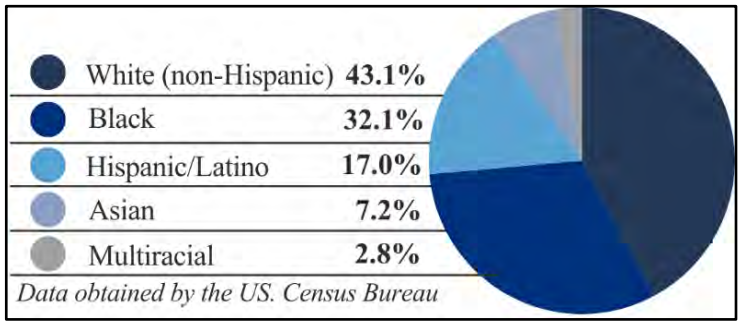
Part I: Program Basics

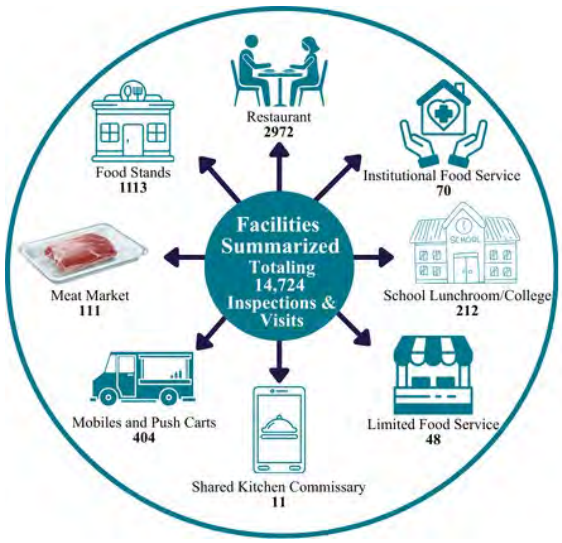
Demographics



Located in the southwestern region of the state bordering South Carolina, Mecklenburg County is 524 square miles, including seven towns (Cornelius, Davidson, Huntersville, Matthews, Mint Hill, Pineville and Stallings), but is most recognizable for its largest urban center: Charlotte. As a premier economic engine of North Carolina, Charlotte is the nation's second-largest banking center and a former US Mint City. Formed in 1762, Mecklenburg County holds deep historical significance, including its own local Declaration of Independence, penned seven years before the national document. This legacy is commemorated at Independence Square with "The Grand Disc," a coin-shaped public art installation.

Today, the county continues to preserve and support historically significant events while serving as a hub for higher education, professional sports, arts, and culture. The area is home to multiple universities and colleges, the NFL Carolina Panthers, the NBA Charlotte Hornets, MLS Charlotte FC, and several minor-league teams. Charlotte is home to the NASCAR Hall of Fame as well as Blumenthal Arts, which presents the largest Broadway season in the Carolinas. In addition to these tourism beacons, the top economic drivers are finance, manufacturing, additional museums, and an international airport. More than 31 million visitors travel to the area annually, generating over $6.4 billion in visitor spending. The county surpassed one million residents in 2015 and continues to grow rapidly, adding approximately 157 new residents per day between 2023 and 2024. Uniquely, Mecklenburg County is a majority-minority county, with 56.3% of residents reporting non-White as their race and 16.7% of residents reporting being born outside of the country. Approximately 22.3% of Mecklenburg County residents aged 5 and older speak a language other than English at home.





Charlotte's two intersecting interstates and its international airport contribute to a large transient population that visits the county for work, leisure, and travel—frequently using facilities regulated by MCEH, which is responsible for ensuring their safety.

Planning & Support Services (PASS) and Food & Facilities Sanitation (FFS) oversee 6452 establishments and 350 temporary foodservice establishments (**Appendix A1**). Foodservice accounts for 78% of establishments, while institutions, like schools and childcare, account for 22%. FFS and PASS assist other MCEH programs with permitting tattoo artists and seasonal swimming pools. FFS oversees Childhood Lead (Pb) Poisoning & Prevention and responds to over 20 lead cases each year.

Part I: Program Basics

Program Resources

Environmental Health is a mandated service in NC, delegated to each individual county. However, the state is not able to support funding for the staffing level needed to complete all state-required inspections. MCEH's food safety programs are primarily funded by Mecklenburg County taxes. The combined budget for PASS and FFS is $8,631,109, covering salary and operating funds.

PASS and FFS also receive a portion of state aid and generate approximately $388,000 annually through fees (**Appendix A2**) approved by the Mecklenburg County Board of County Commissioners (BOCC). These fees include Temporary Food Establishment permits, home daycare permits, plan review fees, mobile food commissary approvals, and lead hazard investigations. Plan review fees range from $100 to $3,000, depending on the complexity of the operation. Since 2020, MCEH has secured $179,820 in NEHA and AFDO grants, which have supported technology upgrades such as iPads for field staff, enhanced training, and travel for mentor/mentee activities.



Quail Hollow – PGA Tour 2025

Grant Type	Funding
Grant Year 2020	
AFDO and NACCHO Grants (Mentee)	$17,000
Grant Year 2021	
AFDO Grant	$3,000
Grant Year 2022	
NEHA-FDA RFFM (Track 1) and Mentee	$25,820
Grant Year 2023	
NEHA-FDA RFFM (Track 2) and Mentor	$20,000
Grant Year 2024	
NEHA-FDA RFFM (Track 2) and Mentor	$32,500
Grant Year 2025	
NEHA-FDA RFFM – Track 3 (3 Year)	$63,000
NEHA-FDA RFFM Mentor and Training	$18,500
*Note: For a complete breakdown, see **Appendix A3***	

Mecklenburg County has the largest Environmental Health program in NC. MCEH positions include one Division Director, 3 Environmental Health Managers, 13 Supervisors, 2 Environmental Analysts, 22 Senior Environmental Health Specialists, 4 Plans Examiners, 1 Hydrogeologist, 46 Environmental Health Specialists, 6 Administrative Support Assistants, and 19 temporary positions. Of these, 73 positions are dedicated to food, lodging, and institutions programs and are divided amongst PASS and FFS programs. PASS oversees onboarding and training for all new staff slated for the food program, shared kitchens, mobile food permits, all Environmental Health plan review, including swimming pools, and efforts to meet and maintain the RPS. FFS manages inspections for food service permits, lodging establishments, institutions (schools, childcare, jails, nursing homes, etc.), and the childhood lead poisoning and prevention program. Together, PASS and FFS complete over 17,000 inspections each fiscal year, the largest inspection volume handled by any single county in North Carolina.

Using a cascading goal alignment on all work plans from the Health Director to front-line staff members, each layer of employees carries a commitment to protecting public health. The overarching MCEH goal alignment is accountability in business operations. This commitment requires consistency among food inspectors, clear written and verbal communication, professional customer service, informative educational outreach, and follow-up with facilities to ensure long-term compliance for the prevention of foodborne illness. This is achievable by the use of Quality Assurance (QA) and other continual quality improvement activities.

Part I: Program Basics

Vision, Goals, and Objectives

MCHD, accredited with honors in 2025, is grounded in a mission to promote and protect the public's health and a vision to assure the health and safety of a diverse and rapidly changing community. Guided by the 10 Essential Public Health Services, MCHD approaches policy development, assurance, and assessment as interconnected responsibilities that shape how the community is served today and prepare for tomorrow's challenges.



Within this framework, MCEH has established a program vision centered on leadership, adaptability, and innovation. The vision is to take the gray areas of environmental health, the unprecedented, the emerging, the socially trending, the exotic, and the complex, lean in, and set the standard. During the COVID-19 pandemic, "unprecedented" became the only word that captured the pace and complexity of decisions being made. While many teams prefer to operate within predictable, well-defined scenarios, MCEH excels in environments where outcomes are uncertain. Decades of combined experience, diverse expertise, and a steadfast commitment to public health support the development of sound, defensible precedents. This approach transforms the unfamiliar into the known and positions Mecklenburg County as a leader whose work strengthens regional and statewide consistency.

To fulfill both the department's mission and the program's vision, MCEH has identified five core goals that guide program direction:

1. Lead with innovation in emerging and unprecedented environmental health challenges.
2. Build and sustain a highly trained, future-ready workforce.
3. Strengthen foodborne illness prevention through data-driven decision-making.
4. Ensure staff have the tools, equipment, and support needed for high-quality inspections.
5. Promote a culture of public health excellence and continuous improvement.

These goals shape internal priorities such as hiring personnel aligned with public health values, implementing succession planning, ensuring staff have accurate and reliable equipment, and continually integrating illness prevention strategies into community practice.

MCEH's food safety programs are supported by a structured training model that reinforces these goals. New staff receive foundational instruction in the Food Code and risk-based inspection practices, followed by guided field experience and ongoing professional development. Continuous coaching, peer learning, and quality assurance reviews ensure that staff grow in competence and confidence as they take on increasingly complex work.

For MCEH, aligning with the FDA Retail Program Standards is not about checking a box. It is about building processes that are sustainable, consistent, and impactful. Improvement expectations ensure that systems are strong, training is provided where needed, stakeholders remain engaged, and performance is continually monitored through tools such as technology dashboards and data-driven reviews.

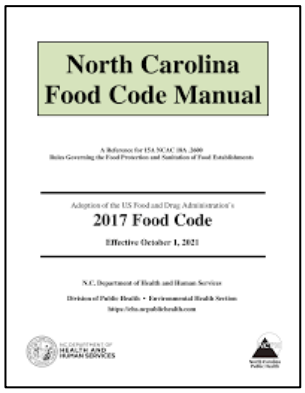
Through this vision, these goals, and a commitment to meaningful, measurable improvement, MCEH is building a modern, resilient, and forward-thinking food safety program, one designed not only to meet the standards but to elevate them.

Part II: Baseline and Program Assessment

Regulatory Foundation

Food safety oversight in NC is shared between the North Carolina Department of Health and Human Services (NCDHHS), which regulates retail food establishments and delegates authority to local programs like MCEH, and the North Carolina Department of Agriculture and Consumer Services (NCDA&CS), which oversees food production and distribution. Both agencies work together to ensure food safety from production to retail food service. MCEH operates as an agent of the State of NC, carrying out food safety regulations under authority delegated by the state. NC uses the following hierarchy of regulations for establishments (**Appendix B1**):

- State General Statutes (NCGS 130A-247 through 130A-250) establish the legal foundation for food safety, including definitions, permitting requirements, and enforcement authority.
- Administrative Rules, adopted by the NC Commission for Public Health under authority granted by the General Assembly, provide operational requirements which include the 15A NCAC 18A .2600 Rules Governing Food Establishments.
- The NC Food Code, based on the FDA Model Food Code



Because rulemaking authority rests with the state, MCEH's role is to implement the statutes, rules, and Food Code as they are updated at the state level. Once adopted, counties must apply them uniformly. Even though the state leads this charge, MCEH has remained involved in the process by serving on the 2009 Food Code adoption committee and collaborating with the NC Retail Program Standards Network (NCRPSN) to ensure alignment with Standard 1 during the adoption of the 2017 Food Code. This structure ensures that MCEH operates with statewide consistency and the most up-to-date science.

Before NC adopted the FDA-based Food Code, the state's regulatory framework was the 1976 Food Service Sanitation Manual**,** which focused heavily on good retail practices such as cleaning, sanitation, equipment condition, and general facility operations. This earlier approach emphasized structural and procedural compliance rather than the risk factors most associated with foodborne illness. The transition to the FDA-based Food Code marked a significant shift toward aligning NC with national best practices and the five major risk factors associated with foodborne illness.

When Charlotte was selected to host the 2012 Democratic National Convention, the minimum regulatory requirement for the event was the 2009 FDA Model Food Code. To ensure compliance with this national event, NC adopted the 2009 NC Food Code. MCEH assisted in its implementation locally by coordinating with event organizers, conducting preventive assessments, and ensuring that all temporary and permanent food operations met the updated requirements. NC again updated its regulatory framework in October 2021, adopting the 2017 NC Food Code based on the FDA Model Food Code and Supplement. MCEH supported statewide implementation by distributing educational materials and conducting outreach to help establishments understand key changes from the 2009 Code.



As the state's most dynamic jurisdiction, MCEH is frequently the first to encounter innovative food trends and emerging operational challenges. These early insights allow MCEH to inform statewide decision-making, support consistent interpretation of the Food Code, and help shape the evolution of the NC retail food protection program. With a strong regulatory foundation and full conformance with Standard 1 (**Appendix B2**), MCEH will continue to lead this work, advancing a risk-based, forward-thinking approach that strengthens food safety across the state.

Part II: Baseline and Program Assessment

Training Program

Mecklenburg County operates a comprehensive internal training program that guides new staff and those newly assigned to the retail food protection program through a structured 12-month process. Using a two-tier model (Training 1.0 and Training 2.0), the program ensures every EHS is prepared to conduct risk-based inspections, accurately apply the Food Code, and manage a retail food territory. The curriculum aligns with the performance elements in the Conference for Food Protection (CFP) Field Training Manual. All staff complete this program in addition to the state-required NCDHHS training and examinations needed for authorization.

Training 1.0 serves as the foundational tier, supported by one supervisor and four senior EHSs who guide staff through a six-month training on food safety, including risk-based concepts, the Food Code, plan review, and microbiology. Each trainee is paired with an advisor who monitors progress and provides ongoing support. During this phase, staff evaluate more than 60 retail food establishments across all risk levels and gain exposure to territory management topics outlined in the Training Manual (**Appendix C1**). As foundational knowledge solidifies, trainees begin leading inspections in preparation for state authorization. While completing the NCDHHS authorization process, staff complete FDA pre-coursework on the pathway to Standardization, before transitioning to Training 2.0.



Training 2.0 is an innovative model that bridges the gap between initial authorization and full independence in the field. This team, supported by one supervisor and two senior EHS, provides practical application of the knowledge gained in Training 1.0. Newly authorized EHSs assume responsibility for an assigned territory and the full scope of independent field duties while continuing to receive guidance from the Training 2.0 team. A senior EHS accompanies them during permitting, temporary food events, foodborne illness investigations, and other specialized activities to ensure consistent application of policy. EHSs receive rigorous quality assurance to ensure that the risk-based inspection concepts and policy expectations are met. These field experiences are reinforced with in-class instruction to address questions and strengthen understanding. By the end of Training 2.0, all EHSs are required to complete all FDA coursework (**Appendix C2**) and demonstrate competency through independent inspections on the path to standardization.

Within 24 months of hire, each EHS achieves FDA Standardization with three degrees of separation from one of the three FDA Standards (**Appendix C3**). MCEH Standard 2 Procedures (**Appendix C4**) help produce a highly consistent workforce capable of conducting complex inspections, rapidly identifying foodborne illness risk factors, and supporting large-scale events while making decisions grounded in science. Mecklenburg County was the first in North Carolina to meet Standard 2 (**Appendix C5**) and has strengthened statewide capacity by creating a sustainable electronic database module and leading the use of Power BI to track and maintain the standard (**Appendix C6**). All EHSs are required to obtain their Registered Environmental Health Specialist credentialing within two years of hire and maintain their credentialing by obtaining fifteen hours of continuing education annually, far exceeding the expectations in the standards.

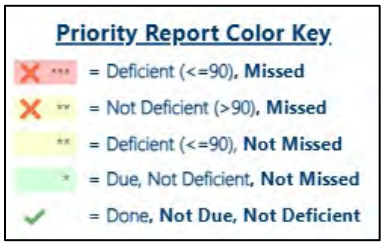
Mecklenburg County's leadership in Environmental Health training extends well beyond its borders. As one of the state's earliest training sites following the 1964 Manual for Sanitarians Orientation Course (**Appendix C7**), the County helped shape the model that evolved into today's Centralized Intern Training (CIT) program. For decades, MCEH has continued to influence training statewide by strengthening consistency, supporting peer jurisdictions, and contributing to the overall quality of Environmental Health practice across North Carolina

Part II: Baseline and Program Assessment

Hazard Analysis Critical Control Point (HACCP) Principles

MCEH applies HACCP principles as the foundation of its regulatory approach, focusing inspections on key risk factors, verifying compliance, and driving immediate and long-term correction through active managerial control. These principles are embedded throughout the program, from plan review to risk categorization, inspection prioritization, and enforcement, ensuring decisions target the points where foodborne illness risks are greatest. For MCEH, the HACCP framework begins at the design stage, where MCEH's Plan Review and Permitting program evaluates all new and remodeled establishments through a coordinated review with environmental health, building, fire, and zoning. In-field plan review, construction finals, and permitting confirm that the facility built matches the approved design. Plan review and permitting staff maintain consistency by conducting inspections and participating in standardization.

Facilities are separated into categories based on risk evaluation, following guidelines set by the FDA. Risk I facilities typically handle only multi-use utensils and receive one inspection per fiscal year. Risk II facilities have minimal food preparation, cool up to 2 items, and receive two inspections per fiscal year. Risk III facilities prepare raw animal foods, cool up to 3 items, and receive 3 inspections per fiscal year. Risk IV facilities have significant food preparation, cool an unlimited number of foods, and receive 3 inspections per fiscal year, as well as an educational visit (**Appendix D1**). The educational visit is an opportunity for collaboration with the facility to enhance their Food Safety Management System (FSMS) while conducting a long-term compliance visit for risk factor violations. A HACCP verification is also completed for those facilities with active HACCP plans.



Custom Data Processing (CDP) is used to input and store inspection data. The EH Data Analyst developed a BI dashboard (**Appendix D2**) tailored to each geographically assigned territory and EHS. In addition to the risk category, facilities are assigned a priority value based on the inspection history and the length of time since the last routine inspection. If the facility has scored an average of 90 or less in the past 2 years, or was missed in the previous grading period, it carries a higher priority for the EHS to visit first.

The NC food inspection form uses In, Out, NA, and NO markings to clearly signal when corrective actions are needed (**Appendix D3**). Marking instructions (**Appendix D4)** and the Compliance and Enforcement Action Manual (**Appendix D5**) guide EHSs in determining the appropriate response. Violations are corrected during the inspection, whenever possible. When correction cannot be achieved, points are assessed, and a verification visit is required. Verification visits occur within 3 days for priority violations and within 10 days for priority foundation violations. Facilities that do not achieve long-term compliance may complete a risk control plan. Continued out-of-compliance risk factors or imminent hazards result in additional permit action up to permit revocation.

MCEH chartered a local Specialized Process Committee (SPC) in 2023 (**Appendix D6**). The SPC validates HACCP plans that do not require a variance and reviews variance requests before they are submitted to the State Variance Committee (SVC). This distinction ensures that routine HACCP processes receive local oversight while the state retains authority over variances. MCEH also holds a seat on the SVC, which is essential given the number of new and unique processes first encountered in the county. SPC also provides specialized process training for EHSs and has developed resources (**Appendix D7**) to support the identification, verification, and education of specialized processes. Since its inception, SPC has reviewed plans for twelve facilities and continues to support verification of approximately 100 active HACCP plans. This sustained, integrated HACCP approach has been validated through the last two self-assessments in which MCEH fully met Standard 3.

Part II: Baseline and Program Assessment

Uniform Quality Assurance

MCEH conducts over 14,000 inspections and educational visits at food establishments with a team of 71 EHSs. Ensuring that regulatory requirements, program policies, and enforcement procedures are applied uniformly across this scale requires a deliberate, structured QA system. MCEH's QA program reinforces statewide standards, strengthens regulatory judgment, and supports a culture of accuracy, accountability, and continuous improvement.

MCEH's QA policy (**Appendix E1**) outlines a structured field and file review process that evaluates both staff performance and regulatory interpretation. Field evaluations assess an EHS's ability to apply laws and rules, use a risk-based inspection methodology, verify the correction of out-of-control risk factors, correctly use inspection equipment, and evaluate good retail practices. File reviews ensure that inspection reports are complete, accurate, and consistent with NCDHHS marking instructions, and have accurate temperature documentation, proper code citations, and clear comments. Current inspection reports are compared with previous inspections to confirm that improvements are documented or, when needed, that point escalation or further enforcement action has been implemented. This combined review approach ensures that regulatory decisions remain consistent and aligned with statewide expectations.

Because MCEH operates a specialized program, including dedicated plan review and permitting staff and senior EHSs who conduct construction finals, the department extends QA beyond inspections to ensure uniformity across all regulatory functions. Plan review and construction final QA are documented using MCEH-developed tools (**Appendix E2**). Although not required by state standards, MCEH includes these components intentionally to ensure that every part of the retail food program meets the same high expectations for accuracy and consistency.



Since NCDHHS requires the use of its standardized QA form, MCEH avoided creating a duplicative system to meet the 20 quality elements outlined in Standard 4. Instead, MCEH developed a detailed crosswalk (**Appendix E3**) aligning state QA requirements with the national standard. This crosswalk became the foundation for an Excel-based QA workbook now used by other jurisdictions, supporting broader statewide consistency. MCEH further advanced this work by creating a dashboard (**Appendix E4)** that displays compliance with the 20 quality elements, allowing supervisors and program leadership to identify areas needing attention. These tools reflect MCEH's commitment to statewide consistency and continuous improvement.

All QA activities are documented using standardized tools maintained in CDP, allowing supervisors to track performance, identify trends, and ensure uniform application of marking instructions. This includes field QA (**Appendix E5**), file QA (**Appendix E6**), and marking instructions (**Appendix E7**). Staff must achieve a minimum score of 80% on both field and file reviews. If this threshold is not met, remediation is required per policy EHF-08. Although MCEH exceeds the standard requirements, the program does not yet meet Standard 4, due to staff still in training and the three QA requirements. Policy adjustments have been made that align with requirements so the program can meet standard 4 within the next year.

Through this structured, data-driven QA system, MCEH ensures that regulatory requirements and enforcement procedures are applied consistently across a large and diverse workforce, resulting in a uniform, dependable, and high-performing food protection program that strengthens confidence and clarity for both staff and industry partners.

Part II: Baseline and Program Assessment

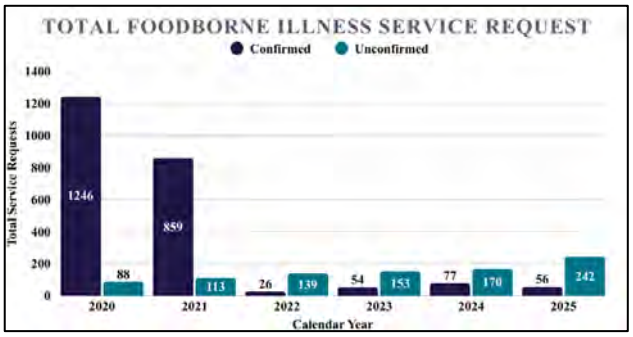
Foodborne Illness and Emergency Response

MCEH maintains a comprehensive, risk-based service request system that detects, collects, investigates, and responds to foodborne illness, food-related injury, intentional and unintentional contamination events, and other service requests (**Appendix F1**). The system is built on internal policy and strengthened through close coordination with various partners to ensure rapid, consistent, and well-informed action across all request types.

Complaints can be submitted online, by phone, email, in person, or through confirmed referrals from the MCHD Communicable Disease (CD) Program. All complaints are entered into CDP and assigned to the appropriate EHS. Every complaint requires an on-site visit with response times determined by policy EHF02 (**Appendix F2**). This type of response reflects MCEH's commitment to addressing all public concerns thoroughly and consistently. To support this level of responsiveness, MCEH and CD staff maintain 24/7 on-call coverage to ensure immediate response to outbreaks, high-risk situations, and time-sensitive public health threats (**Appendix F3**).

The request system is designed to capture all food-related concerns, from general complaints to suspected foodborne illness and intentional contamination. The type of complaint received determines the level of collaboration required. For example, in suspected or confirmed foodborne illnesses, MCEH works closely with CD and the state Emergency Preparedness and Outbreak Coordinator to ensure coordinated investigations and rapid community response. In situations involving suspected intentional contamination or tampering, MCEH collaborates with law enforcement and state partners to protect public health and guide appropriate investigations.

Over the past six years, MCEH has responded to 23,895 complaints in over 30 request types. This includes 2,318 confirmed illnesses and 905 unconfirmed illnesses (*Note: 2020–2021 reflects increased outreach during COVID-19*). Not all confirmed illnesses meet the definition of an outbreak. They may represent single cases, food worker illnesses, or other reportable concerns requiring follow-up by policy.



Staff competency is central to the system's effectiveness. All staff receive detailed information on expectations of foodborne illness investigations (**Appendix F4**), which can follow two pathways:

1. Risk Factor Focused: A comprehensive assessment of all five risk factors when the pathogen is unknown. EHF08 (**Appendix F5)** outlines the detailed expectations of staff to ensure the overall risk is addressed.
2. Pathogen of Concern Focused: Investigations target an evaluation of the risk factor or intervention most closely related to the pathogen of concern that has been identified through laboratory confirmation.



MCEH also assists with emergency response activities that impact food safety. During Hurricane Helene, MCEH partnered closely with NCDHHS to assess food establishments, mass feeding sites, and facilities affected by flooding and service disruptions. This boots-on-the-ground support demonstrated MCEH's ability to respond effectively to emergencies that pose food safety and environmental health risks.

MCEH is currently leading a statewide initiative to harmonize definitions, investigative tools, and guidance documents to improve consistency and quality of foodborne illness investigations across North Carolina. This work will support the development of an interactive Microsoft Business Intelligence (BI) dashboard to identify trends, guide proactive interventions, and enhance real-time oversight.

Part II: Baseline and Program Assessment

Compliance and Enforcement

MCEH's compliance and enforcement activities are designed to restore control of risk factors while supporting long-term active managerial control. Education is the foundation of every enforcement action. During inspections, EHSs work with operators to explain violations, identify root causes, and outline corrective actions. High-risk facilities also receive an annual educational visit to strengthen their FSMS. Public posting of inspection grades reinforces accountability and transparency.


SANITATION RATING

A 95

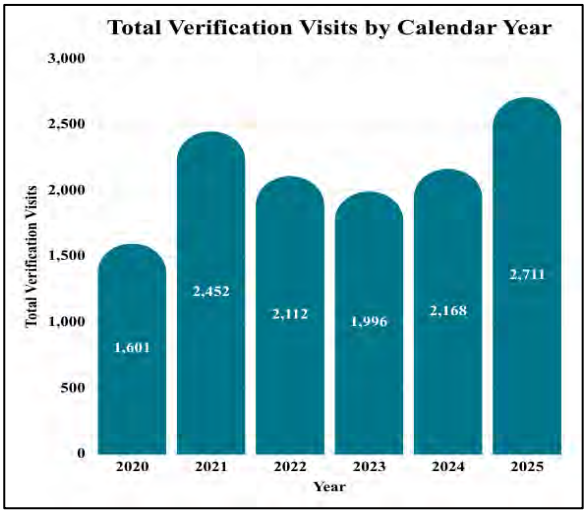
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was inspected on _____ *20___.*

North Carolina Department of Health and Human Services
Division of Public Health
Environmental Health Section

By
Registered Environmental Health Specialist

When violations pose a public health risk or remain uncorrected, MCEH applies a structured, progressive enforcement framework outlined in policy EHF-06 (**Appendix G1**). As part of the NCRPSN, MCEH contributed to the 2025 update of the statewide Enforcement Actions Manual (**Appendix D5**), ensuring alignment with NCDHHS expectations and strengthening consistency across jurisdictions. Enforcement tools include verification visits, risk control plans, intent-to-suspend notices, immediate permit suspension, permit revocation, and product embargo.



Verification visits are the primary mechanism for ensuring rapid correction of out-of-control risk factors. EHSs return within three days for Priority (P) violations and within ten days for Priority Foundation (Pf) violations. From 2021–2024, staff completed an average of 2,000 verification visits annually, increasing to more than 2,700 in 2025, demonstrating a strong commitment to timely follow-up.

For violations requiring sustained behavioral or procedural change, MCEH uses Risk Control Plans (**Appendix G2**), a collaborative, operator-driven strategy that reestablishes active managerial control. If compliance is not achieved, an Intent to Suspend provides a 30-day window before permit suspension. Immediate suspension is reserved for imminent health hazards such as sewage backups, lack of water, or unsafe food temperatures. In rare cases, immediate revocation may occur when conditions are severe, such as a score below 70 or destruction of the facility due to fire requiring a plan review process.

MCEH also complies with the state's food embargo process when adulterated or misbranded food is identified. EHSs first request voluntary disposal; if refused, they consult with the Local Health Director or Regional Environmental Health Specialist before issuing an embargo tag that detains the product until a court-ordered condemnation is obtained.

MCEH has not yet met Standard 6, as a file review using the updated Enforcement Actions Manual has not been completed. Recent policy updates and improvements to the file review system will support completion of this requirement in the next audit cycle. Through consistent inspections, education, transparent grading, and decisive enforcement, MCEH ensures timely correction of violations and sustained control of risk factors, strengthening accountability and reducing foodborne illness risk in Mecklenburg County.

Part II: Baseline and Program Assessment

Communication: Industry and Community Relations

MCEH has created long-standing, collaborative relationships with industry, government, and community partners. These partnerships allow staff to support safe facility design, guide operators through complex processes, and ensure consistent food safety practices across a rapidly growing and diverse county. Through proactive engagement, technical expertise, and shared problem-solving, MCEH has become a trusted resource for operators, event organizers, and regulatory partners at the local, state, and national levels.

A core component of this work is MCEH's commitment to accessible food safety training. Staff deliver training directly within the geographic areas they serve, reducing barriers and ensuring operators receive support where it is most needed. Sessions are tailored to the needs of each community, including dedicated training for Spanish-speaking operators. Instruction blends presentation-style learning with hands-on activities that reinforce key food safety practices and strengthen active managerial control. This localized approach builds trust, improves compliance, and ensures operators have practical tools to protect public health (**Appendix H1**).





Charlotte International Airport is the sixth-largest airport, accommodating 54 million passengers.

MCEH has also established strong relationships with architects, designers, engineers, code enforcement officials, and owners. During plan reviews and final site surveys, staff collaborate with partners to ensure facilities are designed and equipped to safely execute their proposed menus. Due to Mecklenburg County's size, population, and extensive plan review volume from 2021 to 2025, MCEH was invited to participate in the redesign of the national FD207 Plan Review at Food Establishments Course with FDA, NEHA, and other jurisdictions (**Appendix H2**).

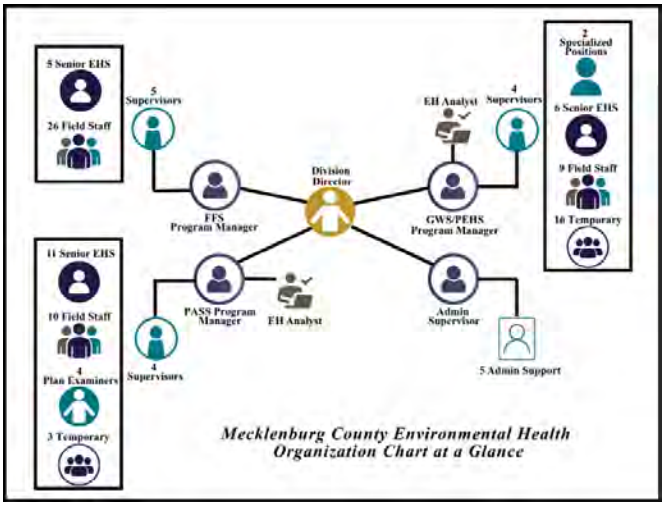
Mecklenburg County's unique landscape further highlights the importance of strong communication and information exchange. The county is home to an international airport with more than 50 dining options, major universities, and two of the state's largest hospitals, each serving populations with distinct food safety needs. Professional sports venues for the Carolina Panthers, Charlotte Hornets, and Charlotte FC, along with the U.S. National Whitewater Center and PGA tournaments, bring thousands of visitors into high-volume, fast-paced food environments (**Appendix H3**). These settings require clear, consistent communication between regulators and operators to ensure safe food handling across diverse service models.

MCEH collaborates closely with federal, state, and local partners through the North Carolina Food Safety and Defense Task Force and the Food Safety Advisory Council. These relationships support clear communication on emerging risks and regulatory expectations and strengthen coordination with national chains and corporate food safety teams. This collaboration ensures operators receive consistent guidance across locations and helps maintain strong, uniform food safety practices.

Consumer-facing communication is equally essential. MCEH provides transparent, accessible information through prominently displayed sanitation grade cards, full inspection reports available online and through Yelp, and multilingual educational materials. These tools empower residents and visitors to make informed choices and reinforce confidence in Mecklenburg County's food protection program. Through this coordinated approach, MCEH fully meets Standard 7 (**Appendix H4)** and continues to strengthen public trust in the county's food protection program.

PART II: Baseline and Program Assessment

Program Support and Resources



MCEH food safety programs, FFS and PASS, are supported by a highly skilled workforce that consists of 2 Environmental Health Managers, 1 Environmental Health Analyst, 9 Environmental Health Supervisors, 19 Senior Environmental Health Specialists, 4 Plans Examiners, and 36 Environmental Health Specialists (**Appendix I1)**. This structure provides the depth and expertise needed to manage a large and rapidly growing food service industry.

Management uses its vast experience in Environmental Health, data management, and budgetary matters to reduce foodborne illness risk factors and ensure food safety programs are funded at a level that allows completion of at least 90% of inspections each fiscal year, while always actively working towards 100% completion of all inspections. To justify staffing needs, MCEH uses Standard 8, which recommends an inspection range of 280–320 inspections per specialist. While the program does not yet fully meet Standard 8, MCEH actively works toward achieving it by presenting workload data to county leadership. Using data, the program can show that adding inspectors would help the county protect the public, complete more inspections, and secure additional state funds for each additional inspection.

Data management is a long-standing process at MCEH. Using this information, MCEH management, in collaboration with Mecklenburg County GIS, establishes territories for all fields of EHSs. Each territory is set to average 380 inspections per year (**Appendix I2)** and is monitored in our database to ensure the number of Risk 4 and Risk 3 food establishment inspections is similar across each employee territory to avoid staff burnout. Due to the volume of inspections in the county, Engineering Grid numbers are assigned to each establishment so that management and GIS can adjust territory assignments as the county continues to grow and more food service businesses open.

MCEH programs PASS and FFS support staff supply and equipment needs via a robust operating budget totaling $310,000 and grant funding $179,800 (NACCHO, AFDO, NEHA/FDA). These funds cover the cost of our inspection software, iPads, thermapens, Carbon Monoxide Detectors (for staff safety), slip-resistant shoes, flashlights, and other inspection supplies. The county further supports the program by providing a vehicle for every EHS and covering fuel costs that exceed the program budget. This fleet ensures rapid response to emergencies and enhances staff safety and visibility during inspections conducted outside standard business hours.



To reduce the need for verification visits for P and Pf violations and support active managerial control, MCEH uses operating funds to develop and distribute educational resources by providing videos, checklists, and training guides for food establishments in English and other languages. These resources are stored on the MCEH website, Food and Facilities Sanitation | Environmental Health. This public-facing webpage not only provides resources to establishments in Mecklenburg County, but also to public health departments across the region and nationwide.

PART II: Baseline and Program Assessment

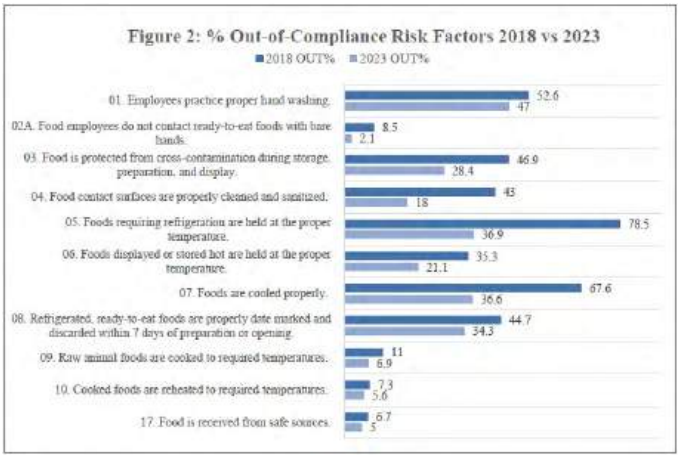
Program Assessment

MCEH enrolled in the Retail Program Standards in 2010 and was one of the leading jurisdictions in NC to support statewide Food Code adoption efforts by conducting a Risk Factor Study (RFS). The 2010 RFS provided a boots-on-the-ground perspective on the potential impacts of adoption for industry, consumers, and regulators. Because of the length of time between the first and second studies, along with significant updates to the study tools, the initial study remained a standalone assessment rather than part of a continuous trend analysis.

In 2018, MCEH launched its most recent risk factor study, evaluating 329 food establishments, using a 95% confidence level with a 10% margin of error. Establishments included long-term care facilities, schools, retail food operations, fast food and full-service restaurants, and the 11 hospitals in the county. The study assessed the baseline data items required to meet the standards, along with three additional questions, focused on handwashing facilities, consumer advisory, and time as a public health control. Data findings identified cold holding, cooling, handwashing, and datemarking as the top priority items. These results guided the development of targeted educational tools and interactive resources that support operators in addressing the most common risk factors out of compliance (**Appendix J1**). This included cold holding stickers that would provide a visual aid if ambient temperatures were above 41F, posters for cooling, and video training.

In 2023, MCEH conducted its second study with a renewed focus on ensuring the process was reproducible and sustainable for future studies (**Appendix J2)**. This study evaluated 357 establishments using the same confidence level, margin of error, and establishment types as the 2018 study. It assessed the same items as the previous study, with the addition of handwashing assessments, food safety management systems, and food allergy awareness. Through discussions with leadership, these additions were identified as key areas that would provide a broader understanding of current practices and help guide future program improvements. In this study, the intervention strategy implemented was the creation of a Food Safety Management System Tool similar to the FDA Employee Health tool (**Appendix J3**) to assist food establishments in the creation or enhancement of these systems.

Both studies were modeled in the same way by having highly qualified FDA Standardized Environmental Health Specialists, knowledgeable in risk-based inspections and staff training, as dedicated data collectors. Staff received specialized training from an FDA Retail Food Specialist in a classroom setting with a field component to ensure consistency among all staff. All-in-field data collection occurred within six months to ensure that calibration and expectations remain consistent across the board. In addition, during both studies, MCEH implemented dedicated quality assurance and data entry staff. The resources developed and enhanced during these studies were created and maintained in a way that could be replicated and used as a foundation for future studies.



These studies strengthened MCEH's ability to reduce foodborne illness by identifying the highest-risk behaviors and guiding targeted, evidence-based interventions. By using consistent methods and reproducible tools, the program can track progress over time and focus resources where they have the greatest impact on preventing illness in the community, solidifying MCEH's fulfillment of Standard 9 (**Appendix J4**).

Part III: Challenges, Objectives, Measurements, and Achievements

Challenge 1 – *Navigating the "Great Resignation"*

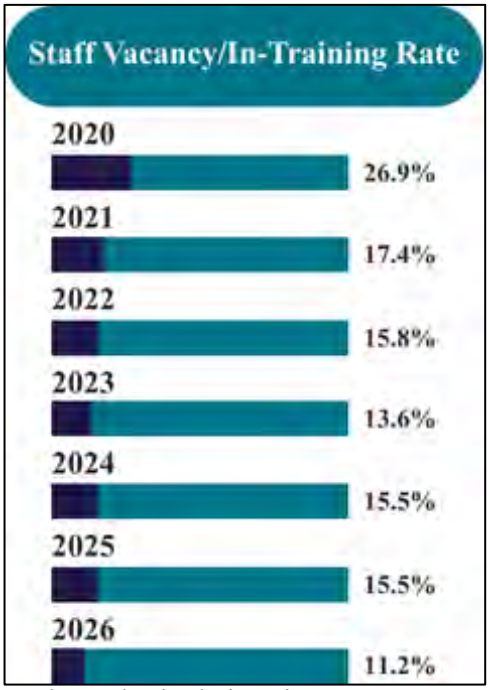


The Great Resignation was a significant economic trend that began in early 2021, during the COVID-19 pandemic, when US employees voluntarily left their jobs in record numbers. This was driven by employees' desire for higher wages, greater job security, and improved working conditions. This mass exodus heavily impacted sectors such as hospitality, healthcare, and education. In Mecklenburg County, however, workforce challenges emerged even earlier. At the start of 2020, MCEH's food safety programs faced 10 vacant positions, and 7 staff were still in training, leaving the division unable to complete more than 4,000 inspections that year.

County services, including in-person food safety inspections, paused in March and did not resume until May of 2020. MCEH used this pause to redesign interview practices, so the next generation of EHS hires and the entire workforce were fully informed and aligned with division goals. The programs began to seek candidates who were interested in food safety, with professional and skillful communication leading to successful independent employees and excellent team members. Identifying individuals who cared about protecting the public and enhancing food safety across the county was paramount and would be measured by a decrease in the vacancy rate.

MCEH moved away from only an application review and in-person or virtual interview to a 5-step process, which included behavioral interview questions without a ready-made answer. The process evolved to:

1. Application review included verifying the required college degree with 30 hours of science and experience working in the field of environmental health, food safety, or food service.
2. Email notification with detailed information about the job, character traits needed, and requesting a phone call to discuss the position. If a phone call or response was not received, then the candidate did not move forward.
3. Phone calls were conducted to discuss job expectations and why they were interested. Candidates who did not display a strong interest in public health did not advance.
4. When selected for an interview, a pre-interview assignment is provided to be returned before the interview, determining if instructions were followed in a timely manner.
5. Using the guidance presented in "Hiring for Attitude" by Mark Murphy, a new interview process was implemented. The new questions focused on what the candidate had done in the past versus a hypothetical situation.



The result of interview practices resulted in a decrease in the percentage of vacant positions and staff in training without individual outputs assisting in the programmatic goals from 26.9% in 2020 to 11.2% in 2026. Due to the decreased vacancy rate, MCEH completed 99% of the required 13,964 inspections in fiscal year 2025, the highest percentage since 2012.

Part III: Challenges, Objectives, Measurements, and Achievements

Challenge 2 – *Tracking Completion of Verification Visits for P and Pf violations.*

On October 1, 2021, NC adopted the 2017 NC Food Code, based on the 2017 FDA Food Code. The new code increased safety for food consumers in NC, but MCEH was not prepared for the impact of a new 3-day verification visit requirement by the code for priority violations. Additionally, the number of verification visits continued to increase each fiscal year as a result of the new Training Team in 2015, where staff received better training in food safety inspections.

NC has been completing 10-day verifications for P and Pf violations since 2012. Adding the required 3-day verification visits presented two challenges. MCEH was unable to calculate if verifications were completed on time and field staff didn't have a tool to plan their workday with complaint investigations, inspections, and verifications that were due.

Providing clear, easily viewable reports for all staff to view facilities due for verification and plan completion in accordance with new code requirements became a crucial objective. In 2022, MCEH began using BI as the previous software, Discoverer and Business Objects, did not have the coding ability to successfully track progress with verifications. The MCEH Environmental Analyst developed BI dashboards that displayed verification deadlines and additional parameters needed for daily planning.

This shift resulted in significant improvements to verification compliance. This was measured by adding a goal to achieve 90% of all verifications within the 3 to 10-day requirements in staff work plans. Staff having visibility into their own territory assignment data and not having to rely on spreadsheets from management drastically improved the completion rates. In fiscal year 2025, out of 2,711 verification visits required, 85% were completed within time parameters. MCEH continues to review the data received and improve the process. For example, it was determined that if a substitute inspector completed a verification in place of the routine inspector, the data wasn't recorded correctly. This error is currently being addressed with our software vendor, with changes being implemented in 2026.



Part III: Challenges, Objectives, Measurements, and Achievements

Challenge 3 – *Quality Assurance and Achieving Standard 4*

Quality assurance is a key component used by MCEH to ensure food service establishments are inspected by field staff with uniformity and to meet our goal of achieving standard 4. NC established statewide criteria for field and file reviews using MCEH's local quality assurance standards from the 2010s as the foundation. These official state forms, in Excel format, were implemented for use across NC for all counties, and MCEH adopted the official documents.

Several challenges related to this implementation prompted an objective for MCEH to customize the process to fit our programmatic needs. The state documents were designed for small counties, while MCEH has over 60 staff actively inspecting food service. In the effort to meet standard 4, MCEH lacked a method to evaluate the data captured in the Excel spreadsheets, and no connection within each QA occurrence existed to evaluate trends for staff.

To address these gaps, MCEH established two objectives, which included:

1. Creating an online version of the field and file review forms.
2. Creating a BI dashboard where the field and file review trends could be reviewed.

MCEH worked with CDP to transition the state's quality assurance forms into an electronic format. CDP quickly built a QA module now used by 15 counties across NC. With automated QA data available, MCEH began monitoring conformance with Standard 4 and generating trend reports for individual staff and teams. The MCEH Environmental Analyst began this process in 2022, and MCEH began reporting standard 4 status to the state in 2023.

The resulting BI dashboard now provides management with real-time access to quality assurance data. This data collection process was a success, and MCEH is now able to target training for all field staff and individual staff needs. Having this valuable information allows management to ensure staff use the training provided and demonstrate consistency when inspecting establishments. MCEH has received high approval ratings and comments on its annual customer service survey about the professionalism and consistency of its field staff. Although MCEH has not yet met, achieving Standard 4 is part of our 3-year goals in the 2025 Track 3 Maintenance & Advancement Base grant. To assist with this goal, minimum standards for field and file review scores were incorporated into staff work plans, and program management has begun the process of providing targeted refresher training to field staff at monthly team meetings.

Quality Element Compliance

	Q/E 1	Q/E 2	Q/E 3	Q/E 4	Q/E 5	Q/E 6	Q/E 7	Q/E 8	Q/E 9	Q/E 10	Q/E 11	Q/E 12	Q/E 13	Q/E 14	Q/E 15	Q/E 16	Q/E 17	Q/E 18	Q/E 19	Q/E 20
Compliance:	100 %	96 %	95 %	99 %	98 %	89 %	98 %	85 %	96 %	96 %	100 %	100 %	95 %	98 %	98 %	91 %	85 %	96 %	91 %	100 %
Missed:	0	3	4	1	2	9	2	12	3	3	0	0	4	2	2	7	12	3	7	0

Part IV: Program Longevity

The beauty of MCEH's path forward is that this career field is always evolving and navigating the space between entrepreneurial ventures and state and local laws. Regulating within these boundaries is never boring, and there is an element of anticipation and foresight that is needed within leadership roles of MCEH to plan for the unknown or the imminent. As subjective as that may be, there is a definite objectiveness to the work, and that lies in the foundation of consistent, detailed training year after year, internal collaboration between different work teams and quality assurance and adjustments, and the drive to 'make the program better'.

MCEH's immediate priorities include strengthening foodborne illness response in alignment with Standard 5 and improving recruitment and retention by advocating for competitive salaries that reflect the technical complexity and public health impact of the work. Surrounding counties currently offer comparable or higher starting wages, creating challenges in attracting and retaining qualified staff. While compensation decisions fall outside MCEH's authority, the program is actively engaged in advocacy efforts to address this barrier and ensure long-term workforce stability.

Advancing data-driven collaboration between Environmental Health and Communicable Disease is another key focus. Eliminating duplicative processes and integrating shared data systems will support more efficient investigations, clearer trend identification, and more targeted interventions. This approach aligns with the Retail Program Standards and strengthens the program's ability to prevent foodborne illness through timely, evidence-based action.

Looking ahead, MCEH remains committed to achieving all nine Retail Program Standards, retaining at least 80% of staff within the three-to-ten-year experience range, expanding recruitment partnerships with local universities, and increasing awareness of the program's value among county leadership and state policymakers. Environmental Health is foundational to a healthy community, yet its impact is often underrecognized. MCEH is actively working to elevate the visibility of its contributions and reinforce the essential role of environmental health in public safety.

The program's strength lies in its people, from highly tenured staff with decades of institutional knowledge to early-career professionals entering the field for the first time. It is a testament to the overarching vision of centric-focused public health. This culture blends passion for education and protection with the technical skill and professionalism required of modern environmental health practice. This remains a striving achievement and never something that is 'achieved', as this field evolves with technology, evidence-based science, and what is trending within the community. It can only be recognized as a milestone of where we have come from, and it also sets the trajectory for where MCEH is headed on the path forward. There will always be improvements to be made and changes to navigate. The driving force of MCEH is our people - their passion for the work, love for the community, and their unwavering commitment to excellence.



Part V: Contact Information and Permission

Contact Information:	Chrystal Swinger, MPH, REHS Environmental Health Director
Contributor:	Wendy Bell, MPH, REHS – Application Lead Food and Facilities and Planning and Support Services Management Team
Organization:	**Mecklenburg County Health Department** Environmental Health 3205 Freedom Drive, Suite 8000 Charlotte, NC 28208 United States
Phone Number:	704-351-9036
Email:	Chrystal.Swinger@mecklenburgcountync.gov
Website:	https://eh.mecknc.gov/
Permission:	Mecklenburg County Environmental Health grants the Foodservice Packing Institute permission to use this entry on its website at www.crumbineaward.com should it be selected as a winning entry.

Respectfully Submitted,

Chrystal Swinger

Chrystal Swinger, MPH, REHS
Environmental Health Director
Mecklenburg County Health Department

Testimonial Letters

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Testimonial Letters

Mecklenburg County Environmental Health extends its heartfelt appreciation to everyone who submitted a letter of testimony. Your voices, experiences, and support reflect the strong partnerships that make this work possible and highlight the shared commitment to protecting the health of our community.

Name	Partnership
Donna Wanucha	Local Citizen, Retired FDA Retail Food Specialist
Jeff Hawley	Local Citizen, Retired Industry Member, Harris Teeter
Vivian Zeng	Sudbury, MA – Mentorship Program
Melissa Ham	Retired NCDHHS Regional, NC Retail Program Standard Coordinator
Robert Brener	Johnson and Wales University
Wilson Mize	NC State of Practice – NC Training Board
Bob Kalish	Local Industry Partner, FS Food Group
Tom Ford	Chain Industry Partner, Compass Group
Hilary Waldroop	Chain Industry Partner, Publix
Jon Wheeler	State Regulatory Partner, South Carolina Department of Agriculture
Angela Pinyan	North Carolina Department of Health and Human Services, Regional
Josh Jordan	Local Regulatory Partner, Forsyth County
Lorne Cook	Local Regulatory Partner, Yadkin County
Patrick Granson	Mecklenburg County Code Enforcement
Tiffiney McKoy	Mecklenburg County Communicable Disease Program
Tristan Fulbright	Local Industry Partner, Trio Community Meals for Older Adults
Pam Harding	Local Industry Partner, Hawthrone's Pizza
Julie W. Austin	Local Industry Partner, Festival in the Park
Dave Matthews	Local Partner, Plan Review and Permitting, Level 2 Construction of NC
Mark Caudell	Local Partner, Plan Review and Permitting, Ferrara Buist
Tom McKernan	Local Non-Profit Partner, Stew of Sustainability

Donna M. Wanucha
207 S Madera Drive
Mocksville, NC 27028

March 1, 2026

Dear Crumbine Award Committee:

I am delighted to provide this letter of support for the Mecklenburg County Environmental Health Program to receive the Samuel J. Crumbine Consumer Protection Award. It is with no hesitation that I can state that the local retail food program in Mecklenburg County is the embodiment of what this prestigious award upholds and recognizes.

Although I am retired now, I worked with Mecklenburg County for over 20 years in my positions both as a regional food specialist with the North Carolina (NC) Division of Environmental Health and as a retail food specialist with the US Food & Drug Administration (FDA) Retail Food Protection Program. As the FDA retail food specialist assigned to NC, I worked closely with Mecklenburg County retail regulatory food program on their continual quality improvement program, The Voluntary National Retail Food Regulatory Program Standards (VNRFRS), two national special security events and their other special projects that served to protect the public health.

Mecklenburg County has constantly and consistently worked on training their large, ever-growing number of staff. They have also voluntarily shouldered training of staff from other NC counties in preparation for state authorization and FDA standardization. In their third self-assessment period of the VNRFPS, they now fully meet standard two (Trained Regulatory Staff), meaning that they continually audit and train resulting in a calibrated, well-trained and knowledgeable staff. They have completed two full risk factor in-field data collections that measure the occurrence of all five of the foodborne illness risk factors. Their ability to collect meaningful field study data reflects the quality and skill level of their staff and has indicated a reduction in the occurrence of the risk factors that contribute to foodborne illness.

Mecklenburg County has developed a robust and readily available library of food safety resources for industry to address each of the areas of concern for preventing foodborne illness. I have recommended their innovative training videos and factsheets that provide material in numerous languages to jurisdictions nationwide. FDA has also used their material to train food facilities in preparation for national special security events. They have created materials to support industry in creating their own food safety management systems to help them build in long term control of foodborne illness risk factors. This strategy is key to promote safe food preparation behaviors in food facilities not only for the short term but also for long term protection of public health.

Mecklenburg County nurtures beneficial and cooperative relationships with industry. One stellar example is their collaboration with Johnson and Wales University Culinary Program which has led to the use of their excellent kitchen facilities and sophisticated equipment for training staff on special food preparation processes such as sous vide and cook chill. This has not only enhanced the knowledge of the environmental health staff but has also helped to create a more conducive relationship with future chefs. Regular communication with industry is supported via routine meetings, face-to-face and on-line

trainings. This has resulted in a cooperative relationship with industry that has made food safety a common goal.

In 2019, I had the privilege of working with Mecklenburg County on an event that demonstrated their exemplary professionalism, dedication to the public health mission and willingness to collaborate with partners. I worked with them almost daily for over a year in preparation for the national special security event that was held in Charlotte in the summer of 2020. The food safety mission at this event was to ensure that no one eating food at the event or in support of the event would become ill from intentional and/or unintentional contamination. This involved continuous food preparation monitoring of food not only served to protectees and their guests but also the hundreds of law enforcement and other emergency responders supporting the event. Mecklenburg County and FDA agreed to partner and cover this mission through a unified command structure which blended staff from both agencies into critical command staff roles. All of the field monitoring was completed solely by Mecklenburg County staff. Even though the event occurred during the challenging times of the pandemic, the entire staff performed well above expectations to provide continuous food preparation monitoring during the event; train vendors and other food providers before the event; and covered food defense activities, all with the increased pressure of daily COVID testing requirements and wearing personal protection equipment. This important work resulted in no reported foodborne illnesses and negligible food safety risk factor concerns during the entire event. The industry partners involved in the event were very complimentary of the staff and appreciated their assistance in ensuring their food was prepared safely. As a result of this work, FDA recognized their dedication to the public health mission and professionalism by awarding individual leadership awards to Mecklenburg staff and the FDA Honor Award for Leveraging and Collaboration for the entire environmental health program.

Mecklenburg County is pivotal in building community, maintaining cooperative relationships and helping food programs both within NC and other jurisdictions nationwide via the NC Retail Food Program Standards Network and National Association of County and City Health Officials mentorship program. They helped to build the NC network from its inception and continue to sustain it through committing to core leadership roles and engagement. They freely share, partner and mentor jurisdictions throughout the country. All with the generous goal of assisting others on the same path of preventing foodborne illness.

I can attest through my many years of interaction with Mecklenburg County that they rise to the high level of distinction and are the ideal model program for which the Samuel J. Crumbine Consumer Protection Award was created. I highly recommend that they receive this esteemed award.

Very kind regards,



Donna Wanucha, REHS
FDA Retail Food Specialist (retired)
dmwanucha@gmail.com

March 2, 2026

To Whom it May Concern:

My name is Jeff Hawley. I was the Food Safety Manager at Harris Teeter Supermarkets for almost 28 years prior to retiring in December 2022. I am writing this letter in support of Mecklenburg County (NC) Environmental Health's regulatory food program for the Crumbine Consumer Protection Award.

Harris Teeter is based in Mecklenburg County so I had numerous opportunities to interact with members of the regulatory food program throughout my career. These encounters included discussing inspection findings of our supermarkets, plan reviews, training sessions, seeking guidance and interpretation on regulatory issues, and exchanging information on various issues.

The members of the food program were always available and willing to assist. They were well-trained and knowledgeable in their roles, and worked with food establishment managers to help resolve issues or improve operations. Their priority was to protect public health, but they also wanted to support the establishments within their jurisdiction to help them be successful.

The staff at Mecklenburg County were a valuable resource for me while at Harris Teeter. We had approximately 45 supermarkets in the county, offering a variety of amenities and services. These included the standard meat, deli and produce departments, but some stores also had chef programs, catering, aged beef, wine/beer bars, sushi, coffee bars, special event stations, cold food self-service bars and hot food self-service bars. The Mecklenburg County food program staff provided information, training and guidance for all of these activities. They worked with me and our facility managers to help us serve safe food to our customers, and to help our stores operate better.

During my encounters with the food program staff there were occasionally times when I had questions about inspection findings or the interpretation/application of regulations. The inspector was always available and willing to discuss their findings, and we usually were able to resolve the issue. But there were a few times when it was necessary to involve the inspector's supervisor. Even on those occasions the supervisor would be open to discuss my concerns, answer my questions, and offer an explanation. We did not always agree, but we always were able to discuss in a professional manner and come to mutual resolution.

I had a good working relationship and partnership with the food program staff at Mecklenburg County. We respected each other and worked well together. We had effective communication and good collaboration.

I fully support Mecklenburg County Environmental Health's regulatory food program for the Crumbine Consumer Protection Award. This is a prestigious award in food safety, and I believe this program is well-deserving of this honor.

Best regards,

Jeff Hawley
Food Safety Manager (Retired)
Harris Teeter Supermarkets

Town of Sudbury

Board of Health

Sudbury Health Department
275 Old Lancaster Road
Sudbury, MA 01776
978-440-5479
Health@sudbury.ma.us

Date: February 17, 2026
Re: Crumbine Award Testimonial Letter
To the National Association of County and City Health Officials Crumbine Award Review Committee:

I am pleased to offer this testimonial in strong support of Mecklenburg County Public Health Department for the prestigious Samuel J. Crumbine Consumer Protection Award for Excellence in Food Protection.

As a smaller local health department working to strengthen our retail food protection program through the U.S. Food and Drug Administration Retail Food Program Standards and FDA Retail Flexible Funding Model Grant Program, we sought mentorship from Mecklenburg County. Their team proved to be an exceptional mentor and partner. They were generous with their time, transparent in their processes, and deeply committed to advancing food safety excellence across state lines.

During our grant cycle, Mecklenburg County provided hands-on guidance as we developed and implemented our Comprehensive Self-Assessment and Strategic Improvement Plan (CSIP). Their practical tools, templates, and candid insights into lessons learned allowed us to move from theory to implementation with clarity and confidence. They walked us through the structure and documentation expectations for Standard 1 (Regulatory Foundation) and Standard 7 (Industry and Community Relations), helping us interpret requirements, strengthen policies, and build sustainable systems rather than short-term fixes.

What distinguishes Mecklenburg County is not only their technical expertise, but their culture of mentorship. They approached our partnership with humility and a genuine desire to elevate the field as a whole. Their willingness to share protocols, inspection frameworks, training approaches, and stakeholder engagement strategies directly strengthened our program capacity and accelerated our progress toward conformance with the Standards.

Even now, although we are no longer formally connected through the FDA Retail Food Grant, we continue to maintain a strong and active relationship. Our communication remains consistent and collaborative, they continue to offer thoughtful guidance and feedback. I feel as though I can pick up the phone and call them anytime. Our relationship has transcended the grant itself and evolved into a meaningful, reliable, and enduring partnership grounded in mutual respect and shared commitment to public health.

The spirit of the Crumbine Award reflects leadership, innovation, and measurable impact in food protection. Mecklenburg County exemplifies these qualities, not only within their own jurisdiction, but through their investment in other health departments striving for excellence.

I offer my strongest endorsement of Mecklenburg County Public Health for the NACCHO Crumbine Award. Their leadership in retail food protection and their commitment to mentorship embody the very best of our profession.

Respectfully,



Vivian Zeng, MPH, REHS/RS, CP-FS, CHO
Director of Health and Community Services
Town of Sudbury

NORTH CAROLINA RETAIL PROGRAM STANDARDS NETWORK

February 20, 2026

Dear Samuel J. Crumbine Award Committee:

It is with great enthusiasm and deep professional respect that, on behalf of the North Carolina Retail Program Standards (NCRPS) Network, I recommend Mecklenburg County Environmental Health's Retail Food Protection Program for the prestigious Samuel J. Crumbine Consumer Protection Award.

I have had the privilege of working alongside this program throughout my 37-year career in Environmental Health. As the Coordinator of the NCRPS Network, I can state without hesitation that Mecklenburg County has been present and active in retail food regulatory advancement for North Carolina. While many of today's Environmental Health Specialists may not know the history behind our state's progress, I do. I have witnessed Mecklenburg's leadership, partnership, and tireless commitment to strengthening food safety systems that benefit every jurisdiction and every citizen in our state.

Enrolling in 2010, Mecklenburg helped build statewide momentum for meaningful improvement. As one of only a few jurisdictions conducting the initial Risk Factor Studies, Mecklenburg provided critical data to North Carolina's Rules Review Committee. Representing approximately 20% of the state's retail food inventory, the data was credible, influential, and instrumental in modernizing North Carolina's outdated regulatory foundation.

Mecklenburg staff served on committees of rule-writing, fiscal note, training, and inspection report that shaped the adoption of North Carolina's science-based Food Code. North Carolina's first modern food code was implemented September 1, 2012. Just three days later, the county successfully supported FDA in a Special Event Food Defense Assignment during the 2012 Democratic National Convention. The regulatory framework they helped establish continues to provide measurable impact today. Currently, 33 jurisdictions within the NCRPS Network meet or have met Standard 1: Regulatory Foundation—an achievement rooted in the foundational work Mecklenburg championed.

Transparency and continuous improvement define this program. When the retail food community asked for greater inspection consistency, Mecklenburg did more than respond—they innovated. They developed Training 1.0 and 2.0, creating a universal, structured training system that exceeds state requirements and builds inspector confidence in an evolving food landscape. Their commitment to maintaining no more than three degrees of separation from an FDA Retail Food Specialist ensures alignment with current science and national best practices.

Equally impressive is their integration of quality assurance into workforce development. Mecklenburg developed a live performance dashboard to monitor standardization progress, identify program strengths and gaps, and tailor training accordingly. They understand that credentials alone are insufficient; implementation, calibration, and sustained excellence are what protect public health. This culture of mentorship extends beyond county borders. I personally benefited from Mecklenburg's guidance during my tenure in Wake County. Their step-by-step approach to standardization includes: policy sharing, and sustainability planning. This partnership enabled Wake County to achieve a highly trained staff and meet Standard 2. Their influence is embedded throughout the NCRPS Network, including enhancements to database systems that track pre and post curriculum training, continuing education credits, and maintenance of standardization. This system supports long-term program sustainability.

Mecklenburg's leadership was also pivotal in securing North Carolina's 2025 Retail Flexible Funding Model Capacity Building Grant. What distinguishes them is their selflessness—improvements are never pursued in isolation. Instead, they tailor initiatives to elevate the entire Network.

Most recently, Mecklenburg has led statewide efforts to strengthen foodborne illness response. Recognizing inconsistencies in complaint intake and environmental assessment practices, they partnered with the NCRPS Network to conduct a statewide gap analysis. The findings prompted the development of a universal complaint intake form, standardized investigative tools, and associated training. For the first time, North Carolina will have consistent intake data, improved automation, and enhanced capacity for trend analysis. This initiative supports jurisdictions in meeting Standard 5 and significantly strengthens public health preparedness statewide.

The examples shared here represent only a fraction of Mecklenburg County Environmental Health's impact. For decades, this program has demonstrated visionary leadership, unwavering commitment to science-based regulation, dedication to workforce excellence, and an enduring spirit of collaboration. Their influence reaches far beyond county lines—it shapes the strength and credibility of retail food protection across North Carolina.

Mecklenburg County Environmental Health exemplifies the principles of the Crumbine Award: excellence, innovation, partnership, and measurable public health impact. They are exceptionally deserving of recognition as a 2026 Crumbine Award recipient.

Sincerely,



Melissa G. Ham, REHS
North Carolina Retail Program Standards Network Coordinator

February 11. 2026

It has been a privilege to collaborate with the Mecklenburg County Environmental Health Department through their extensive professional development work at Johnson & Wales University. Their participation in advanced workshops focused on modern culinary techniques reflects a forward-thinking and highly innovative approach to food protection. Rather than relying solely on traditional regulatory models, the department has proactively sought to understand emerging food trends, technologies, and preparation methods to better anticipate and mitigate food safety risks.

This initiative directly supports the reduction and prevention of foodborne illness by equipping regulators with practical, science-based knowledge that can be applied in real-world foodservice operations. By learning alongside culinary professionals, Environmental Health Specialists gain deeper insight into contemporary kitchen practices — from reduced-oxygen packaging and sous vide to fermentation and other evolving techniques — allowing them to provide informed guidance that strengthens compliance and risk reduction strategies.

Equally important, this program has elevated the role of food protection at the local level. The collaboration between chefs and regulators has fostered a culture of shared responsibility, mutual respect, and open dialogue. Restaurants throughout Mecklenburg County have responded with overwhelmingly positive feedback, noting improved communication, clearer expectations, and greater confidence in implementing safe practices.

The department's model serves as a replicable "best practice" for other jurisdictions seeking to modernize their food protection programs. By investing in education, embracing innovation, and building strong industry partnerships, Mecklenburg County Environmental Health has demonstrated how regulatory agencies can both protect public health and stimulate public interest in foodservice sanitation.

Their commitment to innovation, prevention, and community engagement makes them exceptionally deserving of national recognition.

Sincerely,

Robert Brener, MAFS

Associate Professor

Johnson & Wales University

Charlotte, NC

NORTH CAROLINA ENVIRONMENTAL HEALTH STATE-OF-PRACTICE COMMITTEE

P.O. Box 489
Efland, NC 27243
www.ncehsop.org

Wilson Mize, REHS
Chairman

Andrew Blethen, REHS
Vice-Chairman

Marie Cain, REHS
Treasurer

Terri Ritter, REHS, LSS
Secretary

To the Crumbine Award Jury,

On behalf of the North Carolina Environmental Health State of Practice (NCEHSOP), I am pleased to offer our strongest support for Mecklenburg County Environmental Health's regulatory food protection program in its application for the prestigious Crumbine Consumer Protection Award.

Over the past several years, Mecklenburg County has demonstrated sustained excellence in food safety that rises to the level of true distinction. Their program reflects not only regulatory compliance, but a proactive, prevention-focused culture that prioritizes public health outcomes, professional development, and meaningful engagement with industry partners. Their consistency, leadership, and commitment to quality improvement have set a standard for food protection programs across North Carolina.

One of the most notable strengths of Mecklenburg County Environmental Health is its investment in training and education. Their staff are exceptionally well-trained, knowledgeable, and professional. The county places a strong emphasis on continuous professional development, ensuring that environmental health specialists remain current with FDA Food Code updates, emerging risk factors, and evolving best practices in food safety. Beyond internal training, they actively contribute to statewide education efforts, frequently sharing resources, tools, and lessons learned with other counties. Their robust library of guidance documents, training materials, and reference resources supports both staff and regulated establishments, promoting consistency and clarity in regulatory interpretation.

Mecklenburg County has also demonstrated innovation in identifying and reducing foodborne illness risk factors. Their program integrates data-driven inspection strategies, targeted education on high-risk processes, and strong risk communication practices. Rather than relying solely on enforcement, they emphasize prevention through education while helping operators understand not just what the rules are, but why they matter. This approach has strengthened industry compliance and reinforced a shared commitment to public health protection.

Equally impressive is their dedication to partnership and customer service. Mecklenburg County's staff are known for their professionalism, approachability, and willingness to collaborate. They consistently seek opportunities to work alongside operators, industry representatives, and community stakeholders to achieve common goals. Their interactions reflect a balance of

regulatory authority and supportive guidance, fostering trust while maintaining high standards. In our interactions, they have exemplified collaborative problem-solving and responsiveness of the highest caliber.

From a statewide perspective, Mecklenburg County has been a leader in advancing food safety initiatives and supporting peer counties. Their willingness to share best practices, mentor emerging professionals, and engage in statewide training opportunities through NCEHSOP reflects their broader commitment to strengthening environmental health across North Carolina.

The Crumbine Award honors programs that pursue internal development, achieve measurable public health impact, and foster positive customer interactions and partnerships. Mecklenburg County Environmental Health embodies all of these principles. Their sustained excellence, innovative practices, and collaborative spirit have made a significant and lasting contribution to protecting the citizens and patrons of food service establishments in their community.

For these reasons, NCEHSOP strongly and enthusiastically recommends Mecklenburg County Environmental Health's regulatory food protection program for the Crumbine Consumer Protection Award. They are truly deserving of this national recognition.

Respectfully submitted,



Wilson Mize
NCEHSOP Chair

Crumbine Consumer Protection Award Selection Committee
National Association of County and City Health Officials

Dear Members of the Selection Committee,

As a corporate executive chef based in Mecklenburg County — and having previously led multi-unit culinary operations across the country — I am proud to offer my strongest support for Mecklenburg County Environmental Health's Regulatory Food Protection Program in its pursuit of the Samuel J. Crumbine Consumer Protection Award.

I have worked with Mecklenburg County Environmental Health for more than 30 years. Over three decades — through restaurant openings, renovations, concept expansions, regulatory updates, and evolving Food Code standards — I have seen this department continually raise the bar. Sustained excellence of this caliber reflects strong leadership, internal development, and an unwavering commitment to public health.

In our profession, excellence is built on discipline, standards, training, and accountability. Having worked with health departments in major markets nationwide, I can say without hesitation that Mecklenburg County operates at a level of true regulatory distinction.

Their inspectors are knowledgeable, composed, and deeply grounded in the Food Code. Just as importantly, they understand the operational realities of professional kitchens — from high-volume production environments to complex culinary processes. They bring technical precision and practical insight, which earns the respect of chefs and operators alike.

What sets this program apart is consistency. Across inspectors and facilities, standards are applied fairly and uniformly. Over 30 years of interaction, I have observed clear calibration and alignment within the department — strong evidence of internal quality systems, ongoing staff training, and effective leadership oversight. Consistency builds trust, and trust strengthens compliance.

One of the most valuable components of their program is the annual educational visit. These visits are not enforcement-driven; they are proactive, collaborative opportunities focused on prevention and continuous improvement. During these engagements, inspectors review emerging risk factors, clarify regulatory updates, and provide tailored guidance specific to our operations. For my teams, these visits serve as a professional reset — reinforcing core food safety principles, strengthening active managerial control systems, and identifying opportunities for refinement before issues arise.

The educational visits foster a culture of shared responsibility. They encourage open dialogue, elevate staff knowledge at all levels, and ultimately reduce risk factors associated with foodborne illness. From a corporate leadership perspective, this proactive model is invaluable. It strengthens compliance, reduces repeat violations, and builds long-term operational resilience.

Beyond inspections and education, Mecklenburg County Environmental Health maintains a robust library of guidance materials and practical resources that support sustainable food safety systems. They do not simply identify risk — they help us understand it, manage it, and prevent it.

Having worked nationally, I have experienced jurisdictions where regulatory engagement can feel inconsistent or adversarial. Mecklenburg County stands apart. Their professionalism, transparency, responsiveness, and commitment to partnership foster collaboration without ever compromising public health standards.

Food safety is foundational to our craft. Every plate served carries an implicit promise of safety. For more than three decades, Mecklenburg County Environmental Health has demonstrated disciplined

oversight, continuous internal improvement, meaningful industry engagement, and measurable impact on consumer protection.

The Samuel J. Crumbine Consumer Protection Award recognizes programs that pursue excellence to a level of distinction. Based on my 30 years of direct experience working with this department — and my broader national perspective — I firmly believe Mecklenburg County Environmental Health exemplifies that standard.

I am proud to support their nomination and commend their team for their sustained leadership in safeguarding public health.

Respectfully,



Robert Kalish
Corporate Executive Chef
FS Food Group
980-322-7620

Date: February 13, 2026

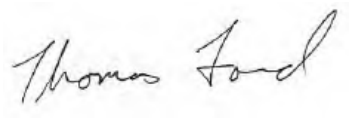
To: The Crumbine Award Jury

I am writing to offer my strong support for the Mecklenburg County Environmental Health regulatory food program in its nomination for the National Association of County and City Health Officials' prestigious Crumbine Consumer Protection Award.

I first began working with the Department in 1993, when I served as Director of Food Safety and Quality Assurance for Harris Teeter, headquartered in Mecklenburg County. Since then, I have continued to collaborate with the Department through my roles as Vice President of Food Safety at Steritech, Vice President of Food Safety at Ecolab, and now Vice President of Food Safety and Quality Assurance at Compass Group North America—also headquartered in Mecklenburg County. This more than 30-year professional relationship reflects the depth, consistency, and significance of my interactions with this team.

Throughout this time, I have consistently relied on and appreciated the Department's proactive approach to food safety, the expertise of its well-trained staff, and the extensive resources they provide to industry partners. Their collaborative mindset and solution-oriented support have been invaluable. Naturally, over three decades in retail grocery, restaurants, and large-scale foodservice, I have encountered numerous situations requiring reactive guidance—ranging from natural disasters and power outages to compromised water supplies, community outbreaks, and the unprecedented challenges of COVID-19. In each instance, the Mecklenburg County team has proven to be a dependable, knowledgeable, and highly effective partner in safeguarding public health.

Based on my long-standing experience, I sincerely believe that Mecklenburg County Environmental Health stands among the nation's best public health organizations. Their commitment to excellence, innovation, and consumer protection fully embodies the ideals this award represents. They are highly deserving of this esteemed recognition.



Tom Ford

Vice President Food Safety and Quality Assurance

Compass Group, North America

Thomas Ford
Vice President Food Safety and Quality Assurance
Compass Group
2400 Yorkmont Rd. | Charlotte, NC 28217 ❖ tom.ford@compass-usa.com | 704-328-3194

On behalf of Publix Super Markets, which currently operates 14 locations in Mecklenburg County, North Carolina, I am writing in support of Mecklenburg County Environmental Health's regulatory food program application for the Samuel J. Crumbine Consumer Protection Award. At Publix, we strive to foster strong relationships with the various agencies that oversee our stores, and we are grateful to have cultivated our connection with our food safety partners at Mecklenburg County.

In my six years as a Retail Food Safety Manager for Publix, I have had the opportunity to engage with the Mecklenburg County food protection team on several occasions. I have had inspectors allow me to join inspections, and I have met with several for new store permitting inspections. I appreciate these opportunities to learn what is expected in a new food service establishment and shadow inspectors' interactions with our store teams.

The Mecklenburg County food safety program holds their team and the retail food establishments in the county to a high standard. Their inspectors are thorough, both during the inspection process and explaining areas for improvement on their reports. Their team is dedicated to helping food establishments like ours meet and maintain the highest level of food safety. Their team's guidance is appreciated as we continue to grow in this market. In the rare situations when confusion arises during an inspection, I have reached out to the leadership team with questions, and I received meaningful feedback.

The leadership team has also assisted us with maintaining safe operations during unusual events, such as a loss of water. They have supported our alternative water procedures to allow us to continue to serve the community.

Overall, the Mecklenburg County regulatory food program is committed to protecting public health. We appreciate our food safety partnership, and I look forward to continuing to build our relationship with their team.

Hillary Waldroop, MPH, CP-FS
Food Safety Manager – Retail
Corporate Quality Assurance
Publix Super Markets, Inc.

South Carolina
DEPARTMENT OF AGRICULTURE
CONSUMER PROTECTION DIVISION | RETAIL FOOD SAFETY DEPARTMENT
Hugh E. Weathers, Commissioner

Wendy Bell
Environmental Health Supervisor
Mecklenburg County Public Health

February 23, 2026

Wendy,

It gives me great pleasure to recommend the Mecklenburg County Public Health (MCPH) for the Crumbine Award from NACCHO. During my 11-year tenure in the Retail Food Safety Program at the SC Department of Agriculture (formerly at the SC Department of Health and Environmental Control), I have come to value our partnership with MCPH. We have found their staff to be very helpful, knowledgeable and proactive in collaboration regarding retail food businesses crossing the state line into South Carolina. This collaboration makes our job so much easier in dealing with regulatory issues concerning mobile food and illegal food operations crossing state lines.

A collaboration in early 2025 between MCPH and our program at SCDA resulted in development and joint presentation of an introductory, full-day training for new retail food inspectors focused on identifying specialized retail processes during inspections. Processes covered included reduced oxygen packaging, acidification and fermentation. Class exercises included identifying potential special processes from menu review and photographs (with discussion of findings), developing food flows, and a mock HACCP verification audit. We have now presented this training three times including in-person, virtual, and hybrid formats, in partnership with two additional states and plans for further collaboration. This training has received excellent reviews from participants. We are profoundly grateful to MCPH and to Wendy Bell for the opportunity to collaborate in this innovative and effective training, and we look forward to future opportunities to collaborate in protecting food safety and public health.

I also must mention the active involvement of MCPH in the Conference for Food Protection (CFP), and the leadership role of Wendy Bell within that organization's committees. It is a distinct pleasure to collaborate with like-minded professionals to protect food safety and better our national retail food safety regulations.

I heartily recommend Mecklenburg County Public Health for the Crumbine Award.

Respectfully,

Jonathan Wheeler PCQI, CHM
Specialized Processes Supervisor
Retail Food Safety, SC Department of Agriculture

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

JOSH STEIN • Governor
DEVDUTTA SANGVAI • Secretary
KELLY KIMPLE • Director, Public Health

March 3, 2026

Samual J. Crumbine Consumer Protection Award Jury
c/o The National Association of County and City Health Officials
1201 Eye Street, NW, 4th Floor
Washington, DC 20005

Crumbine Award Jury
c/o National Association of County and City Health Officials

To the Esteemed Members of the Crumbine Award Jury:

I am honored to offer my strongest support for Mecklenburg County Environmental Health and its nomination for the Samuel J. Crumbine Award for Excellence in Food Protection. The department exemplifies the highest standards of public health leadership, innovation, and community service—qualities that align directly with the purpose and legacy of this distinguished award.

Mecklenburg County Environmental Health has consistently demonstrated a comprehensive, science-driven, and community-focused approach to food safety. Their program reflects a deep commitment to protecting public health through excellence, accountability, and meaningful collaboration.

Program Strengths and Contributions

- **A Comprehensive Training Program with a Dedicated Training Team —** One of the department's most exceptional strengths is its rigorous and well-structured training program, supported by a dedicated training team. This team provides new environmental health specialists with consistent, high-quality instruction, hands-on field experience, and ongoing professional development. As a result, every new specialist is fully prepared to be authorized by their regional specialist, ensuring they are confident, competent, and ready to conduct inspections independently. Once authorized, specialists advance into Training 2.0, where they sharpen their skills in the issuance of permits, enforcement actions, handling complaints, and managing temporary food events. All environmental health staff are also trained to recognize specialized processes that require a HACCP plan. The county has approximately 100 establishments with HACCP plans requiring annual verification. In addition, all staff are FDA standardized within 24 months of being hired, with most achieving standardization within just 18 months, demonstrating the department's commitment to maintaining the highest level of technical proficiency and consistency across the program.
- **Innovative and Data-Driven Food Safety Practices** — The department embraces modern tools, technology, and analytics to enhance inspection quality and improve transparency. They work closely with their third-party software provider to develop customized reports that identify trends,

gaps, and emerging issues across the food protection program. This collaborative, data-driven approach allows the department to proactively address risk factors, refine strategies, and continuously improve program performance.

- **Strong and Inclusive Community Partnerships** — Mecklenburg County Environmental Health has built trusted relationships with food service operators, schools, community organizations, regional partners, as well as federal partners. Many staff are actively involved with the Conference for Food Protection, serving in influential roles such as Executive Board member, Council II Chair, and participating in various committees. The department also works closely with state partners, including regular collaboration with their Environmental Health Regional Specialist on special projects, state interpretations, and program improvements. They further contribute to statewide leadership through representation on the North Carolina Variance Committee, where their vast knowledge of specialized processes and HACCP plan requirements strengthens statewide food safety decision-making. Additionally, the department's Retail Program Standards Coordinator stepped in to lead the North Carolina Retail Program Standards Group following the retirement of the FDA Retail Food Specialist. This individual was instrumental in securing the Retail Program Standards Network Coordinator Grant and played a key role in completely overhauling the North Carolina Compliance and Enforcement Manual, significantly improving consistency and clarity for regulators across the state.
- **Commitment to Equity and Accessibility** — The department's outreach efforts intentionally reach diverse communities, ensuring that food safety information and resources are accessible regardless of language, background, or socioeconomic status. Their website is filled with food safety materials, many of which are available in multiple languages, making critical information easier to understand and use for residents and food service operators across the county.
- **Demonstrated Public Health Impact** — Through consistent performance, measurable reductions in risk factors, and proactive responses to emerging challenges, the program has shown clear and sustained improvements in preventing foodborne illness.

Mecklenburg County Environmental Health stands as a model for how local health departments can elevate food protection programs through leadership, innovation, and a deep commitment to community well-being. Their robust training program, strong partnerships at the local, state, and national levels, data-driven approach, and dedication to equity make them exceptionally deserving of national recognition.

For these reasons, I wholeheartedly endorse Mecklenburg County Environmental Health for the Samuel J. Crumbine Award. Their dedication, professionalism, and sustained excellence embody the values this award seeks to honor.

Sincerely,



Angie Pinyan, REHS
Environmental Health Regional Specialist, West Team Leader
Vice Chair, NC Variance Committee

March 2, 2026

To whom it may concern,

I, on behalf of the Forsyth County's Food, Lodging, and Institutions Program, would like to offer my testimonial regarding the collaboration and partnership built with Mecklenburg County Environmental Health's Regulatory Food Program.

My name is Josh Jordan and I am the Forsyth County Food, Lodging, and Institutions Program Supervisor for the Forsyth County Department of Public Health in Winston-Salem, NC. Prior to my current position, I was the Environmental Health Supervisor for the Western Region of the State of North Carolina and was responsible for oversight and support of several county (local) regulatory food programs, including Mecklenburg County, for the Food Protection and Facilities Branch of the North Carolina Division of Public Health.

During my time in that role, I developed a working relationship with several members of the Mecklenburg County Environmental Health Regulatory Food Program, including managers, supervisors, senior-level trainers, and other Environmental Health Specialists. My primary job responsibilities included providing interpretations on food regulations and evaluating, through authorization and standardization, the knowledge and skills of Environmental Health Specialists to conduct sanitation inspections in food establishments. Through my time working with Mecklenburg County and based on high success rates, it became evident staff were well trained, supported, and given an abundance of resources. For instance, Mecklenburg County is one, if not the only, program that has a two tier training system where new hires start on one team, receive initial education and training towards authorization (NC requirement) and graduate to a second team where they learn to manage their territory and receive additional training towards standardization. Mecklenburg County's training model is ideal to optimize growth within the first two years and is something we, at Forsyth County, are using to justify plans to broaden our training model and team.

As manager of the food regulatory program in Forsyth County, I have connected numerous times with Mecklenburg County management and supervision to share information, materials, and ideas. For example, Mecklenburg County has a vast library of educational materials, in various languages, which they have shared graciously with Forsyth and other counties. These materials not only help counties save time and money to produce, but help community members across NC.

Additionally, Mecklenburg County employs individuals that hold high rankings within the Conference of Food Protection and committees that work directly with FDA Voluntary National Retail Food Program Standards. The positions reflect positively on NC and offer direct insights to upcoming changes to the FDA Food Code and Program Standards. We, at Forsyth County, often reach out to Mecklenburg County's Program Standards Coordinator to ask questions about different standards and collaborate with projects to

make our program stronger. Their input ensures success when completing self-assessments and verification audits. Furthermore, their leadership provides pathways for success in achieving goals.

Overall, Mecklenburg County's Environmental Health Regulatory Food Program is not only a leading program in North Carolina, but also in the United States. The work produced by the program directly helps multiple jurisdictions across NC, the Southeast U.S., and nationally. I believe they are a model candidate for this year's award.

Thank you for considering our testimonial and endorsement of Mecklenburg County's Regulatory Food Program for the 2026 Samuel J. Crumbine Consumer Protection Award. Please reach out if I can help provide any additional information to support the decision and selection of Mecklenburg County.

Respectively,



Josh Jordan, R.E.H.S
Environmental Health Supervisor II
Food, Lodging, and Institutions Program
Forsyth County Department of Public Health
Office: (336) 703-3140
JORDANJL@FORSYTH.CC

Crumbine Award Panel

My name is Alan "Lorne" Cook and I've been an active Registered Environmental Health Specialist in North Carolina for 26 years. My environmental health professional career began in the fall of 2000 and Mecklenburg County's Environmental Health Food Regulatory Department has been an active liaison for me from the very beginning. To note, I've never worked for Mecklenburg County's Food Regulatory Department but I've considered myself very fortunate to establish a great working relationship with their department. This career long professional relationship has enabled me to reach out as a peer for guidance, training and public health support throughout my career.

As mentioned, in the Fall of 2000, my professional career began in Iredell County as an Environmental Health Specialist. As an intern, I worked closely in Raleigh with other Centralized Training Interns from counties across North Carolina. I quickly realized, Mecklenburg County's Food Regulatory Interns had advanced initial training and job skills that other county interns did not possess or demonstrate. When the Raleigh based intern trainings were complete, cross training in departments other than your current county was required and I immediately requested permission to work with Mecklenburg County. Even after 26 years, I still recall and use those very first beginning skill sets I learned side by side Mecklenburg County's Food Regulatory Specialists in office and during field inspections. Such details included the dynamic cultural food diversity within Mecklenburg County and how food safety protocols were very fluid and unique for each situation. I was taught and trained this demonstrative knowledge based on "Real Industry Situations" just as their interns were being trained. These skills could be immediately transferred to field inspections and enabled myself and other Food Regulatory Specialists to be fully prepared and educated for diverse situations we would encounter.

Throughout my career, Mecklenburg County's Food Regulatory Program has continued to be a professional resource, active participant and host in professional group settings. These professional settings include providing training and educational hours for Registered Environmental Health Specialists and Food Regulatory Specialists throughout North Carolina. The department has been instrumental in the past and present working with state leaders to guide, direct and develop Environmental Health Food Regulatory Laws and Rules within the state. The department actively participates and involves themselves with national food regulatory agencies and stays abreast with new and upcoming food regulatory initiatives. While doing so, the department never defers from the active role of

communicating and demonstrating these acquired skills and directives to their current environmental health staff, food industry professionals and food regulatory specialists throughout the state when opportunities are available. One personal experience I have to support this statement was in the spring of 2025. As the Environmental Health Supervisor in Yadkin County, I received notice from Mecklenburg County's Food Regulatory Division that an ethnic food festival was scheduled to take place in Mecklenburg County. To my surprise, my very rural Yadkin County, that was 1 hour and 10 minutes away from Mecklenburg County, was inadvertently involved. Through great research and communication, Mecklenburg County's Food Regulatory Program communicated details obtained preparing for the festival, that needed immediate action by me. I was notified that a permitted food commissary in my county was going to allow an out of state mobile food unit to actively use their facility for food storage and preparations. The precise direct communication and networking between Mecklenburg's Food Regulatory Department to me and my department allowed this very diverse and unique situation to be successfully handled. Through the information provided, I and my Yadkin County Food Regulatory Specialist, intervened to stop the food regulatory violation and restrict the public health risk that may have occurred.

One other personal experience I had was when I left my Environmental Health County position and became an Environmental Science/Health teacher for 8 years. During this time, I closely monitored trainings that Mecklenburg County hosted and actively participated to maintain my Registered Environmental Health State and National Credentials. After 8 years of teaching, I chose to venture back into the Environmental Health field and accept the current role I'm in as the Yadkin County Environmental Health Supervisor. Even though I maintained my REHS License, the state Environmental Health rules required me to obtain all 8 of the Environmental Health Authorizations again. Without hesitation, I reached out to my professional colleagues within Mecklenburg County's Food Regulatory Program for my food authorization training and they didn't hesitate to help. Just like 26 years back, the professionalism and expertise exhibited to me during my training was unique to which only Mecklenburg could provide. I worked one on one with expertly trained staff in the field sharpening my old skills from the past and bringing me up to date with new laws and rules correlating to today's industry standards. One example unique to Mecklenburg County was the diverse situation of commissaries working as a large-scale operation for multiple mobile food units, food stands and caterers under one roof. When I first encountered this situation with the Regulatory Specialist, I requested a few minutes to get my head wrapped around all I was seeing. After that brief time period, I was intrigued and had numerous questions and scenario situations I needed answers to fully understand

the unique and diverse situation at hand. I was not surprised that all questions and scenarios I asked were answered precisely and with clear examples. This working knowledge provided me clear evidence that the Mecklenburg County Food Regulatory Program had successfully implemented and mastered this new and diverse concept that helped open up a new food industry pathway. While doing so, this new concept would require more in-depth food regulatory interaction between multiple permitted establishments under the commissary's permitted location. During my training, I was actively engaged in multiple scenarios like this and without question, the Mecklenburg County Food Regulatory Program left no stone unturned to protect the public health for this new and diverse food regulatory avenue. It also helped me bring back this diverse and unique skill set to my county's food regulatory division and provide guidance for partnering agencies within my county.

Overall my career, like most Environmental Health Specialists, has been very diverse with a lot of experiences I've actively been part of and learned from. I've been very fortunate to learn, share and teach the life experiences and skills I've acquired over my career to others when the opportunity presented itself. One common denominator with the skills I've gained and continue to gain, all lead me back to the Mecklenburg County's Food Regulatory Program. The past, present and future all entail experiences that have and will continue to sharpen skill sets for me, other food regulatory specialists and food service establishments alike.

Respectfully Submitted,

Alan "Lorne" Cook, REHS
Yadkin County Environmental Health Supervisor

MECKLENBURG COUNTY

Land Use & Environmental Services Agency

Code Enforcement

February 27th, 2026

To: Kimberly Scott, DrPH, MPH,

Mecklenburg County Public Health

Chrystal Swinger,

Director of Environmental Health | Public Health

From: Patrick G. Granson, MCP, CBO, LEED-AP

Mecklenburg County, Director of Code Enforcement

Reference: National Association of County and City Health Officials Crumbine Consumer Protection Award

Thank you for the opportunity to share feedback regarding my interactions with Mecklenburg County Environmental Health. I am pleased to offer my full support and recognition of the exceptional work your team consistently provides.

Throughout my experience working with your department, I have found your staff to be exceptionally well-trained, knowledgeable, and highly professional. Their ability to clearly interpret regulations, provide accurate guidance, and communicate expectations has been invaluable. It is evident that they are supported by a robust library of resources and ongoing training that equips them to address a wide range of environmental health questions with confidence and clarity.

Your team's helpfulness and commitment to collaboration across other departments, such as Code Enforcement and customer service, stand out as defining strengths. Whether navigating routine processes or working through more complex situations, like special events, the staff members have always approached interactions with patience, respect, and a true spirit of partnership. Their willingness to work alongside Code Enforcement, not just as regulators, but as supportive problem-solvers, has ensured positive outcomes time and again.

One experience that stands out is the PGA Golf Championship held in Charlotte. Environmental Health's involvement was instrumental in ensuring the event's success. From the early planning

stages through the final wrap-up, your team worked collaboratively with all vendors—participating in meetings, clarifying expectations, and outlining roles and responsibilities before, during, and after the tournament. Your proactive guidance and partnership contributed not only to a seamless experience for Mecklenburg County Health but to a highly successful event for the entire city of Charlotte.

In that situation, your staff demonstrated exceptional responsiveness, technical expertise, and a sincere commitment to finding a practical, compliant, and mutually beneficial solution. It reinforced the trust and confidence we have in your department's leadership and operations.

Mecklenburg County Environmental Health sets a high standard for public service. Your team's dedication, professionalism, and collaborative approach continue to make a meaningful difference.

Thank you for your outstanding leadership and for the continued support your department provides.

Sincerely,



Patrick G. Granson MCP, CBO, LEED-AP

MECKLENBURG COUNTY
North Carolina
Public Health

Mecklenburg County Public Health

Kimberly Scott, DrPH, MPH
Interim Health Director

February 26, 2026

Committee Members of the Crumbine Consumer Protection Award,

As a collaborative partner, I would like to commend Mecklenburg County Environmental Health team for their professionalism and expertise. The staff consistently demonstrate a high level of training and subject matter knowledge, which is evident in their thorough assessments, clear guidance, and adherence to regulatory standards.

In addition to their technical competence, the team is approachable and responsive. Their willingness to provide clarification, answer questions, and offer solutions greatly enhances our collaboration.

Mecklenburg County Environmental Health team's commitment to quality service and knowledgeable staff strengthens our shared public health mission. I highly value our partnership and appreciate their continued collaboration and support. It is with great confidence that I submit this recommendation in support of the Mecklenburg County Environmental Health Program for this award.

Sincerely,

Tiffiney McKoy, MSN, RN, CPHN
Nurse Supervisor
Communicable Disease

TRIO Community Meals
an elior company

TRIO Community Meals
Charlotte Commissary
4808 Chesapeake Dr. Charlotte NC, 28216
www.triocommunitymeals.com

To Whom it may Concern,

Through my 25+years of food service experience, I have not worked with staff of environmental service associates that have been more knowledgeable and supportive than the team at Mecklenburg County. They work diligently to ensure the safety and health of the members of the community. Putting not only inspections at the top of their list but training and support of those individuals who provide services to the public. Constant communication is sent via email from their team with reminders of seasonal changes and effects on food storage to the library of resources and handouts given during inspections.

In the midst of Covid our Kitchen was put on the market for sale by the owner. We were forced to move during the sale and had already been given lease options to return once it was complete. The Environmental Health team assisted with lists of potential kitchen address options that were vacant in the community and worked with us every step of the way including initial inspections to eliminate our down time. We never missed a day of service for our community, and it was the Environmental Health team's assistance that made that happen. Thank you,

Tristan Fulbright

Tristan Fulbright
Food Service Director
Trio Community Meals
Charlotte Commissary
Mobile: 980-721-8565
Tristan.fulbright@triocommunitymeals.com

February 16th, 2026

On behalf of the Mecklenburg County Health Department, I am writing to tell you about our company's experience over the last 20 years. Hawthorne's NY Pizza & Bar operates eight restaurants throughout Mecklenburg County. Each of the locations has successfully kept a 98.5% health score amongst all 8 locations with the assistance of the highly competent Public Health Inspectors and their management team.

Last year they held a several-day conference for staff members, we were able to send management as well as owners to learn key items that keep the public safe. They also had one day for our Hispanic employees, and it was very successful. Everyone came back with new knowledge and a better understanding of why it is necessary to keep cleanliness and safety in our kitchens.

Hawthorne's is proud to have the relationship we have with Mecklenburg County Public Health and appreciate all they do.

Sincerely,

Pam Harding

Quality Assurance Manager



February 11, 2026

To whom it may concern:

Working with Mecklenburg County Environmental Health is always a pleasure. Partnering with them over the years to coordinate food vendor permitting at our large events has become a partnership we value and look forward to each year. Our mutual aim of having a safe and successful event, and their eager drive for thorough and timely planning, makes permitting our food vendors as seamless as possible. Each time we work with them, we know the citizens of Charlotte will have safe food to eat.

With regards,

Julie W. Austin

Julie Whitney Austin

Executive Director

Festival in the Park

1409 East Boulevard Charlotte, NC 28203
P: 704.338.1060 | F: 704.338.1061
www.FESTIVALinthePARK.org

LEVEL 2 CONSTRUCTION OF NC, INC.
P. O. BOX 206
HARRISBURG, NC 28075

National Association of County and City Health Officials

In consideration of the Mecklenburg County Public Health
249 Billingsley Road
Charlotte, NC 28211

To Whom It May Concern:

I hope this message finds you well. I am writing to express my sincere appreciation for the support and assistance I received from the staff at Mecklenburg County Environmental Health during my interactions with them.

Navigating environmental health concerns can be a daunting task, but the professional guidance I experienced made a significant difference. A few examples; Matt Hood was very instrumental with the state franchise program, Mark Oliver rose to the occasion in helping with refrigeration issues at a particular restaurant being remodeled and Jessica Perry is always helpful and knowledgeable as an inspector and reviewer.

The proactive approach taken by the team not only enhanced my understanding but also encouraged me to engage more actively in local environmental initiatives. I believe that such dedicated service goes a long way in fostering trust and collaboration between the community and health officials.

Thank you once again for the exemplary service provided by the team at Mecklenburg County Environmental Health.

Dave Matthews
Level 2 Construction of NC, Inc.
980.521.5298
levelconst.nc@gmail.com

FERRARA | BUIST
CONTRACTORS

2/16/2026

To Whom It May Concern,

I would like to express my appreciation for the outstanding services of Jessica Perry and the Mecklenburg County Environmental Health Department. I have been working with Jessica and the county for over 18 years from plan reviews to onsite inspections. Jessica and Mecklenburg County Health has consistently demonstrated professionalism, integrity and commitment to their customers. If you have any further questions, please feel free to contact me at 704-998-7456.

Sincerely,

Mark Caudell
Construction Manager

FERRARA | BUIST
CONTRACTORS
826 Foundation St Ste 101 | Charleston, SC 29492 | 843-242-7713
4184 Doby's Bridge Rd Ste. 100 | Indian Land, SC 29707 | 803.792.4348
www.ferrara-buist.com

On behalf of the Stew of Sustainability food rescue program, I am pleased to offer this letter of support for Mecklenburg County Environmental Health's application for the National Association of County and City Health Officials Crumbine Consumer Protection Award.

Stew of Sustainability is a Charlotte-based food recovery initiative focused on safely redirecting surplus prepared food to individuals experiencing food insecurity. Because food safety is foundational to our mission, we have valued our interactions with Mecklenburg County Environmental Health as an important source of guidance to food safety experts.

From the beginning, your staff consistently demonstrated open-mindedness and a willingness to engage in thoughtful discussion about a new, unproven concept to rescue food to help feed those in need.

A particularly meaningful example of this collaborative spirit was when your team connected us with food safety expert, Dr. Ben Chapman at North Carolina State University. Through that introduction, Dr. Chapman was able to develop the standard operating procedures that Stew of Sustainability uses to safely rescue, package, and freeze excess food.

Another way that your team has provided support to us is through your communication with environmental health specialists. Specifically, when a food provider is about to begin using our unique process to rescue surplus foods, you communicate with their assigned environmental health specialist that is supervising the food provider.

We appreciate how Mecklenburg County Environmental Health approaches its role with regulatory integrity as well as its willingness to provide direction and support to organizations like ours.

Since its inception, approximately 111,200 pounds of surplus food has been rescued utilizing the Stew of Sustainability program. This rescued food has been safely packaged, frozen, and redirected to those in need in the Charlotte NC community.

Tom McKernan











MECKLENBURG COUNTY
North Carolina
Public Health

2026

SAMUEL J. CRUMBINE CONSUMER PROTECTION AWARD

for Excellence in Food Protection at the Local Level

Appendices for Application

3205 Freedom Drive. Suite 8000 Charlotte, NC 28208 • https://eh.mecknc.gov/

MECKLENBURG COUNTY
North Carolina

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Document Navigation Note

Each Appendix title in this document is hyperlinked to its corresponding section. At the first page of every Appendix, a list of all subsections is provided. Each subsection title is also hyperlinked, allowing you to navigate directly to the specific portion of the Appendix you need.



Appendix A

Part 1: Program Basics
Demographics, Program Resources, and Vision, Goals and Objectives

Content includes:

- **A1: Permitted Facilities by Type for Mecklenburg County Environmental Health**
- **A2: Fee Schedule for Mecklenburg County Environmental Health**
- **A3: Grant Recap by Year in Detail**

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Permitted Facilities by Type

Establishment Type	FY26	FY25	FY24	FT23	FY22	FY21
Food Establishments						
Restaurant	**2972**	**3166**	**3041**	**2975**	**2980**	**2991**
Food Stands	1113	1223	1175	1161	1176	1123
Meat Market	111	110	103	102	105	111
Mobile Food Unit	348	437	374	371	341	317
Mobile Food Unit Commissary	11	14	9	7	6	5
Pushcart	56	76	71	78	70	77
Institutional Food Service	70	75	80	80	79	77
Private School Lunchroom	22	22	24	24	24	34
Public School Lunchroom	184	186	185	183	181	176
Educational Food Service	6	6	5	5	5	5
Elderly Nutrition Sites (catered)	0	0	1	10	12	12
Limited Food Service	48	38	38	25	15	22
Lodging, Institutions, and Childcare						
Lodging	227	238	242	262	246	242
B&B home	2	2	2	3	3	4
Summer Camp	3	5	7	7	8	12
Nursing Home	75	73	76	77	77	75
Hospital	15	15	14	15	14	14
Childcare	455	455	476	480	490	488
Home Daycare	106	107	112	120	124	130
Residential Care	372	370	341	387	380	391
School	340	335	339	330	322	322
Local Confinement	1	1	2	2	3	4
Orphanage	8	7	7	8	6	9
Adult Day Care	9	9	8	8	8	11
Pools and Tattoos						
Seasonal Pool	932	946	938	948	949	945
Seasonal Wading	131	133	134	139	141	143
Seasonal Spa	6	8	10	12	14	14
Annual Pool	499	495	464	435	411	387
Annual Wading	2	2	2	3	4	3
Annual Spa	62	65	60	57	58	56
Special Water Rec	48	45	44	44	46	43
Tattoo	917	1585	1275	1639	1311	851

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Fee Overview

Fee Types	Cost	Program
PUBLIC POOL PLAN RE-REVIEW FEES	350.00	Planning and Support Services
FOOD/LODGING PLAN RE-REVIEW FEES	200.00	Planning and Support Services
Food/Lodging Plan Review	250.00	Planning and Support Services
Public Pool Plan Review	500.00	**Planning and Support Services**
Mobile Food Unit Change in Commissary	100.00	**Planning and Support Services**
HOME DAY PERMIT-RENEWAL	50.00	Food & Facilities Sanitation
TEMPORARY FOOD ESTABLISHMENT PERMIT	75.00	Food & Facilities Sanitation
TEMPORARY EVENT - 1-5 permits	350.00	**Planning and Support Services**
TEMPORARY EVENT - 6 - 10 permits	700.00	Planning and Support Services
TEMPORARY EVENT - 11 - 15 permits	1050.00	Planning and Support Services
TEMPORARY EVENT - 16 - 20 permits	1500.00	Planning and Support Services
TEMPORARY EVENT - 21+ permits	3000.00	Planning and Support Services
Home Day Permit - New	70.00	Food & Facilities Sanitation
Pushcart/Mobile Food Unit Plan Review	150.00	Planning and Support Services

Fee Types	Cost	Program
Groundwater and Wastewater Systems		
Application Re-Review	150.00	Groundwater & Wastewater Systems
Installation and Final Approval	200.00	Groundwater & Wastewater Systems
Locating a Septic System	100.00	Groundwater & Wastewater Systems
Optional Site Evaluation	100.00	Groundwater & Wastewater Systems
Private Well - Additional (2) site visits for sampling	100.00	Groundwater & Wastewater Systems
Private Well - Major Repair	100.00	Groundwater & Wastewater Systems
Private Well - New	550.00	Groundwater & Wastewater Systems
Private Well - Retained Fee if request is denied	100.00	Groundwater & Wastewater Systems
Transient Non-Community Well - Annual Registration	150.00	Groundwater & Wastewater Systems
Transient Non-Community Well - Major Repair	100.00	Groundwater & Wastewater Systems
Transient Non-Community Well (New)	550.00	Groundwater & Wastewater Systems
Well Water Analysis - Bacteria Only	75.00	Groundwater & Wastewater Systems
Well Water Analysis- Bacteria and nitrate/nitrite	100.00	Groundwater & Wastewater Systems
Well Water Analysis - bacteria, nitrate/nitrite and inorganics	160.00	Groundwater & Wastewater Systems
Volatile Organic Compound analysis	74.00	Groundwater & Wastewater Systems
Pesticides	74.00	Groundwater & Wastewater Systems
First Draw lead	40.00	Groundwater & Wastewater Systems
A2 Session Law IP/CA Alteration	120.00	Groundwater & Wastewater Systems
A2 Session Law IP/CA Combo	180.00	Groundwater & Wastewater Systems
Authorized Onsite Wastewater Evaluator (AOWE)	35.00	Groundwater & Wastewater Systems
Community and NTNC Well	100.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (3 wells)1 well - $150 each. Additional well over 1 - $25	200.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (4 wells)1 well - $150 each. Additional well over 1 - $25	225.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (5 wells)1 well - $150 each. Additional well over 1 - $25	250.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (6 wells) 1 well - $150 each. Additional well over 1 - $25	275.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (7-10 wells)1 well - $150 each. Additional well over 1 - $25	375.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (11-25 wells)1 well - $150 each. Additional well over 1 - $25	750.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (26-50 wells)1 well - $150 each. Additional well over 1 - $25	1375.00	Groundwater & Wastewater Systems
Contamination Sites/Monitoring Well - Site Fee (>50 wells)1 well - $150 each. Additional well over 1 - $25	1400.00+	Groundwater & Wastewater Systems
Document Copies - per page	0.05	Groundwater & Wastewater Systems
Engineered Option Permit (EOP)	35.00	Groundwater & Wastewater Systems
Extra Trip Fee	100.00	Groundwater & Wastewater Systems
Home Addition, Mobile Home Exchange, Replacement of Mobile Home with New Home	300.00	Groundwater & Wastewater Systems
Home Addition, Mobile Home Exchange, Replacement of Mobile Home with New Home	100.00	Groundwater & Wastewater Systems
Improvement Permit application (commercial)	450.00	Groundwater & Wastewater Systems
Improvement Permit Application (Commercial)	450.00	Groundwater & Wastewater Systems
Improvement Permit application (residential)	250.00	Groundwater & Wastewater Systems
Improvement Permit Application (Residential)	250.00	Groundwater & Wastewater Systems

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Grant Overview

Grant Type	Funding Received
Grant Year 2020	
AFDO Training and Maintenance of Standardization Grant • Funding was allocated for training, but they could not attend due to the pandemic.	$3,000
NACCHO Mentorship Grant – Mentee • Mentored by SNHD on the progression of Standard 5, achieved over 50% increase in standard conformance.	$14,000
Grant Year 2021	
AFDO Training and Maintenance of Standardization Grant • Attended training for staff continuing education.	$3,000
Grant Year 2022	
NEHA-FDA Retail Flexible Funding Model (RFFM) – Track 1 – Development Grant • Completed a Self-Assessment and Comprehensive Strategic Improvement Plan	$5,000
NEHA-FDA RFFM – Mentorship Grant – Mentee • Mentored by GNR, focused on Standard 2. Standard 2 was met and audited by GNR, making MCEH the first to meet the standard in NC.	$14,000
NEHA-FDA RFFM – Training Grant • Attended training for staff continuing education.	$6,820
Grant Year 2023	
NEHA-FDA RFFM – Track 2 – Development Grant • Developed training for staff to progress on Standard 6	$5,000
NEHA-FDA RFFM – Mentorship Grant – Mentor • Mentored Wake County, NC, focused on Standard 2. • Mentored Hardin County, TX, focused on Standards 2, 6, and 9.	$15,000

Grant Type	Funding Received
Grant Year 2024	
NEHA-FDA RFFM – Track 2 – Development Grant • Created a local HACCP committee and processes for uniformity. • Determined a policy that could assist with the timing of meeting Standard 4. • Worked towards completing the intervention strategies Standard 9.	$10,000
NEHA-FDA RFFM – Mentorship Grant – Mentor • Mentored Jackson County, MO, and Sudbury, MA, focused on Self-Assessment and Comprehensive Strategic Improvement Plan.	$15,000
NEHA-FDA RFFM – Training Grant • Attended training for staff continuing education.	$7,500
Grant Year 2025	
NEHA-FDA RFFM – Track 3 – Maintenance & Advancement Base • Working towards meeting and auditing Standard 4. • Actively working towards the development, training, and implementation phases for Standards 5 and 6. • Work towards determining if option 2 for Standard 8 is feasible to meet. • Distribution and impact of the Food Safety Management System Tool. • Maintain standards 1, 2, 3, and 7.	$63,000 over 3 years
NEHA-FDA RFFM – Mentorship Grant – Mentor • Mentoring Chesapeake Health Department and Eastern Shore District, VA, focused on Self-Assessment and Comprehensive Strategic Improvement Plan.	$15,000
NEHA-FDA RFFM – Training Grant • Attended training for staff continuing education.	$3,500
Total	$179,820



Appendix B

Part III: Baseline and Program Assessment Regulatory Foundation

Content includes:

- **B1 – Regulatory Information with Links**
- **B2 – Standard 1 – Certificate of Achievement**

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Regulatory Authority

Regulatory Description	Link
State Regulations	
State General Statutes (130A-247-250) • NC General Statutes provide the authority to implement rules. It outlines what is required to be regulated and provides definitions.	NC General Statutes
State Rules – .2600 Rules Governing Food Protection and Sanitation of Food Establishments • Since the Food Code is not adopted by reference, the rules are required to be updated.	15A NCAC 18A .2600 Rules Governing Food Protection and Sanitation of Food Establishments
NC Food Code – Adopted in 2021 • The NC Food Code is based on the 2017 FDA Food Code and Supplement.	NC Food Code
State Issues Position Statements • If clarity or additional information is needed, NCDHHS may issue Position Statements that provide information needed for all counties.	Position Statements

U.S. Department of Health and Human Services Public Health Service
Food and Drug Administration

Certificate of Achievement

Presented to

Mecklenburg County Public Health

For outstanding commitment to retail food safety and the continous improvement of the retail food regulatory program as demonstrated by meeting

Standard #1 - Regulatory Foundation

Of the FDA Voluntary National Retail Food Regulatory Program Standards

Donna M Wanucha, REHS
FDA Retail Food Specialist

Elizabeth O'Malley
FDA Retail Food Protection Branch Director

FDA U.S. FOOD & DRUG ADMINISTRATION

Achieved on: February 17, 2023



Appendix C

Part III: Baseline and Program Assessment Training Program

Content includes:

- **C1: Mecklenburg County Environmental Health Training Manual**
- **C2: Standard 2 – Appendix B-1 Tracking**
- **C3: Standard 2 – FDA Standardized Retail Food Safety Inspection Officer Certificates**
- **C4: Standard 2 – Standard Operating Procedures**
- **C5: Standard 2 – Standard 2 – Certificate of Achievement with Health Director Encouragement**
- **C6: Standard 2 – Business Intelligence Dashboard**
- **C7: Historical Training Guidance**

TRAINING MANUAL

Mecklenburg County Public Health
Division of Environmental Health

Version 3

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Introduction

Background

The Conference for Food Protection (CFP) developed a nationally recognized model training manual to support jurisdictions in meeting the FDA Voluntary National Retail Food Regulatory Program Standards, specifically Standard 2 – Trained Regulatory Staff. This model was created after CFP identified significant variation in training and standardization practices across the country and sought to establish a consistent, research-based framework for preparing Environmental Health Specialists (EHS) who conduct food safety inspections.

The CFP Field Training Manual reflects years of work by subject matter experts from regulatory programs, industry, academia, and the FDA's Office of Regulatory Affairs University (ORA U). It serves as the foundation for the training and standardization criteria outlined in Standard 2 and continues to evolve through the CFP Committee process.

Using this national model as a guide, Mecklenburg County developed its own training manual that aligns with the CFP framework while incorporating jurisdiction-specific practices and state regulatory requirements. The Mecklenburg County Training Manual outlines the structure of the training program, the methods used to deliver training, and the metrics required for an EHS to achieve full authorization.

Overview: Training Program Overview

Mecklenburg County houses an internal training program designed to guide new employees and employees newly assigned to the regulatory retail food protection program through a structured 12-month training process. The County uses a two-tier approach (Training 1.0 and 2.0) to ensure each authorized EHS is equipped to conduct risk-based inspections, correctly interpret and apply the Food Code, and effectively manage a retail food territory. The performance elements outlined in the CFP Field Training Manual are reflected throughout this comprehensive training program.

To become an authorized agent of the state, an EHS must also complete training provided by the North Carolina Department of Health and Human Services (NCDHHS) and pass both a classroom and field examination. These state requirements, which are outside Mecklenburg County's control, are described in this manual for reference but are separate from the County's internal training program. For the purpose of meeting Standard 2 of the FDA Voluntary National Retail Food Regulatory Program Standards, the Mecklenburg County training program alone satisfies the required criteria.

NCDHHS Training Requirements

In North Carolina, individuals seeking authorization as a REHS must complete the required training and examination administered by the NCDHHS. This process includes four tiers of training conducted with an Environmental Health Regional Specialist. The five steps outlined in Table 1 are completed with limited involvement from local health departments. For this reason, this additional layer of state-directed training aligns with the Mecklenburg County Training Program but does not occur in the same sequence for every training class.

Table 1: NCDHHS Delegation Process

Tier I General Module	Basic Environmental Health Overview • On-Demand Modules
Tier II Specialized Training	Centralized Intern Training that is Food and Lodging Authorization Specific
Tier III Regionalized Group	Regionalized Training by Regional Specialist
Tier IV Authorization Testing	Authorization Test Administered by Regional Specialist • Written Exam • Field Evaluation

Mecklenburg County Training Program Overview

Training 1.0

The vision behind Training 1.0 is to provide all newly hired staff, whether experienced or not, with all the education and tools required to ensure successful completion of a State authorization in Food, Lodging and Institutions. This training model was developed in 2015 and has been revised and updated continuously since then.

Training 2.0

The vision behind Training 2.0 was to provide all staff who completed Training 1.0 with an additional layer of training that tackled, in further detail, all other subjects aside from conducting a routine inspection. This training model was developed in 2019-2020 to provide the newly authorized REHS with training on other aspects of managing retail food territory. This includes completing service requests and complaints, Temporary Food Events (TFE), permitting, enforcement actions, and many more. In addition, Training 2.0 continues to monitor progress on risk-based inspection concepts, food code application, field quality assurance, and file review.

Crosswalk: CFP Performance Elements and Mecklenburg County Training Program

The purpose of the crosswalk (Table 4) is to ensure that the two-tier training process fully addresses all 23 performance elements outlined in the CFP manual, which serves as the foundation for training newly hired staff. While NCDHHS provides basic instruction on these elements, this expanded training program offers additional depth and accommodates the learning styles of new staff. The crosswalk identifies when and how each performance element is met across both tiers of training. Each element is reinforced through specific objectives to ensure staff are prepared to conduct a risk-based inspection using the six inspection areas.

Table 4: Crosswalk

CFP: Field Training Manual *6 Inspection Training Areas*	**CFP: Field Training Manual** ***23 Performance Elements***	**Mecklenburg County Training Program** ***Location of Training***	**Mecklenburg County Training Program** ***Training Objectives***
I. Pre-Inspection	1. Has the required equipment and forms to conduct the inspection	Training 1.0	Orientation with Training 1.0 Supervisor, where equipment (laptop, phone, inspection bag, etc.) that is needed for inspections and office work is provided
	2. Reviews the establishment file for the current risk category assigned, previous inspection report, complaints on file, and, if applicable, required HACCP Plans or documents supporting the issuance of a variance	Training 1.0	Review risk category sheet while going over training manual, review tools for the job (marking instructions, policy, and guidance documents) during in-office training, review special processes mentioned in NC Food Code and what rules require
		Training 2.0	Review policy EHF-01 facility inspections on ways to properly conduct field inspections, review application of special processes as needed, application of the establishment file review during routine Quality Assurance field review.
2. Inspection Observations and Performance	1. Provides identification as a regulatory official to the person in charge, confirming agency authority for the inspection, and stating the purpose of the visit	Training 1.0	Trainers review proper identification during routine training meetings, but also during field evaluation. Trainers exemplify requirements set in policy and QA.
	2. Has knowledge of the jurisdiction's laws, rules, and regulations required for conducting retail food/foodservice inspections.	Training 1.0	Trainers review all chapters of the food code, general statutes, and all rules covering food regulations. Trainers review the provided marking instructions book with all materials.
		Training 2.0	Supervisor and trainer review laws and rules as applicable during field training. Through routine file review, additional training is provided in classroom settings.
	3. Uses a risk-based inspection (RBI) methodology to assess regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food and verify that the establishment is assigned the correct risk category.	Training 1.0	Review walkthrough, menu review, static vs dynamic through in-class training and in-field observations. After observations, new hires practice proper risk-based inspection methodologies through joint inspections
		Training 2.0	RBI review – review 3 different food processes, review the 3-legged stool, review critical limits, SOPs, Active managerial control, assessing risk category, and prioritizing an inspection
	4. Obtains immediate corrective action for out-of-compliance employee practices and management procedures essential to the safe storage, preparation, and service of food.	Training 1.0	In class and in field observations, review proper methods of achieving corrective actions. Intern Training progression – intern begins leading inspections with authorized EHS. They practice using inspection equipment, asking questions of PIC, and assessing violations and getting corrective actions
		Training 2.0	Immediate corrective actions are discussed during classroom settings. Recaps and review are discussed based on questions and file review.

	5. Correctly assesses the compliance status of other regulations (Good Retail Practices) that are included in the jurisdiction's prevailing statutes, regulations, and/or ordinances.	Training 1.0	In-class training teaches food code chapters and the importance of assessing GRPs. New hires practice knowledge through joint inspections and observations from a standardized training staff
		Training 2.0	Through file review and questions, staff are provided with reminders and a review of how to assess GRPs and providing RBI approach.
	6. Verifies correction of out-of-compliance observations identified during the previous inspection. Discusses options for the long-term control of risk factors.	Training 1.0	Discuss different scenarios to get corrective actions. Field observations and joint inspections are used to practice immediate corrective actions and ways to handle long-term control of noncompliant items
		Training 2.0	Enforcement actions for long term compliance (RCP, ITS) and assessment of out-of-compliance observations are reviewed during the weekly meeting
	7. Correctly uses inspection equipment during the joint inspection.	Training 1.0	As part of the Intern Progression Timeline, after CIT or week 6, interns may start to perform elements of an inspection, such as taking temperatures, testing sanitizer, discussing Employee Health with PIC, answering prompted questions from the trainer to practice knowledge etc.
3. Oral Communication	1. Asks questions and engages in a dialogue with the person in charge/employees to obtain information relevant to the inspection	Training 1.0	During field observations, new hires learn different methods for talking to and engaging with management. Through joint inspections, new hires practice different forms of communication.
	2. Provides the person in charge/employees with accurate answers to inspection-related questions or admits not knowing the answer	Training 1.0	In class, teaching on all chapters of the food code and ways to respond to operators. Practice this through field observations and joint inspections.
		Training 2.0	Trainer and supervisor reviews and assessed during field QA requirements. Feedback provided as needed.
	3. Uses available means (e.g., interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers.	Training 1.0	Demonstrates proper form of communication through field evaluations, introduction to the cultural foods app, and translation services available through the department
		Training 2.0	During field QA, feedback is provided on ways to improve or maintain communication with operators and the use of translation services
	4. Follows the jurisdiction's policy about disclosure of confidential information.	Training 1.0	In-class training on how to handle confidential information when handling ill employees and field investigations.
		Training 2.0	Review ways to handle confidential information during FBI investigations and have field support when handling the first case utilizing confidential information
	5. Uses effective communication and conflict resolution techniques to overcome inspection barriers	Training 1.0	Communication tips were discussed and practiced during the module with the use of videos and breakout activities
		Training 2.0	RBI practices are reviewed, and new hires review proper methods for active listening and training through question-based scenarios
	6. Conducts the exit interview, explaining out-of-compliance observations and identifying corrective actions and timelines for all noted violations.	Training 1.0	Teaches proper ways to complete an exit interview in class, demonstrated through field observation, and practiced during joint inspections to ensure it is consistent with jurisdiction QA guidelines
		Training 2.0	Trainer and supervisor reviews are used, and performance is assessed during field QA requirements. Feedback is provided as needed

4. Written Communication	1. Completes inspection form per the jurisdiction's administrative procedures (e.g., observations, corrective actions, public health reasons, applicable code references, options for the long-term control of risk factors, compliance dates).	Training 1.0	Practices include filling out inspection, product disposition, and other related forms. New hires learn appropriate methods to document through classroom training and practice during joint inspections.
		Training 2.0	Review inspection reports to ensure they are completed per state guidelines. Noted issues are discussed through bi-weekly meetings and mentioned during one-on-one meetings.
	2. 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).	Training 1.0	Review examples of enforcement actions and documentation demonstrated in field work or mock scenarios to fulfill requirements for authorization.
		Training 2.0	Review the enforcement action policy (EHF-06). Review methods for using different documents during field evaluations.
	3. Presents the inspection report and, when necessary, cross-referenced documents to the person in charge.	Training 1.0	Review ways to utilize marking instructions, food code, and inspection form to support observations noted during inspection. Utilize exercises and practice with field observations to practice filling out the inspection form.
		Training 2.0	Trainer and supervisor reviews are used, and performance is assessed during field QA requirements. Feedback is provided as needed.
5. Professionalism	1. Maintains a professional appearance consistent with the jurisdiction's policy (e.g., clean outer clothing, hair restraint).	Training 1.0	EHS reviews policy initially with the supervisor and signs a copy stating they understand expectations of how to maintain professionalism and proper etiquette during inspections. Inspection etiquette and professional behavior are taught during in class presentation and demonstrated during field observations.
	2. Demonstrates proper sanitary practices as expected from a food service employee	Training 1.0	EHS reviews ways to maintain professionalism, appropriately documenting and reporting violations observed during an inspection, and proper methods to conduct an inspection
	3. Only reports substantiated findings as violations	Training 1.0	EHS reviews ways to maintain professionalism, appropriately documenting and reporting violations observed during an inspection, and proper methods to conduct an inspection
6. Additional Performance Elements	1. Uses an aseptic food sample collection method consistent with criteria established by the laboratory serving the jurisdiction.	Training 1.0	EHF07 FBI Investigation policy goes through methods and ways to collect samples and send samples for testing in the event that collection is required for the investigation as directed by management
		Training 2.0	
	2. Uses an aseptic water sample collection method consistent with criteria established by the laboratory serving the jurisdiction	Training 1.0	Reviews aseptic water sampling for food facilities on well water. Documentation completed during sampling and submitted for testing. Mock documentation may occur at times when sampling is not required.
	3. Other performance elements identified by the jurisdiction.	Training 1.0	Additional performance elements can be noted on the checklist for both teams.
		Training 2.0	

Training 1.0

This section provides a comprehensive description of the structure, components, and operational framework of Training 1.0. It outlines the instructional methods, progression of activities, and foundational competencies that guide new interns through the initial phase of their development. The information that follows details how Training 1.0 is organized and implemented to prepare staff for authorization in FLI and advancement to Training 2.0 (Appendix A).

In-Class Training

Training 1.0 consists of a structured twenty-week curriculum designed to prepare Environmental Health Specialists (EHSs) with the knowledge and competencies required to obtain Food, Lodging, and Institutions (FLI) authorization from NCDHHS before conducting routine inspections. The curriculum provides comprehensive instruction on risk-based inspections, detailed study of all chapters of the North Carolina Food Code, distinctions between TCS and non-TCS foods, specialized processes, plan review and permitting, microbiology, shared kitchens, mobile food units, and additional foundational topics. A complete outline of the curriculum is provided in Appendix B.

Classroom instruction is organized around a Warm-Up/Wrap-Up model to ensure consistent delivery of information and to support meaningful engagement among interns. These sessions serve as structured, open forums where interns may discuss their experiences, clarify rule interpretations, and explore the week's subject matter. Topics addressed during Warm-Up discussions include determining regulatory authority, interpreting Food Code chapters, completing required office tasks, and utilizing available resources. Interns are expected to participate with openness, engagement, and a commitment to developing the skills necessary to conduct effective risk-based inspections.

Session	Explanation	Instructor	Agenda Item
Warm-Up	30-45 minutes in length	Training 1.0 Senior or guest (subject matter expert)	1. Introduction to Week's NC Food Code Topic 2. Assignments given for upcoming Wrap-Up Session 3. Review of the previous week's training topics 4. Open discussion of field observations for clarification and how to mark violations on the NC inspection form 5. Reminder of expectations for in-field and in-class training
Wrap-Up	1.5-2.5 hours in length	Training 1.0 Senior or guest (subject matter expert)	1. Review of previous exercises 2. Brief review of the current week's NC Food Code Chapters 3. Open discussion of code applicability 4. Completion of exercises 5. Discussion of how to mark violations on the NC inspection form

Pathways to Authorization

This section provides an overview of the two entry pathways into the Environmental Health training program: the Registered Environmental Health Specialist Intern (REHSI) Newly Hired Path and the Registered Environmental Health Specialist (REHS) Previous Authorization Path. Each pathway reflects a different level of prior experience and determines the scope of training, evaluation, and authorization required before an individual may perform independent regulatory duties. The following subsections outline the qualifications, expectations, and progression for each path to ensure that all staff receive the appropriate level of preparation and oversight.

Registered Environmental Health Specialist Intern (REHSI) – Newly Hired Path

The newly hired path is considered the traditional path followed by an individual with limited to no experience in Environmental Health. This individual should have at least a 4-year bachelor's degree or have completed at least 30 college semester hours in the physical/biological sciences. Newly hired staff will undergo the full training program (*Table 2*). Individuals in this path will complete all Pre-Coursework and joint inspection logs.

Table 2: *Newly Hired Path*	
Pre and Post Curriculum	Pre-Curriculum to be completed by Training 1.0 completion. Post-Curriculum to be completed by Training 2.0 completion.
Joint Inspections	Joint inspection logs to be completed and reviewed before the release of authorization by management.
Independent Inspections	Independent inspection logs to be completed and reviewed before release to the Food and Facilities supervisor by management. Independent logs can only begin once authorization is completed.
24 Month Requirements	Newly hired staff begin their Standard 2 requirements once assigned to the retail food program.

Registered Environmental Health Specialists (REHS) – Previous Authorization Path

Requirements for individuals with a previous authorization are subject to change based on experience and quality assurance reviews. An individual with a previous authorization may either be:

1. Fast-tracked: Provided authorization by NCDHHS and only requires internal training.
2. In-Field Testing Required: NCDHHS requires an in-field evaluation to be conducted.

In addition, at a minimum, an individual with previous experience must attend some or all portions of the in-class curriculum based on the supervisor and Senior EHS evaluation (Appendix C). Regardless of the path taken, every individual who goes through training 1.0 is required to participate in training 2.0 to fill any gaps needed for performance elements. Due to the nature of this path, standard 2 requirements differ slightly from those above (*see Table 3*).

Table 3: *Previous Authorization Path*	
Pre and Post Curriculum	If pre-coursework was not completed in a previous county and authorization was already achieved, staff will be required to take up all coursework before completing Training 1.0 training requirements. Post-curriculum coursework must be completed before completion of Training 2.0.
Joint Inspections	25 joint inspections are required for previously authorized staff before independent inspections are allowed, regardless of authorization status. Joint inspections may be reduced by the trainer and verified through written documentation that the EHS has demonstrated all performance elements and competencies to conduct an independent inspection of retail food establishments.
Independent Inspections	Staff hired with prior authorization can begin to log independent inspections after completion of Training 1.0.
24 Month Requirements	Staff hired with prior authorization will begin their 24-month requirement with the hire date.

Trainer Selection and Expectations

An authorized trainer may be a supervisor, a training senior EHS, or a member of the field staff. Trainers selected to serve are expected to be standardized staff to ensure that each intern receives consistent, high-quality field instruction. While the ideal intern-to-trainer ratio allows the four senior trainers to conduct most of the field training, larger intern groups may require additional staff support. All department staff are expected to participate in training activities as outlined in their individual work plans. If the staff is not standardized yet, the trainee is expected to include this in the joint inspection log. Providing interns with exposure to a variety of work styles is beneficial, as it demonstrates that accurate inspection reports and grades can be achieved through different, yet compliant, inspection approaches.

Trainers are responsible for scheduling and conducting in-field ride-alongs, demonstrating effective risk-based inspections, reviewing the use of marking instructions and other tools, discussing code applications, and addressing questions throughout the inspection process.

Trainers are responsible for monitoring interns' progress toward weekly in-classroom expectations, supporting effective time management, meeting with interns as needed, and communicating promptly with supervisors about any circumstances that may impact training.

Field Training Experience

Field training inspections are a core component for preparing an intern 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 Intern 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 trainer to observe the trainee build their skills and successfully demonstrate competencies. Inspections led by a trainee 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 reinforced.

Trainer-Led Inspections

If selecting staff other than the Senior Training Team for trainer-led inspections, management should consider experienced staff with a solid command of all the competencies the intern will be expected to demonstrate in the training process. These trainer-led inspections should be conducted in a variety of establishments that cover the spectrum of retail food and foodservice operations that the Intern will eventually be inspecting on their own. The training process is designed to facilitate continuous improvement learning experience.

Trainee-Led Inspections

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.

As the field training process progresses, the trainer may note that the selection of establishments has not provided the trainee with 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 before the inspection, so expectations are clear.

Trainee 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
- Verifying ownership
- Explaining the purpose of the inspection
- Directing the inspection process
- Establishing a dialogue with management and employees
- Making observations of food safety practices
- Obtaining corrective actions for out-of-compliance foodborne illness contributing factors
- Preparing the inspection report using the Custom Data Processing database (CDP)
- Facilitating and conducting the exit discussion of the report
- Posting the Grade Card

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.

Establishments for Inspections and Number of 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. Based on the recommendations from the CFP, most of these inspections should be completed in establishments that are representative of the highest risk categories within the assigned training area (Appendix D).

Interns are expected to conduct at least 20-25 joint field inspections where they are observing the training and practicing completing an inspection report on their own. Once these inspections are completed, the

intern should be able to take the lead role in conducting inspections while the trainer observes. There is no definitive maximum number of inspections led by the trainee that can be used as a standard for all newly hired employees. The number of inspections necessary 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.

The primary objective of this process is to ensure that the intern has received training for all the competencies that are part of the job responsibilities within that jurisdiction. As part of this training, the trainee 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 trainer(s) need to evaluate the trainee's ability to demonstrate competencies throughout the entire process.

Measuring Progression and Accomplishments

As newly hired staff progress through Training 1.0 toward authorization, their performance is regularly measured by a variety of methods. An ideal candidate for authorization should be well prepared with solid knowledge of the NC Food Code and appropriate use of all the tools available to them. The candidate should be able to conduct a good risk-based inspection, converse appropriately with operators, accurately complete the inspection form, and gain corrections for out-of-compliance risk factors. They should also be familiar with how to navigate through all the online sites they need as they prepare to move to Training 2.0. The Training 1.0 Checklist should be completed with all required training weeks successfully passed and all file and field reviews complete (Appendix E).

Methods used to measure progress through Training 1.0 include written knowledge checks during Warm Up and Wrap Up, group activities such as learning games and scavenger hunts, one-on-one meetings with their assigned advisor, written inspection reports with corrections red-lined, teach-backs, weekly team calibration meetings, and at least three Quality Assurance evaluations. In addition, mock inspections can alert new staff to areas where they feel less confident or discover they are unclear; discussions afterward with their assigned advisor can help them improve their performance as they prepare for authorization.

There is no single 'correct' method for deciding when a trainee has successfully demonstrated 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 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 out the task effectively
- The demonstration of a clear understanding of a given competency; and
- A collective set of trainer observations that predominantly 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, the trainee may not address an important food safety risk (such as employee health) with the person in charge. The trainee may understand and 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.

Trainers need to recognize that during the training process, trainees are not only learning competencies but are also becoming acclimated to their working environment. Trainers' decisions regarding a trainee demonstrating a competency should be based on a collective set of observations that predominantly indicate the job task is being performed correctly. When the trainee successfully demonstrates competency, Senior Trainers or supervisor documents the completion of the skill on the training checklist.

Training Methods and Evaluation Tools

The Training 1.0 program uses several methods to teach newly hired staff, with the expectation that using various teaching methods ensures success in reaching authorization. During the 15 weeks of training, interns will be exposed to weekly classroom work, including knowledge checks, as well as daily field work with an experienced trainer. In addition, they are assigned as an advisor from the core group of senior trainers with whom they will work individually when questions or concerns arise. Various parts of the training program are detailed below.

Component	Description
In-Classroom Training (Warm-Up/Wrap-Up)	Weekly classroom sessions introducing and discussing assigned topics. Activities build group cohesion and address common questions. Attendance, facilitation, and discussion topics are documented.
Homework & Knowledge Checks	Weekly assessments through written assignments, in-class exercises, group activities, and learning games. Group review reinforces understanding, builds confidence, and helps trainers identify individual strengths and weaknesses.
Field Training	The majority of each week is spent in the field with an authorized trainer. Trainees observe and participate in real-world inspections aligned with weekly topics (routine inspections, permitting, service requests, wells, return visits, etc.).
Assigned Advisor	Each trainee is paired with a senior training advisor for questions outside of classroom time. Advisors typically conduct early field training to establish rapport and provide consistent guidance.
Weekly Calibration Meetings	Senior trainers and supervisors meet weekly to review intern progress, identify concerns, and coordinate corrective actions. Shared awareness of intern performance improves training consistency.

Component	Description
Training Schedule	A shared OneDrive schedule ensures interns and trainers know where to be and with whom. Interns and trainers coordinate the day before field activities.
Training Manual	Trainees receive an electronic resource library for future field use.
Training Log	Trainees maintain a Joint Field Training Log documenting daily field activity, trainer names, establishment types, and whether inspections were trainer- or trainee-led.
Written Inspection Reports ("Red-Lining")	Trainee-written inspection reports are reviewed by advisors, compared to trainer reports, and returned with corrections and comments. Feedback is provided promptly to support continuous improvement.
Teach-Backs	Trainees present an in-depth explanation of an assigned Food Code topic, reinforcing understanding and strengthening communication skills.
Foodborne Illness Outbreak Exercise	Trainees participate in a simulated outbreak investigation based on a real Mecklenburg County case, including role-playing to mirror real-world challenges.
Quality Assurance Evaluations	Trainees undergo multiple QA evaluations using the NC Quality Assurance Field Assessment Marking Instructions. Assessments occur early in trainee-led inspections, mid-training, and again prior to authorization.
Training 1.0 Checklist	Confirms completion of all training components, knowledge checks, equipment needs, MeckTalent courses, workplan signatures, and Tier IV requirements. Ensures readiness for state review and authorization.
Mock Inspections	Conducted once trainees are ready for state authorization. Trainees perform inspection exercises independently using a training letter; no scores are posted. Mock inspections build confidence before the official evaluation.

Training 2.0

This section outlines the structure and intent of Training 2.0, the phase in which newly authorized staff begin the transition from guided practice to fully independent regulatory work. During this period, EHSs assume responsibility for an assigned territory and the full range of duties that accompany independent field work, yet they continue to benefit from the support, expertise, and oversight of the Training 2.0 team.

This model ensures that staff are not simply released into independent work but are intentionally developed through continued exposure to specialized training opportunities and real-world scenarios. Newly authorized EHSs accompany senior staff for their first experiences in varying program areas, including foodborne illness investigations, permitting activities, enforcement actions, and interactions with non-permitted food establishments, allowing them to observe best practices and refine their decision-making in complex situations.

Throughout this phase, participants receive detailed quality assurance evaluations to reinforce consistency, accuracy, and adherence to regulatory standards. Staff remain within the Training 2.0 program for approximately six months, during which they receive structured guidance and ongoing feedback before transitioning to their permanent supervisor.

In-Class Training

Training 2.0 is a structured thirteen-week curriculum designed to support newly authorized Environmental Health Specialists as they transition into independent field work (Appendix F). The curriculum builds on the foundational knowledge from Training 1.0 and classroom instruction, guiding staff as they begin applying regulatory requirements in real settings and develop the skills needed to manage an assigned territory confidently and consistently.

The curriculum reinforces core expectations and provides focused instruction on the areas that staff will encounter most frequently. These areas include:

- Effective use of required technology, including the Dashboard and related tools
- Management and prioritization of community service requests
- Limited food service processes and compliance expectations
- Procedures for addressing non-permitted vendors
- Steps and documentation required for enforcement actions
- Response protocols for foodborne illness complaints
- Specialized processes that require advanced judgment and consistency
- Additional foundational topics essential for daily field operations

Each week builds on the last, ensuring that newly authorized staff receive repeated exposure, guided practice, and opportunities to apply concepts in the field. This structure helps staff develop not only technical competence but also the decision-making skills and professional judgment needed to perform independently.

Trainer Selection and Expectation

Training 2.0 functions very differently from Training 1.0 because it is delivered almost entirely by two senior EHS staff and the supervisor, who collectively manage all field-based training. This structure allows newly authorized staff to receive consistent guidance from trainers who are deeply familiar with policy, field expectations, and the nuances of real-world inspections.

Trainers are expected to be readily available as in-field training needs arise. Many situations cannot be scheduled in advance, and the value of Training 2.0 comes from responding to real scenarios as they occur. For example, if a newly authorized staff member receives a foodborne illness complaint, a Senior EHS will adjust their workload and prioritize accompanying the staff member. These moments provide critical learning opportunities that cannot be replicated in a classroom.

Senior EHS staff are selected for this role because they have the skills, judgment, and flexibility to balance training responsibilities with their own caseload. They are expected to model how to manage competing priorities, make risk-based decisions, and maintain high-quality work while supporting the development of newer staff. Their involvement ensures that training remains consistent, responsive, and aligned with division policy.

In-Field Application

The in-field application of Training 2.0 is where the concepts introduced in Training 1.0 and the classroom are put into practice. This phase gives newly authorized staff the chance to see how expectations play out during real inspections, understand the reasoning behind each step, ask questions in the moment, and build the confidence needed to complete the process on their own. Because many activities involve detailed procedures and require consistent application, it is common for newly authorized staff to observe each activity multiple times before taking the lead.

During this phase, the trainer serves in two roles, each designed to support the staff member's progression toward independent work.

Trainer – Lead

When the trainer takes the lead, they walk through the entire process from start to finish, following policy and demonstrating what "right" looks like. This includes:

- Showing how to approach and conduct the activity in the field.
- Modeling clear communication with operators and facility staff.
- Demonstrating how to use marking instructions, tools, and risk-based decision-making.
- Explaining why certain decisions are made, especially when applying code or determining compliance.
- Completing the related paperwork and documentation so the staff member sees how field observations translate into a complete, accurate report.

This lead-demonstration phase sets the standard. It ensures newly authorized staff understand expectations, see the workflow in context, and recognize how policy guides each step.

Trainer – Observer

When observing, the trainer shifts into a coaching role. In this phase, the trainer:

- Watches the newly authorized staff conduct the activity independently.
- Provides timely, constructive feedback on technique, communication, accuracy, and consistency with policy.
- Highlights strengths and identifies areas that need more practice or clarification.
- Ensures the staff member is applying risk-based principles correctly and documenting findings clearly.
- Assesses how well the staff member handles unexpected situations or questions from operators.
- Communicates progress to the supervisor and helps determine when the staff member is ready to perform activities on their own.

The observer role is essential for confirming that the staff member can perform consistently without direct oversight and for identifying any remaining training needs before full independence.

Quality Assurance

Quality assurance is a core component of the training program, ensuring that newly authorized staff are strengthening their risk-based inspection skills, completing routine field activities in accordance with policy, and effectively maintaining their assigned territory. The table below outlines the primary quality assurance elements reviewed throughout Training 2.0.

Table 3: Quality Assurance (QA)

Field	Initial QA: Timeframe – Within 2 months of independent inspections • Newly authorized staff receive a field QA with Senior EHS. • This QA is not counted as a formal QA, rather more of an opportunity for the EHS to see if there are any areas of improvement since they are no longer conducting inspections with other senior staff. • The Senior Trainer is expected to meet and discuss feedback
	QA Follow-Up: Timeframe – Within 1 month of the previous evaluation: • If the newly authorized staff falls below the policy expectations, they will receive a follow-up field QA by the senior EHS or the supervisor.
	Final QA: Timeframe – Before the completion of the Training 2.0 Program • All newly authorized staff receive a final QA with the supervisor • This QA is entered into the system as their first formal QA
File Review	All newly authorized staff receive several layers of file review. At the conclusion of the program, staff will receive between 15 and 30 file QA by the supervisor: • Initial file review received within 2 months of independent inspections • File review after initial field QA • Final file review with final field QA
Permitting	Newly authorized staff receive a formal QA for all permits submitted by the supervisor.
Foodborne Illness Investigations	Newly authorized staff receive a formal QA for all investigations conducted.
Daily Activities	Daily activities are monitored by the supervisor to ensure full workdays are accomplished, along with managing the territory.
Other	Supervisor and seniors work together to monitor all components of the training program. The team ensures communication to determine if there are areas that must be monitored or further discussed.

Measuring Progression and Accomplishments

As newly authorized staff enter Training 2.0, the emphasis shifts from foundational learning to the refinement of independent practice. Training 1.0 establishes the ability to conduct risk-based inspections, apply the NC Food Code, and complete inspections with minimal prompting. Training 2.0 builds on these skills by strengthening independence, consistency, and territory management. By the end of this phase, authorized staff should be fully prepared to function as independent Environmental Health Specialists capable of managing all required field responsibilities.

Progress in Training 2.0 is measured through structured evaluations, real-time field performance, and ongoing feedback from Senior EHS trainers and the supervisor. Staff are expected to identify gaps proactively, seek clarification, and adjust their inspection approach based on prior feedback. Training 2.0 uses the Training 2.0 Checklist to ensure exposure to all required field activities and confirms readiness for transition to the permanent team (Appendix G).

Evaluation methods include multiple field and file Quality Assurance reviews, in-field observation using lead-and-observer training roles, classroom knowledge checks, technology proficiency, territory management performance, and documentation accuracy. Staff also receive repeated exposure to specialized activities such as foodborne illness investigations, transitional permitting, temporary food events, non-permitted vendor response, and specialized process verification. Many activities are observed several times before the staff takes the lead.

Competency is demonstrated through consistent, accurate, and policy-aligned performance across independent field activities. Trainers assess whether staff can explain the purpose of tasks, apply risk-based principles reliably, communicate effectively with operators, and handle unexpected situations appropriately. Variability is expected as staff learn to balance competing priorities and manage a territory; trainers determine whether inconsistencies reflect misunderstanding, inexperience, or the natural learning curve.

By the conclusion of Training 2.0, newly authorized staff should demonstrate the confidence, judgment, and consistency required to manage their territory independently while upholding division policy and regulatory standards. The combined use of structured evaluations, real-time coaching, and repeated exposure to complex field activities ensures that staff not only understand expectations but can apply them reliably in diverse situations. Successful completion of all Training 2.0 components confirms that the staff member is prepared to transition to their permanent team and assume full responsibility for their assigned workload as an independent Environmental Health Specialist.

Training Methods and Evaluation Tools

The Training 2.0 program uses several methods to train newly authorized staff, with the expectation that using various teaching methods ensures success in conducting independent field work. During the 6 months of training, staff will be exposed to classroom training, including knowledge checks, as well as in-field application in various areas. The newly authorized staff are expected to work closely with the supervisor and senior EHS to ensure a complete understanding of the process. Various parts of the training program are detailed below.

Component	Description
Technology Training	Staff receive detailed training on how to use Power BI Dashboards, review inspections within the database system, and how to effectively use equipment in the field.
In-Classroom Training	Classroom sessions reinforce the application of various topics. The classroom sessions allow the training group to receive consistent information, address common questions, and receive division updates.
One-on-One	Newly authorized staff receive additional one-on-one meetings to discuss progress, feedback, and any important information needed to help them succeed.
Territory Management	Newly authorized staff receive their own territory based on complexity and area. They are expected to work with the senior and supervisor on effective management of priority inspections.
Field Application	Each newly authorized staff member will be expected to work with a senior EHS or supervisor to observe in-field application. These activities include transitional permitting, temporary food events, foodborne illness investigations, non-permitted food vendors, risk category assessments, and any other area deemed necessary.
Specialized Process Training	Each newly authorized staff member will receive training in specialized process verification.
Weekly Calibration Meetings	Senior EHSs and supervisors meet weekly to review progress, identify concerns, and coordinate corrective actions. Shared awareness of performance improves training consistency.
Training Log	Staff maintains an Independent Inspection Field Training Log documenting field activity and establishment types.
Quality Assurance Evaluations Field	Newly authorized staff undergo multiple QA evaluations using the NC Quality Assurance Field Assessment Marking Instructions.
Quality Assurance Evaluations File	Newly authorized staff undergo multiple QA evaluations using the Mecklenburg County Assessment and Marking Instructions.
Training 2.0 Checklist	Confirms completion of all training components, knowledge checks, equipment needs, Meck Talent courses, and workplan signatures. Ensures readiness for movement to the permanent team.

Conclusion

Together, the Training 1.0 and Training 2.0 teams create a comprehensive, intentional, and highly effective development pathway for new Environmental Health Specialists. Each team plays a distinct but complementary role—Training 1.0 builds the foundation of technical knowledge and inspection skills, while Training 2.0 strengthens independence, judgment, and territory management. By working in tandem, these teams ensure that staff are supported at every stage of their progression, exposed to consistent expectations, and guided by experienced trainers who model best practices in both classroom and field settings. This coordinated approach produces confident, capable, and policy-aligned professionals who are fully prepared to assume the responsibilities of independent regulatory work.

MECKLENBURG COUNTY
PUBLIC HEALTH

ENVIRONMENTAL HEALTH
Training 1.0 Intern Training Progression

PURPOSE: The Training Progression Schedule is intended as a general guide for interns progressing toward Authorization. Training 1.0 Supervisor shall determine when interns progress to next steps of training based on feedback from Training Seniors, Feedback Forms and QA Forms. Subject to change based on proximity of hiring date to start of CIT and individual rate of progression through training stages.

TRAINING STAGE	APPROXIMATE TIME FRAME	ACTIVITIES
Observing	Date of hire through completion of CIT Food Module	Taking notes, asking questions during exit interview, reading .2600 rules, NC Food Code and Marking Instructions; beginning FDA ORAU pre-coursework (no more than 45 days from beginning of CIT Food Module)
Limited participation	Week 4-6	Menu review, performing small tasks (temperatures, TCS foods identification, testing sanitizer), discussing violations with Trainer
Co-Leading	After Tier IV Week 7-10	Assessing more temperatures, food processes, Employee Health, asking more probing questions; generating separate inspection report and receiving feedback from Feedback Form
CDP Training	Week 10-11	Querying permit conditions, looking up last inspection results, entering inspections and other data into database
Leading	After Supervisor QA 11 weeks through Authorization	Performing all above tasks and entering inspections into database under Trainer's REHS number; receiving QA of highest risk inspections from Training Seniors
Authorization	Week 20-24	Demonstrating ability to conduct independent inspections to State Regional

IN-CLASS TRAINING SUBJECTS FOR WARM-UP/WRAP-UP

WEEK	SUBJECT	CODE REFERENCES (Chapters Assigned Prior to Class)	RISK FACTOR(S)
1	Intro to Training 1.0/Food Code/Marking Instructions/Grade Sheet		ALL
2	Intro to Risk Based Inspections/PIC Duties	1-1, 1-2, 2-1, 2-2, 2-3, 2-4, 2-5	ALL
	Vector Control Overview		
	GWS Program Overview		Food from Unsafe Sources
	Plan Review Overview		ALL
	Communicable Disease Nurse/Epi Overview		Poor Personal Hygiene
	CIT General Module (Virtual)		
3	TCS vs NonTCS/Menu Review/Approved Sources	1-2, 3-201	Food From Unsafe Sources, Improper Holding Temperatures
	CIT Food Module (Virtual)		ALL
4	Quick Walkthrough (CCRR)/Static vs Dynamic)	Annex 5	ALL

IN-CLASS TRAINING SUBJECTS FOR WARM-UP/WRAP-UP

WEEK	SUBJECT	CODE REFERENCES (Chapters Assigned Prior to Class)	RISK FACTOR(S)
5	Cooking vs Reheating vs Hot Holding	3-401.11, 3-401.12, 3-401.13, 3-401.14, 3-403.11, 3-501.16(A)(1)	Inadequate Cooking Temperatures, Improper Holding Temperatures
6	Cooling vs Cold Holding	3-501.14, 3-501.15, 3-501.16 (A)(2), (B, C),	Improper Holding Temperatures
7	WEEK 1-6 REVIEW/Date Marking/TPHC	3-501.17, 3-501.18, 3-501.19	Improper Holding Temperatures
8	Consumer Advisory/Parasite Destruction/Shellstock	3-201.15, 3-502.11 (E), 3-603.11, 3-402.11 & 3-402.12, 3-203.12, 3.201.14	Approved Source/Inadequate Cooking Temperatures
	Write-Ups for Packet		
9	Specialized Processes/Conditions/Adulterated Food		Improper Holding Temperatures
11	Plan Review and Permitting/ Physical Facilities		ALL
12	Institutions/ HIghly Susceptible Population/Congregate Nutrition		Poor Personal Hygiene
10	Microbiology		ALL
13	Cleaning Frequency/Wash, Rinse Sanitize & Food Contact Surfaces		Contaminated Equipment and Cross Contamination

IN-CLASS TRAINING SUBJECTS FOR WARM-UP/WRAP-UP

WEEK	SUBJECT	CODE REFERENCES (Chapters Assigned Prior to Class)	RISK FACTOR(S)
	CDP Training		
14	Shared Kitchens - MFU/ Push Cart/ Catering		
15	WEEK 7-14 REVIEW/ Teachback Topics Assigned/LFSEs, Food Stands		ALL
16	Plumbing/Wells/ Wastewater/Water Sample/Migrant Housing		Food from Unsafe Sources
17	Teachbacks/Foodborne Illness Investigation Exercise		Poop Personal Hygiene
18	Practice Hints, Tips, Online Resources/Week 1-16 Review		ALL
19	Q&A for Authorization/ Risk Factors Review		ALL
20	Authorization Test Study/Final Packet Review		ALL

Authorized Staff Required Classroom Training Sessions

1. Introduction / Chapter Intro to Food Code (Chapters 1&2), Preface, Annex 3 &5
2. Equipment, Utensils, Linens/ Cleaning Frequencies Cooking / Reheating / Hot Holding
3. Cooling / Cold holding Date Marking/TCS and Non-TCS
4. TPHC/CA/HSP/Specialized Processes/Menu Review
5. Parasite Destruction / Sources / Shellstock
6. FBI Outbreak Exercise

SUGGESTED FACILITIES LIST

PURPOSE: This list is provided to ensure Environmental Health Specialists are trained to recognize and address risks associated with a variety of facilities and processes prior to Authorization. Refer to the Pre-CIT Checklist and Authorization Packet for a comprehensive list of requirements to obtain the Food, Lodging and Institutions Authorization.

FOOD FACILITIES

Asian buffet
Bar
Caterer
Cheese shop
Coffee shop
Deli
Ethnic meat market
Fast food
Full-service bar and grill
Full-service restaurant
Gourmet grocery
Grocery deli
Hotel breakfast
Independent restaurant
Independent sandwich shop
Indian
Korean
Latin American
Meat market
Middle Eastern
Mobile Food Unit
Pushcart
School lunchroom
Seafood Market
Specialized processes (ROP/Cook-Chill/Sous Vide/Fermentation/Curing/Molluscan Tanks/Sprouting/Smoking)
Sushi Rice using Time as a Public Health Control
Sushi Rice with a variance/HACCP
Temporary Food event
Vietnamese

INSTITUTION FACILITIES

Adult Day Care
After School Enrichment Program
Childcare center licensed for <30
Childcare center licensed for >30
Hospital
Lodging
Nursing home (Independent Living/Assisted Living/Memory Care)
Residential Care Facility
School building

Training 1.0 Checklist

Newly Hired Environmental Health Specialist

Employee Name	
Date Hired	
Date Attended General Module CIT	
Date Attended Food Module CIT	
Date Standard 2 prework started.	
Date standard 2 prework completed.	
Date Transferred to Training 2.0	
Date 25 Joint Inspections Completed	

Attachment A

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

PURPOSE: This checklist shall document training sessions for each Environmental Health Specialist Intern or Experienced Environmental Health Specialist progressing through the training system at Mecklenburg County Public Health Environmental Health Division. Any comments shall reflect opportunities for improvement. The expected outcome for completion of these training modules is State Authorization, alignment with risk-based inspection protocols and a well-trained staff.

Warm-Up and Wrap-Up Topics		
Week and Topic	**Training Method**	**Comments**
1. Tools for an EHS a. NC Food Code Manual i. History ii. Purpose iii. Definitions iv. Annex 3 and 5 b. Marking Instructions i. Contents ii. Exemptions c. Food Code Chapters 1 & 2 d. Scavenger Hunt	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
2. Food Code Review a. Quick Walkthrough Info b. Menu Review c. Chapter 3 i. Cooking ii. Reheating iii. Hot holding d. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
3. Food Code Review a. Chapter 3 i. Cooling ii. Cold Holding b. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

4. Food Code Review a. Chapter 3 i. TCS vs. Non-TCS ii. Date Marking iii. Consumer Advisory b. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
5. Food Code Review a. Chapter 3 i. Time as a Public Health Control ii. Specialized Processes iii. Parasite Destruction b. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
6. Food Code Review a. Chapter 3 i. Adulterated Food ii. Approved Sources iii. Shellstock iv. Highly Susceptible Population b. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
7. Food Microbiology a. Microorganisms of Concern b. Risks Associated with Food Microorganisms c. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

Attachment A

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

Objectives	Training Method	Comments
8. Food Code Review – Chapter 4 a. Cleaning Frequency b. Washing, Rinsing, Sanitizing c. Food Contact Surfaces d. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
9. INSTITUTIONS PRESENTATION a. Lodging b. Hospitals c. Nursing Homes d. School Building e. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
10. Food Code Review - Chapter 5 a. Plumbing b. Physical Facilities c. MOBILE FOOD UNIT (MFU) PRESENTATION d. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
11. PLAN REVIEW PRESENTATION a. Chapter 6 – Physical Facilities b. Chapter 7 – Poisonous or Toxic Materials c. Chapter 8 – Compliance and Enforcement d. Review	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

12. TEACHBACKS AND FOODBORNE ILLNESS OUTBREAK EXERCISE	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
13. Practice Inspections a. Helpful Hints b. Communication Tips c. Online Resources	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

Attachment A

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

Leading Role in an Inspection		
Objectives	**Training Method**	**Comments**
1. Expectations for Full-Time Environmental Health Specialist Interns to include: • Call-in, Calendar, and Email Etiquette • Team Days • Meeting Expectations • Chain of Command	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
2. Workday Expectations	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
3. Review and Navigation of Useful Sites	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	
4. Quality Assurance Review a. Field and File Per Policy b. Weekly File Review c. Permitting QA	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

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Training 1.0 Checklist – Newly Hired Environmental Health Specialist

Senior Completed Work

	Date	Comment
Verify an inspection can be entered all the way on their device		
Verify all equipment and supplies are available pre-authorization		
Packet Complete		
Transfer inspection log to 2.0		

Supervisor Completed Work

	Date	Comment
Workplan Review and Signature		
Tier IV Training with State Regional		
Completion of Training Courses		
Field Review		

Attachment A

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

Supervisor Comments

Training Senior Comments

Attachment A

Training 1.0 Checklist – Newly Hired Environmental Health Specialist

Environmental Health Specialist Signature	Date
Senior Advisor Signature	Date
Supervisor Signature	Date
Program Manager Signature	Date

Training 2.0 Schedule

Type	Topic(s)
Meeting	Welcome Meeting EHF01 Facility Inspections EHF10 – Dress Code
Meeting	Technology and Dashboard OnBase
Training	Service Request and Status Codes EHF02 Complaint and Service Request Response
Training	Enforcement Actions *Risk Control Template Update EHF06 Enforcement Actions
Training	Transitional Permitting OnBase – Electronic Filing System
Training	Foodborne Illness Application EHF07 FBI Investigation

Training	LFSE's and Illegal Operations NOV Documentation Recaps (Wayground) Travel and Reimbursements
Training	Risk-Based Inspections QA Activity *Risk Category Assessment EH08 - Quality Assurance
Training	TFE Experience EHF10 – Dress Code
Training	Specialized Processes – Application HACCP Plan Review Activity
Training	**Plan Review and Permitting / Pools Intro** Service Request and FBI Recap Accreditation / REHS Requirements for NC EHF 05 Training for Food Service Workers
Training	FDA Retail Program Standards
Recap Meeting	Review of Topics – Final Team Meeting Emergency and TFE Rotation EHF03 After Hours Response

Training 2.0 Checklist

Registered Environmental Health Specialist

Name:	
Date Hired:	
Date Authorized:	
Date Transfer to Training 2.0:	
Date Transfer to Supervisor:	

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Completed Work at a Glance	
	Comment
Quality Assurance	
Additional Quality Assurance	
Temporary Food Events	
Limited Food Service	
Illegal Food Operations	
Foodborne Illness	
Transitional Permitting	

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Service Request	
Status Codes	
Enforcement Actions	
Dashboard and Territory Management	
EHF-01 Compliance	

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Supervisor Completed Work		
	Date	**Comment**
Workplan Review and Signature		
Completion of Training Courses and Meck EDUs		
Accreditation Files (to include) • **EHDITS** • **Up to Date File (Electronic and Paper)**		
Environmental Health Regional Specialist 6 Month Follow Up (if applicable)		
Standardization Pre and Post Coursework		
Swimming Pool Authorization Request (if applicable)		
Vehicle Number and GPS Info		
Purchases (EHF10)		

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Supervisor Comments:

_____ _____

Environmental Health Specialist Signature Date

_____ _____

Supervisor Signature Date

_____ _____

Manager Signature Date

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Detailed Training Information		
Division Expectations		
Objectives	**Training Method**	**Comments**
1. Health Department and Division Policy Review	☐ In-Field ☒ Team Training ☐ One-on-One	Heavily discussed location of policies on MeckWeb and other locations. Required policy review for accreditation completed. Policies are discussed during team meetings. Policies are also reviewed as needed when various situations arise. Policies reviewed during team meetings include: • EHF01 – Facility Inspections • EHF02 – Compliant and Service Request • EHF03 – After Hours Response • EHF 05 – Training for Food Service Workers • EHF06 – Enforcement Actions • EHF07 – Foodborne Illness Investigations • EHF08 – Quality Assurance • EHF10 – FFS Dress Code • EHA08 – Communication Policy • EHA03 - Environmental Specialist Educational Qualifications and Authorization • Attendance (per FMLA training for managers course)
2. Authorizations Expectations a. RSTAS b. REHS Expectations c. Other authorizations	☐ In-Field ☒ Team Training ☐ One-on-One	Expectations for pool and childcare authorizations were discussed. The ability to gain other authorizations was also discussed as an opportunity under an IDP. Expectations of being a REHS to include: 1. NEHA and NCREHS Board examination within 3 years of registration 2. Law Course with 4 years 3. 15 Hours of Continuing Education – Yearly

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Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

3. Continuing Education and Online Training Expectations	☐ In-Field ☒ Team Training ☐ One-on-One	Discussed expectations on continuing education. Staff were reminded to look on listserv for opportunities for training to include West Piedmont, SOP courses, and online opportunities. A full list of courses can be found on the NCREHS website.
4. Vehicle Expectations and GPS Monitoring	☐ In-Field ☒ Team Training ☐ One-on-One	Reviewed the take-home vehicle use policy. Preventative maintenance discussed to include how to go about getting a spare vehicle and the fleet number. The fleet number should be used in situations such as needing a tow. Also discussed the use of Auto bell and expectation that vehicle should be maintained and cleaned. Accident expectations are to call supervisor, no matter how minor. Detailed discussion on process will occur then. GPS discussion on speeding and activities check through a breadcrumb report. Staff are aware that this can occur at any time which requires accurate documentation.
5. Travel Expectations	☐ In-Field ☒ Team Training ☒ One-on-One	Reviewed policy and expectations with • 1: Day Travel • 2: Out of Town/Overnight Travel. Discussed travel P-Cards and expectations if those are used.
6. Reimbursements a. Mileage b. Shoe/Lab Coat	☐ In-Field ☒ Team Training ☒ One-on-One	Reviewed mileage and work shoe reimbursement documentation and expectations.
7. Accreditation Expectation	☐ In-Field ☒ Team Training ☒ One-on-One	Accreditation documents were required to be completed by MM. All staff received notice and discussion on expectations of completion of all documentation.

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Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Detailed Training Information		
Team Training Topics		
Objectives	**Training Method**	**Comments**
1. Risked-Based Inspections Overview and Expectations	☒ In-Field ☒ Team Training ☒ One-on-One	Risked based inspections concepts are reviewed on a routine basis though team meetings, one on ones, files reviews, etc. Team was provided with an overview and recap of risked based concepts to provide a refresher and reminder of expectations.
2. FDA Voluntary Retail Food Standards	☐ In-Field ☒ Team Training ☐ One-on-One	This presentation discusses the Retail Program Standards as a whole. The topics included: 1. What are the Retail Food Standards and County Expectations? 2. An overview of all 9 standard 3. The role of an EHS in the standards 4. Standard 2: Standardization – Review of documents and expectations
3. Temporary Food Events – Application	☒ In-Field ☒ Team Training ☒ One-on-One	The topics were discussed during training include: • All staff added the TFE calendar and reviewed the color-coded events • Reviewed the type of information that will be located on calendars. • Reviewed in detail the TFE packet processing starting with the Plan Examiners to when a TFE is assigned. • Expectations on volunteering for TFEs were also discussed • Reviewing importance of reaching out to Vendor to determine if any changes were made to the menu, time for permitting confirmation, and other key factors • Reviewed checklist for TFE vendors • TFE set ups • Processing after permitting • Exemption at TFEs

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Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

4. Limited Food Service Establishments	☐ In-Field ☒ Team Training ☐ One-on-One	Limited Food Service Establishment training included: • Reviewed definition and how to identify LFSEs • Discussed requirements and specific rules • Reviewed .2674 in detail and how to apply in the field • Reviewed service request expectations
5. Illegal Food Operations – Application	☒ In-Field ☒ Team Training ☐ One-on-One	Training included: Reviewed in detail about how to handle illegal operations per policy. 1. Different types of illegal operations 2. What makes an illegal operation? 3. What NOVs are? 4. How to update SRs properly and when to close out request.
6. Foodborne Illness – Review and Application	☒ In-Field ☒ Team Training ☒ One-on-One	Policy was reviewed with expectations and guidance on how to conduct a foodborne illness complaint. A hands-on activity was created and implemented that included: • Reviewed green sheet and process of receiving the form • Reviewed process after receiving green sheet • Supervisor is contacted and can provide additional information if needed to EHS staff • Contact CD nurse for additional information • Food history form • Obtaining detailed background information on the facility • Specific situations to review risk factors • Reviewed write up requirements and proper etiquette for public document write ups. Supervisor should review documentation if needed. • Reviewed final steps to provide a copy of investigation to the CD nurse and properly update service request when no further action is needed.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

7. Transitional Permits – Application	☒ In-Field ☒ Team Training ☒ One-on-One	Reviewed: How to respond to a track transitional service request that was transferred from another team. Reviewed that every change of ownership does not equate a transitional permit. An EHS can run into several different scenarios when a change of ownership occurs such as: A true transitional permit (T), a new permit (I) (no noncompliant items), or plan review required (extensive menu/equipment changes). Reviewed in detail: • Utilizing Polaris (obtaining lat. & long., parcel and e-grid information) • Secretary of state website • Reviewed H-status and imputing proper information into CDP post permit (E-grid and hours of operation) • Reviewed permit conditions • How to properly obtain permit ID numbers (Difference between food stand and restaurant to include permit conditions) • Explained expectations of documentation to be submitted to supervisor in a timely manner • Reviewed the required status codes changes Reviewed supporting documentation provided by supervisor that provides the complete checklist of all required items for a complete transitional package. Reviewed track transitional process and expectations for follow up. • How to create a service request and how to update it • Unannounced initial inspection required 14 to 30 days after permit issuance • Transitional checks shall occur quarterly, one week before expiration of transitional and the day after expiration. These visits may occur in conjunction with inspection. • Need to check on facilities more often as they get closer to their final dates Additional transitional items discussed: • When to take off for CFPM • Point deductions for non-compliant items

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

8. Service Request – Application	☒ In-Field ☒ Team Training ☒ One-on-One	Reviewed: • The service request policy to include expectations on completion of request and the appendices that discuss how to complete a service request. • Discussed response time for all types of service request • Activity codes that shall be used when adding activities and updating a service request. This includes proper time monitoring to ensure double dipping of time does not occur. • Requirements to contact complainant as necessary per the request.
9. Status Codes – Review and Application	☐ In-Field ☒ Team Training ☒ One-on-One	Ongoing discussion of status codes for the following: • D Status – Intent to suspend and suspended permits process and expectations • D-status checks maintained in service request, new interpretation from NCDHHS may need to be revisited for staff moving forward. • M status – Activities should not be conducted. Address should be verified, updated in IMS, and once completed information must be sent to Tony/Supervisor to properly update the M status. • C Status – Quarterly visits are required • H status – as it applies to transitionals • T, U, K, A – as it applies to transitionals • J status requirements - review of proper documentation when placing an establishment on J status and sending documentation via USPS. • Discussion around any status change that affects a permit status and the requirements to mail paperwork per policy.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

10. Enforcement Actions – When and How	☐ In-Field ☒ Team Training ☒ One-on-One	The following areas have been reviewed/implemented: • Proper escalation of points regardless of risk • Verification visits to gain long-term compliance • Risk Control Plan – How to utilize, expectations EHS to follow risk control plan, and what to do if RCP isn't followed or maintained. Additional discussion on expectations moving forward. At this time if RCPs are establishment they should be uploaded onto CDP. • Voluntary Closure – expectations if allowed • ITS/IS – All staff have received a document that describes how to complete an ITS and an IS. o Reviewed EHF-06 o Supervisor must be looped in before permit action o When to use permit action o Documentation and importance of facility receiving their appeals rights. Reviewed with staff maintaining their territory and asking the proper questions if facilities that appear to require a permit are not listed in CDP. EHS discussed proper communication and tools to use if something like this occurs in their territory.
11. Plan Review and Permitting	☐ In-Field ☒ Team Training ☐ One-on-One	Met with plan review and permitting to discuss various topics. Discussion surrounding permit condition changes, equipment changes, and how to handle these items. • Referred them to the Code Information and Resource Center (CIRC) formally CTAC. 980-314-CODE. • Reviewed which senior belongs to their territory.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

12. Specialized Processes – Application	☐ In-Field ☒ Team Training ☒ One-on-One	Discussion focused on expectations of assessing specialized processes in the field specifically when assessing acidification of rice. The topics included: 1. Where to find the variance/HACCP plan on the OneDrive 2. Review plan prior to inspection 3. Understand critical control points and critical limits 4. Onsite verification of plan by calibration of pH meter, testing of rice, and review of logs 5. How to mark 29 and 32 6. Marking expectation for Variances issued by the state that *are not* a specialized process. (ex. pizza sauces, date marking extension) 7. Discussed state vs. local plan approval process 8. Discussed approved processes using the code
13. Recap Meeting a. Emergency Call	☐ In-Field ☒ Team Training ☐ One-on-One	Fire call discussion included: 1. SharePoint site review for dates on call 2. Review of EH-03 After Hours Response and expectations 3. Review of what to do when a call is received 4. Expectations of when on call - focused on availability 5. Service request expectations and follow up 6. Supervisor availability Additional topics discussed as an open Q&A session.

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Detailed Training Information		
Managing a Territory		
Objectives	**Training Method**	**Comments**
1. Expectations for Full-Time Environmental Health Specialist to include: • Call-in, Calendar, and Email Etiquette • Team Days • Meeting Expectations • Chain of Command	☐ In-Field ☒ Team Training ☐ One-on-One	Expectations are discussed during first meeting. PowerPoint presentation used to review items listed. Further discussions on the topics listed were completed through one on ones or team meetings. Continuous reminders as needed for the entire team or individually as needed.
2. Review of Workplan Expectations	☐ In-Field ☒ Team Training ☒ One-on-One	Reviewed and discussed workplan on both dates. Workplan mirrors FFS EHS workplan to build consistency. Staff are required to strive to obtain an average of 35 to 40.
3. Workday Expectations	☐ In-Field ☒ Team Training ☒ One-on-One	Workday Expectations were discussed during onboarding presentation and then are followed up as needed during one on ones. Discussed what a full workday should look like per updated policy. Prioritizing a workday is discussed as items come up per EHS. For example, if an FBI comes in staff are made aware that this item is the priority for that day. Staff are required to CC supervisor in every inspection email.

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Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

4. Review and Navigation of Useful Sites	☐ In-Field ☒ Team Training ☐ One-on-One	Reviewed in detail the following useful sites: • NCDHHS – For posted variances and position statements • OneDrive – For posted variance/HACCP plans, Permits_New, decision registries, NOV tracking, and extended day • SharePoint – Fire call list, meeting minutes, and Good Works • Training Supporting Documents – Contains a wealth of helpful documents that will assist in various areas such as transitional permits, permit actions, and other areas. • Polaris and Secretary of State • MeckWeb – Policy review Training is accomplished in virtual style for all documents. Staff are expected to pin these websites to their computers and utilize as needed. Sites are then reviewed periodically as needed as they connect to various topics.
5. Understanding Reporting Tools a. BI Dashboard	☐ In-Field ☒ Team Training ☒ One-on-One	Detailed review of the following items: • Detailed review of the dashboard and ongoing expectations (provided time for any questions post dashboard training) o Completed Dashboard training per Tony Lopez • Dashboard review of J status o Proper maintenance of C-status and making proper visits to facilities under a transitional permit • Dashboard review of T status/I Status • Triple System and priorities based on dashboard It is expected that staff check their reports on dashboard during office hours. Staff were made aware of this and reminding during team meetings and trainings. Priorities are reviewed as per FFS updates to ensure the team works on divisional needs as well.
6. Activity Code Review and Application	☐ In-Field ☒ Team Training ☒ One-on-One	Reviewed activity codes and discussed expectations on how much time should be allotted per day for in-field and office. Provided activity code list that was completed by Stephen Graham.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

7. Planning your Day a. Prioritizing	☐ In-Field ☒ Team Training ☒ One-on-One	Planning days are a continuous discussion during team meetings and one on ones. Through supervisor oversight, employees are encouraged to plan their day in the most effective manner based on priorities that are discussed during every meeting. Thorough discussion on expectation to manage their dashboard daily, if possible, to include priority list, verifications, and other reporting tools. Weekly activity code checks are made with each EHS to ensure that a full workday is completed. Review of policy to ensure clear understanding.
8. Workload Based on Division Priorities a. Vacant Territories	☐ In-Field ☒ Team Training ☒ One-on-One	Priorities from Food and Facilities and division are distributed to all staff as they pertain to workload. All staff are aware of the priority system and how necessary it is to ensure compliance. Staff have also been exposed to working in vacant territories and assisting teammates to meet division priorities.
9. Quality Assurance Review a. Field and File Per Policy b. Weekly File Review c. Permitting QA	☐ In-Field ☒ Team Training ☒ One-on-One	As part of the training team quality assurance, staff receive additional file review. This file review is like the formal file review with an additional layer of discussion and follow up. File reviews was completed with comments discussed during one-on-one check ins as needed. File review discussions are maintained on file if requested. Staff also receive permitting quality assurance for every permit issued. All QA is maintained on file. Quality assurance required per policy is properly submitted in the quality assurance portal on CDP IMS.

Program Standard #2

APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

All certificates or course transcripts must be turned into to Training 2.0 SR EHS or Supervisor

Name: _____ **Date of Completion (Pre):** _____

Pre-requisite ("Pre") curriculum courses

(To be completed during the 25 joint inspection period AND prior to conducting any leading independent inspections)

PUBLIC HEALTH PRINCIPLES				
	Date of Completion	*Courses*	*Course Number*	*Location*
		1. Introduction to Public Health Principles	CC8026W (450)	*FDA ORA LearnED*

MICROBIOLOGY:				
	Date of Completion	*Course*	*Course Number*	*Location*
		1. Biological Hazards	CC8028W (90)	*FDA ORA LearnED*
		2. Control by Thermal Processing	CC9013W (90)	*FDA ORA LearnED*
		3. Pasteurization	CC8002W (105)	*FDA ORA LearnED*
		4. Sampling	CC8035W (120)	*FDA ORA LearnED*
		5. Sanitation Practices	CC8032W (210)	*FDA ORA LearnED*
		6. Environmental Hazards	CC8024W (120)	*FDA ORA LearnED*

	PREVAILING STATUTES, REGULATIONS, ORDINANCES			
	Date of Completion	*Course*	*Course Number*	*Location*
		1. Laws, Regulations, Policies, and Procedures	CC8039W (120)	*FDA ORA LearnED*
		2. Basics of Inspection: Beginning an Inspection	CC9037W (90)	*FDA ORA LearnED*
		3. Basics of Inspection: Issues & Observations	CC9038 (90)	*FDA ORA LearnED*
		4. Food Defense	CC8027W (90)	*FDA ORA LearnED*
		5. Plumbing Controls for Commercial food Establishment	CC8001W (All modules) (180)	*FDA ORA LearnED*
		6. Jurisdiction	CC8037W (150)	*FDA ORA LearnED*
		7. Introduction to Pest Control	CC8044W (180)	*FDA ORA LearnED*
		8. FDA Food Code	FD112W100 Curriculum: Food Code	*FDA ORA LearnED*

COMMUNICATION SKILLS				
	Date of Completion	*Course*	*Course Number*	*Location*
		1. Communication Skills for Regulators	CC8030W (60)	*FDA ORA LearnED*
		2. Professionalism	CC8025W (150)	*FDA ORA LearnED*

Last edit: 11/17/25

Program Standard #2

APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

All certificates or course transcripts must be turned into to Training 2.0 SR EHS or Supervisor

Name: _____ **Date of Completion (Post):** _____

Curriculum ("Post") courses

(To be completed by the conclusion of Training 2.0 or otherwise decided)

	MICROBIOLOGY:			
	Date of Completion	*Course*	*Course Number*	*Location*
		Technology-Based Food Processes	CC9016W (120)	*FDA ORALearnED*

	HACCP:			
	Date of Completion	*Course*	*Course Number*	*Location*
		HACCP	CC8033W (120)	*FDA ORALearnED*

	ALLERGEN MANAGEMENT			
	Date of Completion	*Course*	*Course Number*	*Location*
		Allergens	CC8029W (90)	*FDA ORALearnED*

	EPIDEMIOLOGY: Foodborne Illness Investigations (series):			
	Date of Completion	*Course*	*Course Number*	*Location*
		Foodborne Illness Investigations	FD9035W (All modules) (480)	*FDA ORALearnED*

	PUBLIC HEALTH PRINCIPLES			
	Date of Completion	*Course*	*Course Number*	*Location*
		Integrated Food Safety System	CC8018W (120)	*FDA ORALearnED*

	PREVAILING STATUTE, REGULATIONS, ORDINANCES			
	Date of Completion	*Course*	*Course Number*	*Location*
		1. Transportation	CC8036W (90)	*FDA ORALearnED*
		2. Labeling	CC8038W (90)	*FDA ORALearnED*
		3. Recalls	CC8041W (135)	*FDA ORALearnED*
		4. Traceability	CC8042W (60)	*FDA ORALearnED*

	EMERGENCY MANAGEMENT:			
	Date of Completion	*Course*	*Course Number*	*Location*
		1. Introduction to Incident Command System	IS-100.C, Introduction to Incident Command System, (180)	*FEMA Emergency Management*
		2. Basic Incident Command System for Initial Response	IS-200.C, ICS for Single Resources and Initial Action Incidents, (180)	
		3. An Introduction to NIMS	IS-700.B, NIMS an Introduction, (180)	
		4. National Response Framework	IS-800.B, NIMS an Introduction, (180)	

FDA U.S. FOOD & DRUG ADMINISTRATION

Human Foods Program

January 26, 2026

Amber Daniels
Environmental Health Manager
Mecklenburg County Public Health
3205 Freedom Dr #8000, Charlotte, NC 28208

Amber.Daniels@mecklenburgcountync.gov

Subject: FDA Standardized Retail Food Safety Inspection Officer

Dear Ms. Daniels:

The Food and Drug Administration's (FDA) Office of Retail Food Protection plays an important role in consumer health protection. Our staff is committed to providing maximum consumer protection by integrating top quality, science-based activities with creative and effective leveraging of all available resources. Standardization of state and local personnel relative to the interpretation and application of the FDA Food Code is vital to this effort. FDA's *Procedures for the Standardization of Retail Food Safety Inspection Officers* set forth the current requirements for standardization.

Recently, Wendy Bell, a member of your staff completed the field standardization exercise requirements for FDA Standardization of Retail Food Safety Inspection Officers. Ms. Bell successfully demonstrated to Michael Touhey, FDA Retail Food Specialist, the ability to interpret and apply the knowledge of the 2022 FDA *Food Code* and HACCP principles at retail; assess methods of controlling foodborne illness risk factors during retail food inspections; and utilize sound risk-based inspection techniques.

Ms. Bell's FDA Standardized Retail Food Safety Inspection Officer certificate is enclosed. The certificate is valid for a maximum of three years unless withdrawn by FDA for just cause. To maintain good standing as an FDA Standardized Retail Food Safety Inspection Officer, Ms. Bell shall attend the FDA Annual Retail Food Protection Seminar; standardize at least five other employees annually; conduct five risk control plans or training courses, in any combination related to the retail program; and obtain 20 hours of continuing education within 36 months of initial standardization or re-standardization. The documentation of Ms. Bell's maintenance of the items mentioned above should be submitted to Michael Touhey annually.

The period of standardization for Ms. Bell runs from January 23, 2026 to January 23, 2029. Please extend our congratulations to Ms. Bell as an FDA Standardized Retail Food Safety Inspection Officer.

We thank you for your continued support of FDA's Office of Retail Food Protection and your efforts to assure the service of safe foods to consumers in the state of Florida.

Sincerely,

Elizabeth A. O'Malley

Elizabeth O'Malley
FDA Retail Food Protection Branch Director

U.S. Department of Health and Human Services
Public Health Service
Food and Drug Administration

Wendy Bell

has satisfactorily demonstrated competence to interpret and apply the provisions of the Food Code and is hereby entitled to inclusion in the list published by the Food and Drug Administration as an

FDA Standardized Retail Food Safety Inspection Officer

Michael Touhey
FDA Retail Food Specialist

Elizabeth O'Malley
FDA Retail Food Protection Branch Director

U.S. FOOD & DRUG ADMINISTRATION
Human Foods Program

Date of Issuance: 1/23/2026
Date of Expiration: 1/23/2029

U.S. Department of Health and Human Services
Public Health Service
Food and Drug Administration

Matt Muris

has satisfactorily demonstrated competence to interpret and apply the provisions of the Food Code and is hereby entitled to inclusion in the list published by the Food and Drug Administration as an

FDA Standardized Retail Food Safety Inspection Officer

Michael Touhey
FDA Retail Food Specialist

Elizabeth O'Malley
FDA Retail Food Protection Branch Director

FDA U.S. FOOD & DRUG ADMINISTRATION
OFFICE OF REGULATORY AFFAIRS
OFFICE OF STATE COOPERATIVE PROGRAMS

Date of Issuance: 4/30/2025
Date of Expiration: 4/30/2028

U.S. Department of Health and Human Services
Public Health Service
Food and Drug Administration

Stephen Graham

has satisfactorily demonstrated competence to interpret and apply the provisions of the Food Code and is hereby entitled to inclusion in the list published by the Food and Drug Administration as an

FDA Standardized Retail Food Safety Inspection Officer

Carolyn White
FDA Retail Food Specialist

FDA U.S. FOOD & DRUG ADMINISTRATION
OFFICE OF REGULATORY AFFAIRS
OSCP DIVISION OF RETAIL FOOD PROTECTION

Elizabeth A. O'Malley

Elizabeth O'Malley
FDA Retail Food Protection Branch
Director

Date of Issuance: 9/19/2024
Date of Expiration: 9/19/2027

Mecklenburg County Public Health
Environmental Health

Standard Operating Procedures for
Standard 2: Trained Regulatory Staff

Last Edit: 2/2026
Bell

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Purpose: The purpose of this Standard Operating Procedure is to bridge the gap between the requirements of Standard 2: Trained Regulatory Staff, the FDA Standardization Procedures Manual, and the Mecklenburg County Training and Standardization Process. Due to size, position descriptions, and leadership expectations, these additional resources and information are needed to ensure compliance with Standard 2.

This document contains county-specific procedures that correlate with the United States Food and Drug Administration (FDA) Voluntary National Retail Food Regulatory Program Standards (VNRFRPS), Conference for Food Protection (CFP) Training Manual, and the Standardization Procedures Manual.

These procedures are not intended to provide basic training to individual candidates. The candidate shall meet all the requirements of the Standard 2 procedures in order to be meet all requirements.

Overview of Standard 2

5-Step Required Procedures for Trained Regulatory Staff

STEP 1

- Completion of curriculum courses designated as "Pre" in Appendix B-1 prior to conducting joint and independent routine inspections.

STEP 2

- Completion of the following:
  - 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: Conference for Food Protection (CFP) Field Training Manual.

STEP 3

- Completion of the following:
  - 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.

STEP 5

- Completion of 20 contact hours of continuing food safety education every 36 months after the initial training is completed. (*Initial Training means completion of steps 1-4.)*

Delegation of Authority and North Carolina Registered Environmental Health Specialist Requirements

The North Carolina Department of Health and Human Services (NCDHHS), Environmental Health Section delegates authority to local jurisdictions to enforce state rules and laws. This is granted by the North Carolina General Statute 130A-4(b) and 15A NCAC 01O .010.

The natural progression of an Environmental Health Specialist in North Carolina begins as a Registered Environmental Health Specialist (REHS) Intern. The requirements of a REHS in the State of North Carolina begins with an individual completing an application to the North Carolina State Board of Environmental Health Specialist Examiners (Board) as an Environmental Health Specialist Intern. To qualify for consideration, an individual must have a 4-year bachelor's degree and have completed at least 30 college semester hours in the physical/biological sciences.

Once the individual is registered as an Environmental Health Specialist Intern, they must complete specified training, continuing education, and must achieve a passing score on a comprehensive exam. This exam includes National Environmental Health Association (NEHA) REHS exam, an oral interview conducted by board members, and a written essay. The NCREHS Exam is designed to ensure that Environmental Health Specialists are qualified, competent, and properly prepared to perform the duties and responsibilities of the position.

Training, Coursework, and Field Activities

In addition to the requirements stated above, an authorization process of education and training must be completed to ensure that the local agents of the state can satisfactorily enforce state rules and laws. The training provided to each Registered Environmental Health Specialist includes NCDHHS training and a two-tier training program at the county level.

NCDHHS Training Process

Delegation Process (checklist found in (*Appendix A*):

1) Tier I – Pre-Centralized Intern Training (CIT) work:
   a) Local Health Department Food Protection and Facilities Orientation Checklist
   b) Distance learning requirements
2) CIT Training: Successful completion of all the centralized intern training courses provided on this site
   a) Tier II – General Module
   b) Tier III – Food, Lodging, and Institution Module
3) Tier IV – Completion of one in-field inspection with a Regional Environmental Health Specialist
4) Authorization Process (ability to conduct independent inspections):
   a) A passing grade on the specific test for each authorization area.
   b) Field Assessment by a Regional Specialist.

Mecklenburg County Training Process

In conjunction with the training requirements set by NCDHHS, Mecklenburg County created an internal training process that consist of a two-tier approach. In Mecklenburg County the training is provided by a core group of calibrated Senior Environmental Health Specialists and two Environmental Health Supervisors. The trainers are also considered Mecklenburg County Standards and they assist with standardization and restandardization processes. Materials created within this training process align with *CFP: Field Training Manual* and are maintained and updated with the most current information. Completion of both tiers of training can take up to one year. The training process is summarized below with additional information in Mecklenburg County Internal OneDrive Files.

1. Training 1.0 – Training to Authorization (*Appendix B)*
    1. In-Classroom: Fifteen Week Training Program that includes:
        i. Microbiology
        ii. Food Code Chapters 1-8
        iii. Foodborne Illness Expectations
        iv. Risked-Based Inspection Approaches
        v. Scenario and Image Based Assessments
        vi. Teach Backs
    2. In-field training with dedicated standardized staff
    3. Each newly hired staff is provided with an advisor who follows the trainee throughout the training process by providing feedback and answering any specific questions
    4. Active file review during trainee-lead joint inspections
    5. Weekly training meetings to determine performance and areas for improvement
    6. Verification of Readiness for Authorization by: Checklist, Quality Assurance Forms, and internal discussion among training team

2. Training 2.0 – Training Post Authorization (*Appendix C*)
    1. In-Classroom: Fourteen Week Training Program that includes:
        i. Proper documentation utilizing internal systems
        ii. Application of long-term compliance tools and enforcement actions
        iii. Policy review, expectations, and effective inspection territory management
        iv. Foodborne illness and specialized process application
        v. Detailed Retail Program Standards training
        vi. Other job requirements such as permitting
    2. In-field training as necessary by training Senior EHS
    3. Continuous file and permitting review
    4. Clear and frequent communication to ensure consistency among staff

Training Requirements: Staff Trained Prior to Established Protocols

Due to enrollment period and experience, staff hired prior to July 1st, 2022, did not complete steps 1 – 4 in a sequential order. Staff that have been standardized have completed Steps 1 – 3 by completing the most up to date Mecklenburg County Affidavit (*Appendix D*)**.** This affidavit includes:

1. Pre and Post Curriculum – Staff have completed this requirement by providing proof of passing coursework provided in MCPH FDA Curriculum Appendix B-1 (*Appendix E*) or by a combination of training and education. The Training Officer has reviewed equivalency of comparable ORA U courses and verification of successful completion
2. 25 Joint inspections – Training records of 25 joints inspections have not been completed for any staff hired prior to July 1st, 2022. Proof of this training can be obtained by reviewing authorization requirements where at least 30 inspections are required prior to authorization (independent inspections).
3. 25 Independent Inspections – Training records of 25 independent inspections have not been completed for any staff hired prior to July 1st, 2022. Staff currently employed within the Retail Food Program obtain at least 25 food inspections within the assigned territory.

Training Requirements: Authorized or Fast-Tracked

Staff hired with an authorization from another county and staff that are fast-tracked according to NCDHHS guidance will undergo a different training track. Staff that come to Mecklenburg County with an authorization have already completed training requirements for joint inspections to obtain authorization but will still undergo training requirements as listed below:

1. Pre and Post Curriculum – If pre coursework was not completed in previous county and authorization was already achieved, staff will be required to take all coursework prior to completing Training 1.0 training requirements. Post curriculum coursework must be completed prior to completion of Training 2.0.
2. Joint Inspections – 25 joint inspections are required for previously authorized staff before independent inspections are allowed regardless of authorization status. The number of joint inspections may be reduced by the trainer and verified through written documentation that the EHS has demonstrated all performance elements and competencies to conduct independent inspection of retail food establishments.
3. Independent Inspections – Staff hired with a prior authorization can begin to log independent inspections after completion of Training 1.0.
4. 24 Month Requirement – Staff hired with a prior authorization will begin their 24-month requirement with hire date.

Training Requirements: Newly Hired Staff

All staff hired after July 1st, 2022, will be required to complete Steps 1 – 4 in sequential order. All requirements must be met within the 24-month period. Pre coursework will begin 45 days prior to CIT completion where possible. There may be special circumstances where 45 days may not be achievable to include hiring occurred near the CIT window, hiring occurred two months or more before the hiring window, or other circumstances. Regardless of start date all pre-coursework must be completed prior to independent inspections.

The Training 1.0 Supervisor is required to indicate date when courses begin and explain any outside factors that occur. Pre-coursework indicates the start of the 24-month period and must be documented accordingly.

Pre and Post Coursework Expectations

Newly hired staff must complete all pre and post curriculum. An affidavit will not be acceptable for staff hired after July 1st, 2022. Staff must be provided the curriculum during Training 1.0 and completion of coursework shall begin 45 days prior to completion of CIT. The expectation for staff is to complete the pre-coursework under supervision of Training 1.0 while post-course work will be completed in Training 2.0.

Joint Inspection Requirements

For newly hired staff requiring authorization, a minimum of 30 joint field training inspections are required as part of the NCDHHS process. Mecklenburg County Training 1.0 requires an additional number of inspections prior to completion of the training process. Each trainee is individually assessed to determine when trainee lead inspections can begin. Inspections that are trainee lead can be determined by reviewing the joint inspection log (*Appendix F*). These requirements exceed the expectations of Standard 2.

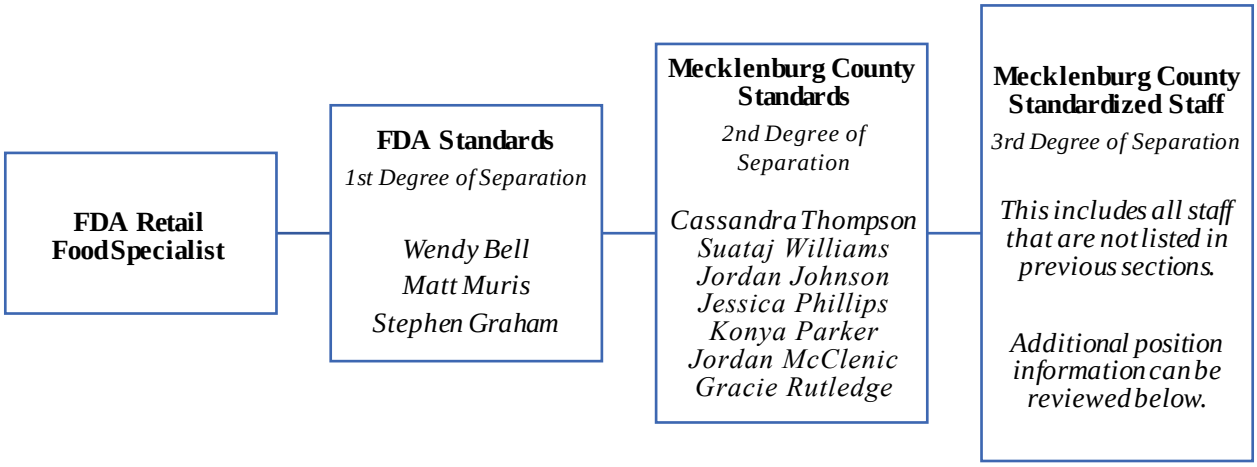
Independent Inspections Requirements

Independent inspections may begin when the EHS is assigned to Training 2.0. Inspections that are independently lead can be determined by reviewing the Independent Inspection Log (*Appendix G*). These independent inspections logs will be maintained in staff files starting on July 1, 2022.

Standard 2: Trained Regulatory Staff
Standard Operating Procedures
Standardization and Restandardization Procedures

Mecklenburg County strives to maintain all required standardizations and restandardizations of over fifty environmental health specialists. To complete this Mecklenburg County has three Training Officers Standardized by the FDA Using the FDA Standardization Procedures.

The FDA Standards participate in standardization and restandardization by either partially or fully completing all required inspections with the candidate. The intent behind this requirement is to allow for the FDA Standard to work with more staff while preventing overload of time. In addition, this process helps the standards remain calibrated with each other. All staff that participate in the process as a Standard are required to complete six joint exercises during restandardization while Standards that do not are only required to complete four. Below are the degrees of separation and overview of requirements of staff.



Position	Initial Standardization Inspections	Restandardization Inspections
FDA Standardized Staff *regardless of position*	8	6
Program Manager	8	4
Supervisor	8	6
Plans Examiner	8	4
Senior Environmental Health Specialist – Permitting	8	4
Senior Environmental Health Specialist – Training	8	6
Senior Environmental Health Specialist – Food	8	6
Senior Environmental Health Specialist – Childcare	8	4
Environmental Health Specialist	8	4

The Initial Standardization Process requirements include eight (8) field inspections, a Risk Control Plan (RCP), Process Flow Charts, and Verification of HACCP Plans, regardless of position. Examples of an RCP and process flow charts can be found in (*Appendix H*).

1. **Field Exercises:** Field exercises are to include eight (8) joint inspections of retail food establishments. Facilities selected for inspection must be comprised of high- and medium-risk facilities, to include one highly susceptible population (HSP) facility, and one facility with an existing HACCP plan.

Requirements	
Risk Category Requirements	• Facilities must be a category III or IV • HSP facilities can be a category I due to the NC exceptions. These HSP facilities remain complex in nature but require less inspection per year due to overlap in regulation.
Facility Type	• Candidates can choose from the following facility types: o Deli o Full-Service Restaurant o Fast Food Restaurant o HSP Kitchens – preferably an institution kitchen o Meat Markets – Only if processes include a method of cooking
HACCP Facility	• HACCP Plans can be reviewed in conjunction with an inspection but must meet all requirements of the HACCP section.

2. **Risk Control Plan:** An RCP is a concisely written management plan developed by the retail or food service operator with input from inspectors that describes a management system for controlling specific out-of-control foodborne illness risk factors. An RCP is intended to be a voluntary strategy that inspectors and the person in charge jointly develop to promote long-term compliance for specific out-of-control foodborne illness risk factors. (Annex 3, Section 1).

Requirements	
Requirements	• During at least one of the joint inspections, the Candidate will develop a mock Risk Control Plan with the person in Charge for a critical control point that is out of compliance. • In some circumstances, the Standard may require the RCP to be enforced at the facility for long term compliance.
Expectations	• RCPs must be created using the risk control plan in Shared OneDrive • RCP must be based on Risk Factors or Interventions • RCPs will be reviewed for completeness and accuracy

3. **HACCP Verification:** During the joint inspection of a facility with an existing HACCP plan, the Candidate will conduct a verification of the HACCP plan and complete the HACCP Plan Verification Worksheet and/or the Verification Summary. (Annex 4, Section 1 and 2). The candidate with little to no HACCP plan experience will be expected to complete the Summary and Worksheet forms as stated in the chart below. The use of the summary sheet alone should be limited to staff with field experience with HACCP Plans. When the worksheet is assigned, it should be reviewed, and feedback provided by the Standard completing the visit.

Candidate	Standard
EHS	Summary and Worksheet*
FFS Senior	Summary and Worksheet*
Permitting Senior	Summary and Worksheet*
Training Senior	Summary

**Note: The worksheet should be utilized with staff that do not receive significant exposure to HACCP plans.*

4. **Process Flow Charts:** During joint inspections, the Standard shall select a total of three food preparation processes for the Candidate to describe on a flow chart to include:
    1. Process 1 – "No Cook Step"
    2. Process 2 – "Same Day Service"
    3. Process 3 – "Complex Food Preparation"

The Candidate shall develop each flow chart using information gained through actual observations of operational steps during an inspection. Information gained through discussions with the person in charge and/or food employees should be used to substitute for a lack of actual observations, i.e. when operational steps in the process do not occur during the inspection.

On each flow chart, the Candidate shall identify the hazards, each Critical Control Point, and the Critical Limit. The Candidate shall indicate the Critical Limit as stated by the FDA Food Code and by the establishment. In addition, the Candidate shall also indicate to the Standard any Critical Control Points that the establishment did not control.

To satisfy this requirement, the three flow charts may contain no more than two errors or omissions. Candidates shall utilize the *Managing Food Safety: A Regulator's Manual for Applying HACCP Principles to Risk-based Retail and Food Service Inspections and Evaluating Voluntary Food Safety Management Systems* and Annex 3 for reference when developing the process flow charts.

Restandardization Procedures

The Restandardization Process requirements will vary by position due to the needs of the division. The process will include up to six (6) field inspections, a Risk Control Plan (RCP), and Verification of HACCP Plans.

1. **Field Exercises:** Field exercises are to include up to six (6) joint inspections of retail food establishments. Facilities selected for inspection must be comprised of high- and medium- risk facilities, to include one highly susceptible population facility, and one facility with an existing HACCP plan.

Requirements	
Risk Category Requirements	• Facilities must be a category III or IV • HSP facilities can a category I due to the NC exceptions. These HSP facilities are remain complex in nature but require less inspection per year due to overlap in regulation.
Facility Type	• Candidates can choose from the following facility types: o Deli o Full-Service Restaurant o Fast Food Restaurant o HSP Kitchens – preferably an institution kitchen o Meat Markets – Only if processes include a method of cooking
HACCP Facility	• HACCP Plans can be reviewed in conjunction with an inspection but must meet all requirements of the HACCP section.

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Requirements	
Requirements	• During at least one of the joint inspections, the Candidate will develop a mock Risk Control Plan with the person in Charge for a critical control point that is out of compliance. • In some circumstances, the Standard may require the RCP to be enforced at the facility for long term compliance.
Expectations	• RCPs must be created using the risk control plan in Shared OneDrive • RCP must be based on Risk Factors or Interventions • RCPs will be reviewed for completeness and accuracy

3. **HACCP Verification:** During the joint inspection of a facility with an existing HACCP plan, the Candidate will conduct a verification of the HACCP plan and complete the HACCP Plan Verification Worksheet and/or the Verification Summary. (Annex 4, Section 1 and 2). The candidate with little to no HACCP plan experience will be expected to complete the Summary and Worksheet forms as stated in the chart below. The use of the summary sheet alone should be limited to staff with field experience with HACCP Plans. When the worksheet is assigned, it should be reviewed, and feedback provided by the Standard completing the visit.

Candidate	Standard
EHS	Summary and Worksheet*
FFS Senior	Summary and Worksheet*
Permitting Senior	Summary and Worksheet*
Training Senior	Summary

**Note: The worksheet should be utilized with staff that do not receive significant exposure to HACCP plans.*

Performance Criteria

For staff standardized prior to July 1, 2022, records are approved by providing either a certificate or score sheets. Beginning on July 1, 2022, all standards are required to complete the Summary and Scoresheet (*Appendix I*) with each candidate. This form provides detailed instructions on how to complete the standardization or restandardization at a glance and provides details of facility names for inspections and assignments for homework exercises.

The Standard is also required to create a certificate for each candidate. The date indicated on the certificate shall be the last day of field work. Date of expiration should also be noted in the certificate. A copy of the summary, scoresheet, and certificate shall be submitted to the Training 2.0 Supervisor or SR. Environmental Health Specialist to check for completeness and accuracy. Copies are maintained in paper files. It is strongly suggested that each standard maintain their own records of each standardization completed.

If a Candidate fails to meet the required levels of agreement, the Standard shall notify their supervisor and the retail program standards lead. Once notified the retail program standards lead will notify the Program Manager to begin the process of a corrective action plan. The plan must be discussed and completed within 30 days of the last standardization inspection. Once the corrective action plan is completed the Candidate shall attempt to conduct standardization again with the Standard. Documentation of corrective action plan shall be noted in the candidate's file.

Feedback

Feedback is an important component of the standardization process. Feedback should be provided throughout the exercise. The Standard should provide feedback verbally but should also document feedback that may need attention by a supervisor or during future restandardizations. Feedback should be respectful and based on the FDA Procedures, FDA Food Code, and Marking Instructions. The Standard should utilize the Feedback Form and provide it along with the Summary and Scoresheet to maintain in the records (*Appendix J*).

Homework Expectations

Homework exercises are to be provided to the candidate within 48 hours of final inspection. Candidate should be given a period no longer than 30 days to complete exercises, unless otherwise approved by Retail Program Standards Lead. Once submitted, the Standard must review the exercises with the Candidate. It is recommended that the Standard and the Candidate maintain records of all submitted information.

As a reminder below are homework requirements based on:

1. **Standardization** – Risk Control Plan, Process Flow Charts, HACCP Verification (Summary and/or Worksheet), and verification of HACCP Principles.
2. **Restandardization** – Risk Control Plan and HACCP Verification (Summary and/or Worksheet)

Standard Expectation

In addition to all expectations listed in the FDA Standardization Procedures, the Standard must:

1. Submit required documentation to Retail Program Standards Lead within 72 hours of issuing certificate
    a. Scoresheet and Information Document
    b. Homework (Process Flow Charts, Risk Control Plans, and HACCP Summary/Worksheet)
2. Provide the Candidate with the best experience possible including respectful and positive discussion on disagreements.
3. Have a one-on-one meeting with Candidate prior to standardization or restandardization to ensure Candidate understands all expectations and has all required materials.
4. Encourage Candidate to have open communication with supervisor via calendar invitations.
5. Communicate with the FDA Standard on set dates with enough time to complete the entire process
6. Review and approve facilities provided for exercises based on expectations listed in this Procedure.
7. Staff are not required to conduct routine inspection if Candidate feels uncomfortable.

Communication and Calibration

Communication is a vital component of meeting and maintaining Standard 2 due to the number of staff assigned to the Retail Food Program. Due to this importance, below are the set expectations that should be applied:

1. Retail Program Standards Coordinator and Senior Environmental Health Specialist
    a. Communicate at least two months in advance the schedule for standardization and restandardization (*Appendix K*)
    b. Coordinate calibration meetings
    c. Maintain, review, and provide feedback for submitted Summary and Scoresheet
    d. Coordinate with FDA Standards to ensure minimum requirements are being met to maintain credentials
    e. Maintain and update Mecklenburg County Standards OneDrive Folder

2. FDA and Mecklenburg County Standards
    a. Complete standardization or restandardization by the deadline provided in the schedule or provide the Retail Program Standards Lead with advance notice of conflicts
    b. Participate in all calibration meetings when possible
    c. Utilize or provide feedback to the Mecklenburg County Standards OneDrive Folder
    d. Keep Retail Program Standards Lead and Supervisors involved in the scheduling process
    e. Request additional assistance when necessary

Calibration meetings should occur at minimum twice a year to ensure consistency and communication among FDA and Mecklenburg County Standards. Calibration meetings should discuss any updates, provide an opportunity for questions, role-playing activities and refreshers for expectations of the process. Standards should actively participate and provide input during these meetings.

Appendix A: NCDHHS Checklist

Intern Supervision assigned to:

_____ _____ (___)_____
Supervisor/Health Director County Phone

_____ _____
Intern Name Date

The intern, prior to beginning the Food Protection & Facilities Track within the Centralized Intern Training program, must turn in an initialed, completed copy of this checklist. The intern can bring the checklist and turn it in on the first day of training. Keep a copy in the intern's county personnel file.

LOCAL HEALTH DEPARTMENT FOOD PROTECTION & FACILITIES ORIENTATION CHECKLIST

Date Completed	Intern & Supervisor Initials	Activity
		Complete the FPF specific distance learning requirements prior to attending CIT **Register with FDA-OTED and complete the following courses:** o **Public Health Principles: General (FDA36)** o **Basics of Inspections: Beginning an Inspection (FDA38)** o **Basics of Inspections: Issues and Observations (FDA39)** o **Overview of Microbiology (MIC01)** o **Overview of HACCP (FDA16)**
		Review: **• Food Service Establishment Rules** **• Lodging Rules** **• Institution Rules** **• Visual Inspection of an On-site Wastewater System (Powerpoint)** **• Day Care Rules** **• School Rules** **• Lead Rules** **• Public, Private, and Religious School Rules** **• Private Water Supply Rules** **• .1700 Rules** **• Public Swimming Pool Rules** **• Tattooing Rules**

Date Completed	Intern & Supervisor Initials	Activity
		<u>View Presentations and Complete Learning Guide:</u> **• NC General Statutes 130A-248 through 130A-250** **• Local Confinement Rules** **• Residential Care Rules** **• Adult Day Care Rules** **• Summer Camp Rules** **• Primitive Experience Camp Rules** **• Resident Camp Rules** **• .1700 Rules** **• Foodborne Illnesses (PDF)** **• Migrant Housing Rules** **• Mass Gathering Rules (PDF)** **• Status Codes (PDF)** **• Introduction to Risk-based Inspections (PDF)**
		<u>Equipment</u>: **Assemble assigned equipment for module as directed in the Equipment section of the Centralized Intern Training Policy and Procedure manual.**
		<u>Food and Institutions</u>: **Accompany an EHS to inspect 1 meat market and 2 food service facilities.** **• Discuss rules, equipment and procedures** **• Reinforce the need for verification visits to ensure corrections are made** **• Review permit suspension and revocation procedures** **• Review Food/Institution Authorization Procedure** **• Introduce concept of Plan Review, scale used, who does it and where to get more information. Counties with a Plan Review Program may use some of the time from week 1 for this activity. Intern should spend several hours with someone reviewing a set of plans for a new restaurant and inspect the progress of the new restaurant** **• Familiarize with policies and correspondence from EH Section** **<u>Transitional Permit</u>** **• Accompany EHS during 1 transitional permit**
		<u>Accompany an EHS to inspect (if time allows)</u>: **• 1 institution: hospital, rest home or nursing home, if available (A small hospital can be done or if there is only a large hospital inspect a nursing home.)** **• 1 school cafeteria and school building** **• 1 local confinement** **• 1 lodging establishment** **• 1 adult day care** **• 1 summer camp, resident camp, primitive experience camp** **• 1 adult day care**

Date Completed	Intern & Supervisor Initials	Activity
		<u>Review</u>: **• Past report of a suspected foodborne illness that was investigated by a county EHS staff person, if available** **• Procedural manual for foodborne illness, if available** **• Complaint investigations procedural manual for conducting illness outbreaks** **• Review food safety course materials, if available**
		<u>Optional</u>: **Other :** • **Attend food safety course** • **Meet the staff and review local insect and vector control program, if available**
		<u>Accompany an EHS to inspect</u>: **<u>Tattoo:</u>** • **Visit a tattoo parlor, if available** • **Discuss with EHS staff Tattooing in your county**
		<u>Lead Investigation</u>: • **Discuss with EHS the investigation and abatement process for lead.** • **Interview supervisor of Child Health Program about testing for blood lead levels**
		<u>Swimming Pools</u>: • **Accompany EHS to inspect at least 1 swimming pool, spa, and wading pool, if available. If none are operating in the winter, discuss the procedures. Spend time reading or add additional time to other activities.** • **Review safety rules and inspection procedures.** •
		<u>Child Care</u>: **Accompany EHS to inspect 1 child care facilities. Review the child care process for licensing**

Intern Supervision assigned to:

_____	_____	(___)_____
Supervisor/Health Director	**County**	**Phone**

_____	_____
Intern Name	**Date**

The intern, prior to beginning the Food Protection & Facilities Track within the Centralized Intern Training program, must turn in an initialed, completed copy of this checklist. The intern can bring the checklist and turn it in on the first day of training. Keep a copy in the intern's county personnel file.

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		<u>Optional</u>: **Other :** • **Attend food safety course** • **Meet the staff and review local insect and vector control program, if available**
		<u>Accompany an EHS to inspect</u>: **<u>Tattoo:</u>** • **Visit a tattoo parlor, if available** • **Discuss with EHS staff Tattooing in your county**
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		<u>Swimming Pools</u>: • **Accompany EHS to inspect at least 1 swimming pool, spa, and wading pool, if available. If none are operating in the winter, discuss the procedures. Spend time reading or add additional time to other activities.** • **Review safety rules and inspection procedures.** •
		<u>Child Care</u>: **Accompany EHS to inspect 1 child care facilities. Review the child care process for licensing**

Food, Lodging & Institutions Authorization Procedures

Original Set

Authorization Procedures Revised June 1, 2015

Food, Lodging & Institutions
Authorization Procedures
Division of Environmental Health
Environmental Health Services Section

PRELIMINARY ACTIVITIES
Applicant & Supervisor Initial/Date Completed

_____1. The applicant shall successfully complete Centralized Intern Training by NC DHHS, Division of Public Health, Environmental Health Services Section.

_____2. The local health department shall train the applicant to keep daily records of time and activities, and to use forms properly.

_____3. The supervisor shall assign the applicant to an authorized registered environmental health specialist (REHS) in the department to learn routine procedures of field work. If no authorized environmental health specialist is available in the applicants department the regional specialist shall find an alternate location for this training. The local health directors of both health departments will be involved in the negotiations concerning time and location for the training.

_____4. The supervisor shall supply the applicant with the necessary equipment to enforce the laws and rules and assure that the applicant is familiar with the use of all equipment.

_____5. The supervisor shall assign the applicant to an authorized REHS for practice of skills and knowledge in the following specific areas; inspections will be carried out at each of the following types of establishments:

- Food Service (30)* (5-10 applicant led, co-signed inspection forms)
  - Food Service 26
  - Meat Market (no more than 6) 4
- Lodging (3)* (1-3 applicant let, cosigned inspection forms)
- Institutions: (6)*
  - Local Confinement 1
  - Hospital/Nursing Home 3*
  - Residential Care 2
- Water Supply (3)* (for migrant housing)
- On-Site Wastewater Facilities (3)* (for migrant housing if the applicant does not hold an Onsite Water Protection authorization)
- Total of 45 Inspections

Establishment categories <u>marked with an "*" must be inspected with these minimum numbers</u>. The establishment types without an "*" are recommendations only.

<u>For each establishment evaluated</u>, the following file shall be developed for review and comments made by the supervisor. The file is to be forwarded to the regional specialist by the applicant when the request for delegation of authority is made. The file shall be organized. Inspection forms filled out by the applicant and the authorized REHS shall be together. It shall include:

A. A copy of this document, Food, Lodging and Institutions Authorization Procedures.
B. Each establishment inspection form as specified in PRELIMINARY ACTIVITIES #5 and FIELD PRACTICE AND REVIEW.
C. Suspension or revocation form, and a transitional permit, completed by the applicant. (If no establishment is suspended or revoked, the file shall include at least one mock suspension or revocation form and a mock transitional permit.)
D. Product Disposition Form.
E. Bacteriological Analysis of Water Sample.
F. Pre-occupancy Evaluation Report of Drinking Water Supply and Wastewater Facilities for Migrant Housing.

FIELD PRACTICE & REVIEW

Applicant & Supervisor Initial/Date Completed

_____ 1. The supervisor or their authorized designee will make the necessary number of inspections with the applicant. In the beginning of the practice work, the applicant and the authorized REHS shall complete independent inspection forms. The applicant and the authorized REHS will discuss both inspection forms upon completion of each inspection in the absence of the operator.

_____ 2. After at least 15-25 inspections (filled out separately from the authorized REHS), the applicant should take the lead role in conducting the inspections, writing up the inspection and discussing the findings with the operator. The authorized REHS shall review and concur with the findings documented on the inspection form. The final score may be discussed and agreed upon by the authorized REHS and the applicant. The final determination of the score is made by the authorized REHS. The forms shall be signed by both the authorized REHS and the applicant.
The applicant should be able to discuss, explain and recommend the appropriate correction of violations.

_____ 3. Joint inspections are continued until the applicant is comfortable conducting inspections. The applicant must be able to identify violations, discuss the needed corrections with the operator, complete an inspection form, and review the inspection form with the operator. Only one inspection form is completed at this point. The authorized REHS will provide assistance and guidance to the applicant as needed until satisfied that the applicant is proficient in conducting inspections in the various types of establishments.

_____ 4. The supervisor will review the inspection forms completed by the applicant and the authorized REHS with both present and resolve any disagreements. The review should occur in progression with the applicants' work so that problems are corrected and learning takes place. The inspection forms shall be signed and dated by parties present during the review.

_____ 5. During the necessary inspections, if at least one *intent to suspend* and one *transitional permit* are not issued, a mock notice of *intent to suspend* and *a mock transitional permit* shall be completed by the applicant. The mock permit action shall be done onsite at one of the 30 food service establishments or one of the three lodging establishments. If at least one Product Disposition Form is not filled out, a mock form shall be completed by the applicant.

For all Critical Violations deducted on the inspection forms there shall be documentation of the type of correction. If a CV Follow-up or Visit has taken place, it shall be documented and included with the inspection for review.

_____ 6. Migrant Housing Delegation is required unless currently authorized in Onsite Water Protection. The applicant shall conduct evaluations of at least three existing on-site wastewater systems and three on-site water supplies for compliance with 15A NCAC 18A .1700 and .1900 rules in the presence of an REHS authorized in a program other than Childhood Lead Poisoning Prevention. The evaluations may be conducted at any location with an on-site water supply and wastewater system.

A review of the records on file and a site visit shall be made for each evaluation. A water sample shall be collected at each of the sites visited. An inspection form for each site visited shall be completed by the applicant and reviewed and co-signed in the field by the authorized REHS. Complete three of each form: Pre-occupancy Evaluation Report of Drinking Water Supply and Wastewater Facilities for Migrant Housing.

_____ 7. When all requirements have been met and the supervisor determines the applicant has progressed sufficiently to work independently, the applicant may apply for authorization.

DISCLAIMER: If upon reviewing the file, the regional specialist finds that the applicant needs additional practice, the evaluation for authorization may be postponed until that practice has taken place. To make the best use of everyone's time, it is the supervisor/health director's responsibility to see that the applicant has sufficient field practice to prepare the applicant for authorization. Inspections submitted for this review must have been completed within the last 12 months. Inspection forms beyond 12 months will not be considered by the regional specialist.

SCHEDULING THE EVALUATION FOR AUTHORIZATION

Applicant & Supervisor Initial/Date Completed

_____1. When the applicant has completed the PRELIMINARY ACTIVITIES and FIELD PRACTICE & REVIEW, the applicant shall provide the following to the Division of Environmental Health:

A. A properly completed *Food, Lodging & Institutions Authorization Procedures* **AND** the Application for Authorization (DPH-EHS 1056)

B. An authorization identification card will be issued by the division with the authorization letter if an applicant's photo is on file, unless the applicant is already authorized to administer another program. If a photograph is not on file, the applicant should submit a digital photograph by e-mail to the Office of Education and Training. Hard copy photographs will not be accepted.

Send to: ENVIRONMENTAL HEALTH SERVICES SECTION
OFFICE OF EDUCATION & TRAINING
1632 MAIL SERVICE CENTER
RALEIGH NC 27699-1632

_____2. The applicant shall forward the practice files and copies of all corresponding official documentation generated to the regional specialist. Contact your regional specialist for current mailing information.

_____3. The Environmental Health Services Section will contact the appropriate regional environmental health specialist who will set an appointment to work with the applicant as soon as possible. If the evaluation cannot begin within two months from receipt of completed files and the referral from the division, the regional specialist shall contact their supervisor to arrange for the evaluation to be conducted by another regional specialist. The supervisor will communicate with the education and training specialist when the application has been referred to another regional specialist. Evaluations for authorizations are top priority for the regional specialist.

EVALUATION PROCEDURES

The regional specialist shall spend a sufficient amount of time necessary to determine the applicant's knowledge and skills in the enforcement of laws and rules.

1. The regional specialist shall review the documents generated in the PRELIMINARY ACTIVITIES and FIELD PRACTICE & REVIEW prior to arriving at the local health department for field work with the applicant. The regional specialist shall discuss the documents with the applicant prior to field work.

2. The regional specialist shall coordinate the administration of a written test. The applicant must score at least 70% on the written examination prior to the field evaluation by the regional specialist. The regional specialist shall discuss the incorrect answers on the test with the applicant prior to continuing the evaluation. If the applicant fails the test, he/she will be denied authorization. The written exam may be repeated at a later date.

3. The applicant shall complete at least four independent inspections, but no more than eight establishments selected by the regional specialist.

4. The regional specialist shall observe the applicants' knowledge, skills, and ability to properly inspect the establishments selected. The intern will conduct the inspection, complete the inspection form, discuss findings with

the regional specialist, discuss findings with the person in charge of the establishment and post the grade. The regional specialist will evaluate the intern by using the Authorization Checklist. If the establishment warrants a notice of suspension or revocation, the regional specialist will review the notice of suspension or revocation. The regional specialist and the applicant shall jointly sign the inspection form and any suspension or revocation forms.

5. For migrant housing/family foster home delegation, the regional specialist shall observe the applicants' evaluation of at least one existing on-site sewage system and on-site water supply for compliance with 15A NCAC 18A .1700 and .1900. A water sample shall be collected for the site evaluated. The evaluation shall be conducted at a site not previously visited by the applicant.

6. A conference will be held with the supervisor or designee to discuss the recommendations for authorization, which will be forwarded to the Environmental Health Services Section.

7. The regional specialist shall recommend granting or denying the applicant the authority to enforce specific laws and rules by completing a recommendation form and forwarding it to the Environmental Health Services Section as quickly as possible. If the regional specialist cannot recommend delegation be granted after the inspections have been conducted in Steps 3-5 EVALUATION PROCEDURES, the recommendation shall be to deny the authorization. If delegation is denied, the specific reasons for denial with recommendations for improvements shall be included.

DELEGATION OF AUTHORITY

1. Upon receipt of the recommendation from the regional specialist, a letter from the Environmental Health Services Section Chief will be sent to the applicant approving or denying the request for authorization. If approved, the *Identification Card* will be included as appropriate.

2. The authorized REHS shall carry the *Identification Card* while on duty.

3. The *Identification Card* is the property of the Environmental Health Services Section and must be immediately returned by the authorized agent to the division when he/she is no longer employed with the local health department.

4. The applicant may begin to enforce laws and rules when the letter of authorization is received in the local health department.

CHANGE OF EMPLOYMENT

1. If the REHS becomes employed in another local health department, the individual must apply for authorization for the employee to enforce laws and rules. The following steps must be completed. See PRELIMINARY ACTIVITIES, Step 2 and Step 4; see SCHEDULING THE EVALUATION FOR AUTHORIZATION: Step 1 and Step 3.

2. When an authorized REHS transfers from one local health department of the state to another, the regional specialist shall assess the need for additional training. This may include discussing the applicant’s abilities with their current regional specialist, reviewing inspection forms from the previous county, a field visit with the new county’s regional specialist, or attending initial internship training at the expense of the employing health department. If the authorizing regional is no longer employed by the state, field work will be required.

APPLICATION FOR DELEGATION OF AUTHORITY

☐ Initial Authorization ☐ Re-authorization ☐ Previous Identification Card attached or returned to

REGISTRATION NUMBER _____ DATE OF EMPLOYMENT: _____

NAME: _____ DATE OF BIRTH: _____

POSITION TITLE: _____ EMAIL: _____

COUNTYOF EMPLOYMENT: _____

COUNTY OF PREVIOUS EMPLOYMENT: _____ DATE LEFT: _____

PREVIOUS AUTHORIZATION:

( ) CCC	( ) FLI	( ) OSW	( ) TATTOO
( ) CLPP	( ) MH	( ) POOLS	( ) WELLS

INITIAL APPLICANT TRAINING LOCATION: _____ DATES: _____

TYPE OF AUTHORIZATION REQUESTED:

( ) CCC	( ) FLI	( ) OSW	( ) TATTOO
( ) CLPP	( ) MH	( ) POOLS	( ) WELLS

STATEMENT OF APPLICANT

I hereby request that I be authorized to enforce state laws and rules.

DATE: _____ SIGNATURE: _____

STATEMENT OF SUPERVISOR

I hereby certify that the applicant has successfully completed the Preliminary Duties and Field Practice and Review. The applicant is ready to be considered for authorization.

DATE: _____ SIGNATURE: _____

INSTRUCTIONS:

Purpose: To request authority to be delegated to an environmental health specialist to administer and enforce state environmental health laws and rules.

Preparation: This form shall be completed by the applicant when all Preliminary Activities and Field Practice and Review have been completed or when the applicant changes the county of employment. Each item preceded by a blank space must be initialed and dated by the applicant when the activity has been completed.

Distribution:
1. Original to: Education & Training, Environmental Health Services Section
   1632 Mail Service Center, Raleigh, NC 27699-1632 (Courier 52-01-00)
2. Copy: Local health department files.

Disposition: This form may be destroyed in accordance with Standard 6, Personnel Records, *Records Disposition Schedule* published by the North Carolina Division of Archives and History.

Additional Forms: This form may be copied as needed.
DPH-EHS 1056 (REVISED 11//15/12)
ADB

Crosswalk:
Mecklenburg County Training Program
and
CFP: Field Training Manual

In conjunction to the training requirements set by NCDHHS, Mecklenburg County created an internal training process that consist of a two-tier approach. In Mecklenburg County, the training is provided by a core group of calibrated Senior Environmental Health Specialist and two Supervisors. Materials created within this training process align with *CFP: Field Training Manual* which are maintained and updated with the most current information. The training process to complete both tiers of training can take up to one year. The training process crosswalk is below with additional supporting information located in Mecklenburg County Internal OneDrive Files.

CFP: Field Training Manual *6 Inspection Training Areas*	CFP: Field Training Manual ***23 Performance Elements***	Mecklenburg County Training Program ***Location of Training***	Mecklenburg County Training Program ***Training Objectives***
I. Pre-Inspection	1. Has the required equipment and forms to conduct the inspection	Training 1.0	Orientation with Training 1.0 Supervisor where equipment (laptop, phone, inspections bag, etc) that is needed for inspections and office work is provided
	2. Reviews establishment file for the current risk category assigned, previous inspection report, complaints on file, and if applicable, required HACCP Plans or documents supporting the issuance of a variance	Training 1.0	Review risk category sheet while going over training manual, review tools for the job (marking instructions, policy, and guidance documents) during in-office training, review special processes mentioned in NC Food Code and what rules require
		Training 2.0	Review policy EHF-01 facility inspections on ways to properly conduct field inspections, review application of special processes as needed, application of establishment file review during routine Quality Assurance field review.

II. Inspection Observations and Performance	1. Provides identification as a regulatory official to the person in charge, confirming agency authority for the inspection, and stating the purpose of the visit	Training 1.0	Trainers review proper identification during routine training meetings but also during field evaluation. Trainers exemplify requirements set in policy and QA.
	2. Has knowledge of the jurisdiction's laws, rules, and regulations required for conducting retail food/foodservice inspections.	Training 1.0	Trainers review all chapters of the food code, general statutes, and all rules covering food regulation. Trainer's review provided marking instructions book with all materials.
		Training 2.0	Supervisor and trainer reviews laws and rules as applicable during field training. Through routine file review additional training is provided in classroom settings.
	3. Uses a risk-based inspection methodology to assess regulations related to employee practices and management procedures essential to the safe storage, preparation, and service of food and verify the establishment is assigned the correct risk category.	Training 1.0	Review walkthrough, menu review, static vs dynamic through in-class training and in field observations. After observations new hires practices proper risk-based inspection methodologies through joint inspections
		Training 2.0	RBI review – review 3 different food process, review 3-legged stool, review critical limits, SOPs, Active managerial control, assessing risk category, and prioritizing inspection
	4. Obtains immediate corrective action for out of compliance employee practices and management procedures essential to the safe storage, preparation, and service of food.	Training 1.0	In class and in field observations review proper methods of achieving corrective actions. Intern Training progression – intern begins leading inspections with authorized EHS. They practice using inspection equipment, asking questions of PIC, and assessing violations and getting corrective actions
		Training 2.0	Immediate corrective actions are discussed during classroom settings. Recaps and review are discussed based on questions and file review.

	5. Correctly assesses the compliance status of other regulations (Good Retail Practices) that are included in the jurisdiction's prevailing statutes, regulations, and/or ordinances.	Training 1.0	In class training teaches food code chapters and importance of assessing GRPs. New hires practice knowledge through joint inspections and observations from a standardized training staff
		Training 2.0	Through file review and questions, staff are provided with reminders and review of how to assess GRPs and providing RBI approach.
	6. Verifies correction of out of compliance observations identified during the previous inspection. Discusses options for the long-term control of risk factors.	Training 1.0	Discuss different scenarios to get corrective actions. Field observations and joint inspections used to practice immediate corrective actions and ways to handle long term control of noncompliant items
		Training 2.0	Enforcement actions for long term compliance (RCP, ITS) and asses out of compliance observation are reviewed during weekly meeting
	7. Correctly uses inspection equipment during the joint inspection.	Training 1.0	As part of Intern Progression Timeline, after CIT or week 6 interns may start to perform elements of an inspection such as taking temperatures, testing sanitizer, discussing Employee Health with PIC, answering prompted questions from trainer to practice knowledge etc

III. Oral Communication	1. Asks questions and engages in a dialogue with the person in charge/employees to obtain information relevant to the inspection	Training 1.0	During field observations new hires learn different methods on how to talk to and engage with management. Through joint inspections new hires practice different forms of communication
	2. Provides the person in charge/employees with accurate answers to inspection-related questions or admits not knowing the answer	Training 1.0	In class teaching on all chapters of the food code and ways to respond to operators. Practice this through field observations and joint inspections.
		Training 2.0	Trainer and supervisor reviews and assessed during field QA requirements. Feedback provided as needed.
	3. Uses available means (e.g., interpreter, drawings, demonstrations, diagrams, international food safety icons) to overcome language or communication barriers.	Training 1.0	Demonstrates proper form of communication through field evaluations, introduce to cultural foods app, and translation services available through the department
		Training 2.0	During field QA feedback provided on ways to improve or maintain communication with operators and use of translation services
	4. Follows the jurisdiction's policy with regard to disclosure of confidential information.	Training 1.0	In class training on how to handle confidential information when handling ill employees and for field investigations.
		Training 2.0	Review ways to handle confidential information during FBI investigations and have field support when handling first case utilizing confidential information
	5. Uses effective communication and conflict resolution techniques to overcome inspection barriers	Training 1.0	Communication tips discussed and practice during module with the use of videos and break out activities
		Training 2.0	RBI practices are reviewed, and new hires review proper methods for active listening and training through question-based scenarios
	6. Conducts the exit interview explaining out of compliance observations and identifying corrective actions and timelines for all noted violations.	Training 1.0	Teaches proper ways to complete an exit interview in class, demonstrated through field observation, and practiced during joint inspections to ensure it is consistent with jurisdiction QA guidelines
		Training 2.0	Trainer and supervisor reviews and assessed during field QA requirements. Feedback provided as needed

IV. Written Communication	1. Completes inspection form per the jurisdiction's administrative procedures (e.g., observations, corrective actions, public health reasons, applicable code references, options for the long-term control of risk factors, compliance dates).	Training 1.0	Practices filing out inspection, product disposition, and other related forms. New hires learn appropriate methods to document through classroom training and practice during joint inspections
		Training 2.0	Review inspection reports to ensure they are completed per state guidelines. Noted issues are discussed through bi-weekly meetings and mentioned during one-on-one meetings
	2. 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).	Training 1.0	Review examples of enforcement actions and documentation demonstrated in field work or mocks scenarios to fulfill requirements for authorization
		Training 2.0	Review enforcement action policy (EHF-06). Review methods of ways to use different documents during field evaluations
	3. Presents the inspection report, and when necessary cross-referenced documents, to the person in charge.	Training 1.0	Review ways to utilize marking instructions, food code, and inspection form to support observations noted during inspection. Utilize exercises and practice with field observations to practice filling out inspection form.
		Training 2.0	Trainer and supervisor reviews and assessed during field QA requirements. Feedback provided as needed

V. Professionalism	1. Maintains a professional appearance consistent with the jurisdiction's policy (e.g., clean outer clothing, hair restraint).	Training 1.0	EHS reviews policy initially with supervisor and signs copy stating they understand expectations of how to maintain professionalism and proper etiquette during inspections. Inspection etiquette and professional taught during in class presentation and demonstrated during field observations.
	2. Demonstrates proper sanitary practices as expected from a food service employee	Training 1.0	EHS reviews ways to maintain professionalism, appropriately documenting and reporting violations observed during an inspection, and proper methods to conduct an inspection
	3. Only reports substantiated findings as violations		
VI. Additional Performance Elements	1. Uses an aseptic food sample collection method consistent with criteria established by laboratory serving the jurisdiction.	Training 2.0	EHF07 FBI Investigation policy goes through methods and ways to collect samples and send samples for testing in the event aseptic food is available
	2. Uses an aseptic water sample collection method consistent with criteria established by the laboratory serving the jurisdiction	Training 1.0	Reviews aseptic water sampling for food facilities on well water. Documentation completed during sampling and submitted for testing. Mock documentation may occur at times where sampling is not required.
	3. Other performance elements identified by the jurisdiction.	Training 1.0 and 2.0	Additional performance elements can be noted on checklist for both teams

Training 2.0 Checklist

Registered Environmental Health Specialist

Name:	
Date Hired:	
Date Authorized:	
Date Transfer to Training 2.0:	
Date Transfer to F&F Supervisor:	

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Division Expectations		
Objectives	**Training Method**	**Comments**
1. Health Department and Division Policy Review	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Heavily discussed location of policies on MeckWeb and other locations. Required policy review for accreditation completed. Policies are discussed at every team meeting. Policies are also reviewed as needed when various situations arise. Policies reviewed during team meetings include: • EHF01 – Facility Inspections • EHF02 – Compliant and Service Request • EHF03 – After Hours Response • EHF 05 – Training for Food Service Workers • EHF06 – Enforcement Actions • EHF07 – Foodborne Illness Investigations • EHF08 – Quality Assurance • EHF10 – FFS Dress Code • EHA08 – Communication Policy • EHA03 - Environmental Specialist Educational Qualifications and Authorization • Attendance (per FMLA training for managers course)
2. Authorizations Expectations a. RSTAS b. REHS Expectations c. Other authorizations	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Expectations for pool and childcare authorizations were discussed. The ability to gain other authorizations was also discussed as an opportunity under an IDP. Reviewed how to complete REHS renewal forms. Expectations of being an REHS to include: 1. NEHA and NCREHS Board examination within 3 years of registration 2. Law Course with 4 years 3. 15 Hours of Continuing Education – Yearly **Pool authorization to be completed on:**

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

3. Continuing Education and Online Training Expectations	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Discussed expectations on continuing education. All training staff completed centralized intern training in 2021. Five hours rolled into 2022. Staff were reminded to look on listserv for opportunities for training to include: West Piedmont, SOP courses, and online opportunities. A full list of courses can be found on the NCREHS website.
4. Vehicle Expectations and GPS Monitoring	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Reviewed the take-home vehicle use policy. Preventative maintenance discussed to include how to go about getting a spare vehicle and the fleet number. The fleet number should be used in situations such as needing a tow. Also discussed the use of Auto bell and expectation that vehicle should be maintained and cleaned. Accident expectations are to call supervisor, no matter how minor. Detailed discussion on process will occur then. GPS discussion on speeding and activities check through a breadcrumb report. Staff are aware that this can occur at any time which requires accurate documentation. **Current Vehicle status:**
5. Travel Expectations	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Reviewed policy and expectations with • 1: Day Travel • 2: Out of Town/Overnight Travel. Discussed travel P-Cards and expectations if those are used.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

6. Reimbursements a. Mileage b. Shoe/Lab Coat	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Reviewed mileage and work shoe reimbursement documentation and expectations. **Purchases in FY22:**
7. Accreditation Expectation	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Accreditation documents were required to be completed by MM. All staff received notice and discussion on expectations of completion of all documentation. **Accreditation file was completed as of:**

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Team Training Topics		
Objectives	**Training Method**	**Comments**
1. Risked-Based Inspections Overview and Expectations	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☐ One-on-One ☐ Program Meetings	Risked based inspections concepts are reviewed on a routine basis though team meetings, one on ones, files reviews, etc. Team was provided with an overview and recap of risked based concepts to provide a refresher and reminder of expectations.
2. FDA Voluntary Retail Food Standards	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☐ One-on-One ☐ Program Meetings	This presentation discusses the Retail Program Standards as a whole. The topics included: 1. What are the Retail Food Standards and County Expectations 2. An overview of all 9 standard 3. The role of an EHS in the standards 4. Standard 2: Standardization – Review of documents and expectations
3. Temporary Food Events – Application	☒ Virtual Classroom ☐ In-Person Classroom ☒ In-Field ☐ Team Meeting ☒ Team Training ☐ One-on-One ☐ Program Meetings	The topics were discussed during training include: • All staff added the TFE calendar and reviewed the color-coded events • Reviewed the type of information that will be located on calendars. • Reviewed in detail the TFE packet processing starting with the Plan Examiners to when a TFE is assigned. • Expectations on volunteering for TFEs were also discussed • Reviewing importance of reaching out to Vendor to determine if any changes were made to the menu, time for permitting confirmation, and other key factors • Reviewed checklist for TFE vendors • TFE set ups • Processing after permitting • Exemption at TFEs **TFEs conducted:**

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

4. Limited Food Service Establishments	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☐ One-on-One ☐ Program Meetings	Limited Food Service Establishment training included: • Reviewed definition and how to identify LFSEs • Discussed requirements and specific rules • Reviewed .2674 in detail and how to apply in the field • Reviewed service request expectations **LFSEs conducted:**
5. Illegal Food Operations – Application	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☐ One-on-One ☐ Program Meetings	Training included: Reviewed in detail about how to handle illegal operations per policy. 1. Different types of illegal operations 2. What makes an illegal operation? 3. What NOVs are? 4. How to update SRs properly and when to close out request. **Illegal Operations conducted:**
6. Foodborne Illness – Review and Application	☒ Virtual Classroom ☐ In-Person Classroom ☒ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Policy was reviewed with expectations and guidance on how to conduct a foodborne illness complaint. A hands-on activity was created and implemented that included: • Reviewed green sheet and process of receiving the form • Reviewed process after receiving green sheet • Supervisor is contacted and can provide additional information if needed to EHS staff • Contact CD nurse for additional information • Food history form • Obtaining detailed background information on the facility • Specific situations to review risk factors • Reviewed write up requirements and proper etiquette for public document write ups. Supervisor should review documentation if needed. • Reviewed final steps to provide a copy of investigation to the CD nurse and properly update service request when no further action is needed. **FBI conducted:**

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

7. Transitional Permits – Application	☒ Virtual Classroom ☐ In-Person Classroom ☒ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Reviewed: How to respond to a track transitional service request that was transferred from another team. Reviewed that every change of ownership does not equate a transitional permit. An EHS can run into several different scenarios when a change of ownership occurs such as: A true transitional permit (T), a new permit (I) (no noncompliant items), or plan review required (extensive menu/equipment changes). Reviewed in detail: • Utilizing Polaris (obtaining lat. & long., parcel and e-grid information) • Secretary of state website • Reviewed H-status and imputing proper information into CDP post permit (E-grid and hours of operation) • Reviewed permit conditions • How to properly obtain permit ID numbers (Difference between food stand and restaurant to include permit conditions) • Explained expectations of documentation to be submitted to supervisor in a timely manner • Reviewed the required status codes changes Reviewed supporting documentation provided by supervisor that provides the complete checklist of all required items for a complete transitional package. Reviewed track transitional process and expectations for follow up. • How to create a service request and how to update it • Unannounced initial inspection required 14 to 30 days after permit issuance • Transitional checks shall occur quarterly, one week before expiration of transitional and the day after expiration. These visits may occur in conjunction with inspection. • Need to check on facilities more often as they get closer to their final dates Additional transitional items discussed: • When to take off for CFPM • Point deductions for non-compliant items **Transitionals completed:**

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

8. Service Request – Application	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Reviewed: • The service request policy to include expectations on completion of request and the appendices that discuss how to complete a service request. • Discussed response time for all types of service request • Activity codes that shall be used when adding activities and updating a service request. This includes proper time monitoring to ensure double dipping of time does not occur. • Requirements to contact complainant as necessary per the request. **Service Request Completed:**
9. Status Codes – Review and Application	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Ongoing discussion of status codes for the following: • D Status – Intent to suspend and suspended permits process and expectations • D-status checks maintained in service request, new interpretation from NCDHHS may need to be revisited for staff moving forward. • M status – Activities should not be conducted. Address should be verified, updated in IMS, and once completed information must be sent to Tony/Supervisor to properly update the M status. • C Status – Quarterly visits are required • H status – as it applies to transitionals • T, U, K, A – as it applies to transitionals • J status requirements - review of proper documentation when placing an establishment on J status and sending documentation via USPS. • Discussion around any status change that affects a permit status and the requirements to mail paperwork per policy.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

10. Enforcement Actions – When and How	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	The following areas have been reviewed/implemented: • Proper escalation of points regardless of risk • Verification visits to gain long-term compliance • Risk Control Plan – How to utilize, expectations EHS to follow risk control plan, and what to do if RCP isn't followed or maintained. Additional discussion on expectations moving forward. At this time if RCPs are establishment they should be uploaded onto CDP. • Voluntary Closure – expectations if allowed • ITS/IS – All staff have received a document that describes how to complete an ITS and an IS. o Reviewed EHF-06 o Supervisor must be looped in before permit action o When to use permit action o Documentation and importance of facility receiving their appeals rights. Reviewed with staff maintaining their territory and asking the proper questions if facilities that appear to require a permit are not listed in CDP. EHS discussed proper communication and tools to use if something like this occurs in their territory. **Enforcement Actions completed:**
11. Plan Review and Permitting	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Discussed Ghost Kitchen Concepts in detail with expectations and additional information as staff observed them in the field. Discussion surrounding permit condition changes, equipment changes, and how to handle these items. • Referred them to the Code Information and Resource Center (CIRC) formally CTAC. 980-314-CODE. • Reviewed which senior belongs to their territory.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

12. Specialized Processes – Application	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Discussion focused on expectations of assessing specialized processes in the field specifically when assessing acidification of rice. The topics included: 1. Where to find the variance/HACCP plan on the OneDrive 2. Review plan prior to inspection 3. Understand critical control points and critical limits 4. Onsite verification of plan by calibration of pH meter, testing of rice, and review of logs 5. How to mark 29 and 32 6. Marking expectation for Variances issued by the state that *are not* a specialized process. (ex. pizza sauces, date marking extension)
13. Recap Meeting a. Emergency Call	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☐ Team Meeting ☒ Team Training ☒ One-on-One ☐ Program Meetings	Fire call discussion included: 1. SharePoint site review for dates on call 2. Review of EH-03 After Hours Response and expectations 3. Review of what to do when a call is received 4. Expectations of when on call - focused on availability 5. Service request expectations and follow up 6. Supervisor availability Additional topics discussed: • Wild Mushrooms • NCDHHS V&D Expectations • Recontamination of Hands • ITS/IS • Failure to meet noncompliant items • C to J and C to G • Status Reviews • Datemarking CDI, Dishmachine CDI, and Reheat CDI • TPHC for safety vs quality

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Managing a Territory		
Objectives	**Training Method**	**Comments**
1. Expectations for Full-Time Environmental Health Specialist to include: • Call-in, Calendar, and Email Etiquette • Team Days • Meeting Expectations • Chain of Command	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Expectations are discussed during first meeting. PowerPoint presentation used to review items listed. Further discussions on the topics listed were completed through one on ones or team meetings. Continuous reminders as needed for the entire team or individually as needed.
2. Review of Workplan Expectations	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Reviewed and discussed workplan on both dates. Workplan mirrors FFS EHS workplan to build consistency. Courses required in workplan are not available at this time due to COVID restrictions. Reviewed maintaining a log of their activities that are not counted as inspections (activity tracker workbook) Trackers provided as an example format to make mid-years and end of years easier. Staff are required to strive to obtain an average of 35 to 40.
3. Workday Expectations	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Workday Expectations were discussed during onboarding presentation and then are followed up as needed during one on ones. Discussed what a full workday should look like per updated policy. Prioritizing a workday is discussed as items come up per EHS. For example, if an FBI comes in staff are made aware that this item is the priority for that day. Staff are required to CC supervisor in every inspection email.

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

4. Review and Navigation of Useful Sites	☐ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Reviewed in detail the following useful sites: • NCDHHS – For posted variances and position statements • OneDrive – For posted variance/HACCP plans, Permits_New, decision registries, NOV tracking, and extended day • SharePoint – Fire call list, meeting minutes, and Good Works • Training Supporting Documents – Contains a wealth of helpful documents that will assist in various areas such as transitional permits, permit actions, and other areas. • Polaris and Secretary of State • MeckWeb – Policy review Training is accomplished in virtual style for all documents. Staff are expected to pin these websites to their computers and utilize as needed. Sites are then reviewed periodically as needed as they connect to various topics.
5. Understanding Reporting Tools a. BI Dashboard	☒ Virtual Classroom ☒ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Detailed review of the following items: • Detailed review of the dashboard and ongoing expectations (provided time for any questions post dashboard training) o Completed Dashboard training per Tony Lopez • Dashboard review of J status o Proper maintenance of C-status and making proper visits to facilities under a transitional permit • Dashboard review of T status/I Status • Triple System and priorities based on dashboard It is expected that staff check their reports on dashboard during office hours. Staff were made aware of this and reminding during team meetings and trainings. Priorities are reviewed as per FFS updates to ensure the team works on divisional needs as well.
6. Activity Code Review and Application	☒ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☒ Team Meeting ☐ Team Training ☒ One-on-One ☐ Program Meetings	Reviewed activity codes and discussed expectations on how much time should be allotted per day for in-field and office. Provided activity code list that was completed by Stephen Graham.

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

7. Planning your Day a. Prioritizing	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Planning days are a continuous discussion during team meetings and one on ones. Through supervisor oversight, employees are encouraged to plan their day in the most effective manner based on priorities that are discussed during every meeting. Thorough discussion on expectation to manage their dashboard on a daily basis if possible, to include priority list, verifications, and other reporting tools. Weekly activity code checks are made with each EHS to ensure that a full workday is completed. Review of policy to ensure clear understanding.
8. Workload Based on Division Priorities	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	Priorities from Food and Facilities and division are distributed to all staff as they pertain to workload. All staff are aware of the priority system and how necessary it is to ensure compliance.
9. Working in Vacant Territory	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

10. Quality Assurance Review a. Field and File Per Policy b. Weekly File Review c. Permitting QA	☐ Virtual Classroom ☐ In-Person Classroom ☐ In-Field ☐ Team Meeting ☐ Team Training ☐ One-on-One ☐ Program Meetings	As part of the training team quality assurance, staff receive additional file review. This file review is similar to the formal file review with an additional layer of discussion and follow up. File reviews was completed with comments discussed during one-on-one check ins as needed. File review discussions are maintained on file if requested. Staff also receive permitting quality assurance for every permit issued. All QA is maintained on file. Quality assurance required per policy is properly submitted in the quality assurance portal on CDP IMS. **Field QA:** **File QA:** **Other QA:**

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Supervisor Completed Work

	Date	Comment
Workplan Review and Signature		**Note: All staff in training 2.0 have two notable differences:** • **To complete all training activities and strive to meet 35-40 activities per month.** • **To complete training activities including coursework provided by MCPH**
Completion of Training Courses and Meck EDUs		
Accreditation Files (to include) • **EHDITS** • **Up to Date File (Electronic and Paper)**		
File Review		
Field Review		
Environmental Health Regional Specialist 6 Month Follow Up (if applicable)		
Standardization Pre and Post Coursework		
Swimming Pool Authorization Request (if applicable)		

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

Supervisor Comments:

Training Senior Comments:

Attachment A

Training 2.0 Checklist – Newly Authorized Environmental Health Specialist

_____	_____
Environmental Health Specialist Signature	Date
_____	_____
Supervisor Signature	Date
_____	_____
Manager Signature	Date

Appendix D: Affidavit Example

MECKLENBURG COUNTY

Raynard Washington, PhD, MPH **Public Health** **(704) 336-4700**
Health Director

Environmental Health Specialist Training Affidavit

Date: _____

Through a combination of training and education I, _____, attest to completing the following item(s) as required for the Voluntary National Retail Food Regulatory Program Standards:

☐	I have the education and training equivalent to FDA ORAU courses listed in appendix B-1 of Standard 2. In addition to education on jurisdictions current statutes, regulations, and/or ordinances that are required and passed the Registered Environmental Health Specialist examination offered by the National Environmental Health Association Exam.
☐	I have completed the all Pre and Post FDA coursework listed under Appendix B-1. The required FDA Food Code Training was completed by: ☐ Attending the FD112 – Food Code Training Course (in-person or virtually) ☐ Completing Training 1.0 with Mecklenburg County which is equivalent to FD112 through verification objectives.
☐	As part of the NCDHHS authorization process and/or Mecklenburg County Training Program, I have completed 25 joint inspections and demonstrated all required performance element competencies to become an authorized registered environmental health specialist.
☐	I have completed 25 independent inspections of retail food and/or institutional food service within 18 months of authorization.

Candidate Signature: _____

Retail Program Supervisor Signature: _____

Program Manager Signature: _____

Program Standard #2
APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

All certificates or course transcripts must be turned into to Training 2.0 SR EHS or Supervisor

Name: _____ **Date of Completion (Pre):** _____

Pre-requisite ("Pre") curriculum courses

(To be completed during the 25 joint inspection period AND prior to conducting any leading independent inspections)

PUBLIC HEALTH PRINCIPLES				
	Date of Completion	***Courses***	***Course Number***	***Location***
☐		1. Public Health Principles	CC8026W (450)	*FDA ORA LearnED*

MICROBIOLOGY:				
	Date of Completion	***Course***	***Course Number***	***Location***
		1. Biological Hazards	CC8028W (90)	*FDA ORA LearnED*
		2. Control by Thermal Processing	MIC08 (90)	*Compliance Wire*
		3. Pasteurization	CC8002W (105)	*FDA ORA LearnED*
		4. Sampling	CC8035W (120)	*FDA ORA LearnED*
		5. Sanitation Practices	CC8032W (210)	*FDA ORA LearnED*
	PREVAILING STATUTES, REGULATIONS, ORDINANCES			
	Date of Completion	***Course***	***Course Number***	***Location***
		1. Laws and Regulations	CC8039W (120)	*FDA ORA LearnED*
		2. Basics of Inspection: Beginning an Inspection	FDA38 (90)	*Compliance Wire*
		3. Basics of Inspection: Issues & Observations	FDA39 (90)	*Compliance Wire*
		4. Food Defense	CC8027W (90)	*FDA ORA LearnED*
		5. FDA Food Code	FD112W100 Curriculum: Food Code	*FDA ORA LearnED*
COMMUNICATION SKILLS				
	Date of Completion	***Course***	***Course Number***	***Location***
		1. Communication Skills for Regulators	CC8030W (60)	*FDA ORA LearnED*

Program Standard #2

APPENDIX B-1: Curriculum for Retail Food Safety Inspection Officers

All certificates or course transcripts must be turned into to Training 2.0 SR EHS or Supervisor

Name: _____ **Date of Completion (Post):** _____

Curriculum ("Post") courses

(To be completed by conclusion of Training 2.0 or otherwise decided)

	MICROBIOLOGY:			
	Date of Completion	***Course***	***Course Number***	***Location***
		Technology-Based Food Processes	MIC 11 (120)	*Compliance Wire*

	HACCP:			
	Date of Completion	***Course***	***Course Number***	***Location***
		HACCP	CC8033W (120)	*FDA ORALearnED*

	ALLERGEN MANAGEMENT			
	Date of Completion	***Course***	***Course Number***	***Location***
		Allergens	CC8029W (90)	*FDA ORALearnED*

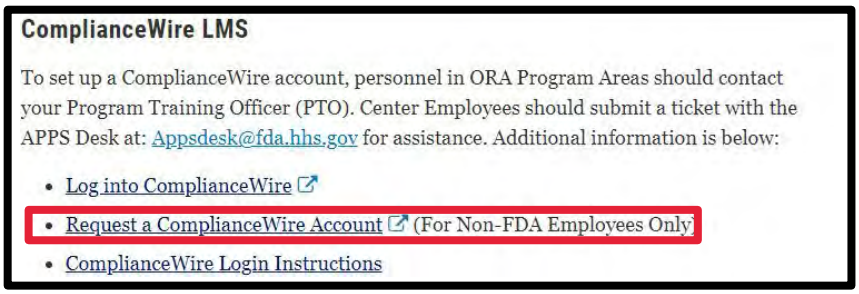
	EPIDEMIOLOGY: Foodborne Illness Investigations (series):			
	Date of Completion	***Course***	***Course Number***	***Location***
		1. Collecting Surveillance Data	FI01 (90)	*Compliance Wire*
		2. Beginning the Investigation	FI02 (90)	
		3. Expanding the Investigation	FI03 (90)	
		4. Conducting a Food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

	EMERGENCY MANAGEMENT:			
	Date of Completion	***Course***	***Course Number***	***Location***
		1. Introduction to Incident Command System	IS-100.C, Introduction to Incident Command System, (180)	*FEMA Emergency Management*
		2. Basic Incident Command System for Initial Response	IS-200.C, ICS for Single Resources and Initial Action Incidents, (180)	
		3. An Introduction to NIMS	IS-700.B, NIMS an Introduction, (180)	
		4. National Response Framework	IS-800.B, NIMS an Introduction, (180)	

Platforms Used to Complete FDA Curriculum

ComplianceWire - At this time ComplianceWire will house most of the courses that are required for the FDA Curriculum. To gain access to ComplianceWire you must request access by:

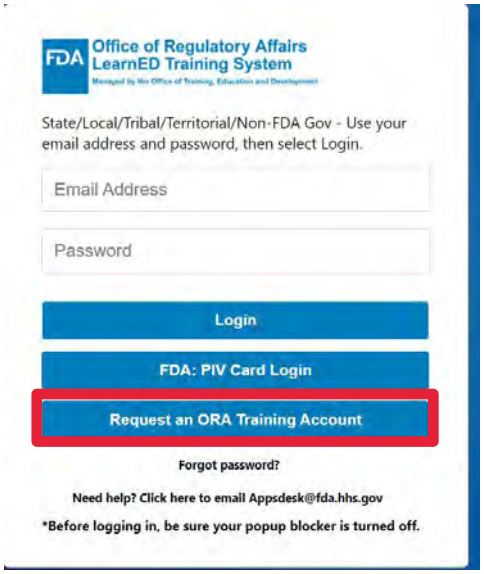
1. Visit: SLTT Landing Page
2. Scroll down to the ComplianceWire section and click on request password.



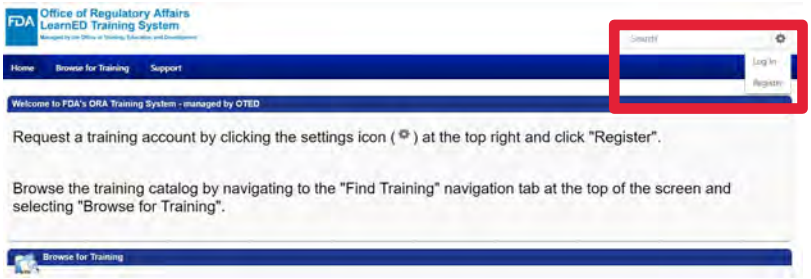
FDA ORA LearnED - This platform will be used for the Communication Skills for Regulators and Food Allergens course. Although only two courses are taken on this platform your transcripts from ComplianceWire will also be available here. To gain access to ORA LearnED:

1. Visit: FDA ORA LearnED
2. Click the "Request an ORA Training Account" button

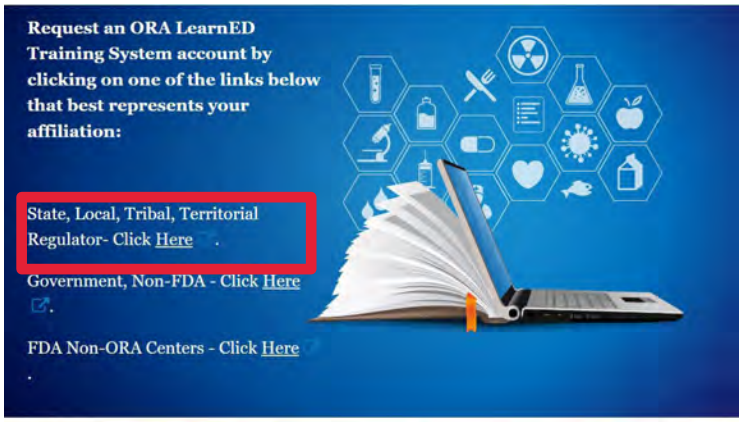
1.



2.



3.



4.



Joint Inspection Logs

Purpose: The Joint Field Inspection Log is intended to document the entire training field experience while observing and conducting food inspections to obtain a Food, Lodging, and Institutions Authorization. After Tier IV training with the State Regional, draw a line through a space and then begin building the Authorization packet.

Note: *For the inspector column, list the first initial and last name of only trainers who are Standardized.*

Name: _____ Date: _____

No.	Date	Inspector	Establishment Name	Establishment Type	Risk Category	Trainer Led	Trainee Led

Independent Inspection Logs

Purpose: This inspection log will be used to document independent field inspections post authorization (after FLI authorization letter issued).

How To Use: Document your first 25 independent field inspections.

Name: _____ Date: _____

No.	**Date**	**Establishment Name**	**Establishment ID**	**Facility Type**	**Risk Category**	**Comments**
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

ANNEX 3-1

Risk Control Plan

Establishment Name: ABC Restaurant		**Type of Facility:** Full-Service Restaurant (IV)	
Physical Address: ABC Way		**Person in Charge:**	
City: Charlotte	**State:** North Carolina	**Zip:** 00000	**County:** Mecklenburg
Inspection Time In: 1:30 pm	**Inspection Time Out:** 4:00 pm	**Date:** July 7, 2020	**Inspector's Name:** John Doe
Agency:			

Specific observation noted during inspection:

Observed improper cooling methods for ready to eat TCS foods. Observed rice in a large pile cooked and placed in cooler at 11am reading above 70F in the center most point at 2pm. Observed lettuce tightly covered. Observed queso mix with blanched tomatoes tightly covered reading 47F and above.

Applicable code violation(s): - (Optional)

3-501.14 - Cooling

3-501.15 - Cooling Methods

Risk factor to be controlled:

Improper Holding Temperatures

Hazard (most common, significant):

Bacillus cereus & Staphylococcus aureus

What must be achieved to gain compliance in the future:

Establishment must achieve proper cooling by using approved cooling methods to ensure that all product, regardless of cook to cool or ambient temperature, are being cooled within time and temperature compliance.

Proper training of cooling, implementation of logs, and active managerial control are necessary for success of proper cooling.

How will active managerial control be achieved:

(Who is responsible for the control, what monitoring and record keeping is required, who is responsible for monitoring and completing records, what corrective actions should be taken when deviations are noted, how long is the plan to continue)

Control shall be maintained by the kitchen manager. The kitchen manager is responsible for ensuring that all staff are properly trained on proper cooling methods for the product and ensuring that product is achieving the proper time and temperature cooling parameters.

The establishment currently uses a board to write down times when foods are being cooled that was not being utilized during the inspection. To ensure compliance the use of a temperature/ time log with initials shall be used for all product under cooling.

Although the kitchen manager is responsible for maintaining control, the entire kitchen staff is responsible for ensuring cooling is being achieved properly. Food employees are responsible for preparing different food items and must be trained to comply with set procedures.

Active monitoring of product shall be maintained during cooling process. If the method being used does not bring product temperature down by the required rate, a different method should be established. For example, if cooling under refrigeration does not achieve the proper temperatures, cooling in the freezer or smaller portions of product may be another option. If product does not reach the required temperatures of 135 F to 70F within 2 hours and 70 F to 41F within 4 hours or 4 hour ambient temperature cool, it shall be discarded.

How will the results of implementing the RCP be communicated back to the inspector:

The inspector will review the logs maintained on site for completeness, corrective action, and correct procedures. The inspector will verify correct cooling on site by using the rate of cooling calculation and monitor all cooling methods to ensure they are being completed correctly and efficiently. It is the goal that through the use of these procedures the establishment builds an understanding of the importance of proper cooling methods and time/temperature parameters to prevent any future obstacles.

As the person in charge of the _____ located at _____, I have voluntarily developed this risk control plan, in consultation with _____ and understand the provisions of this plan.

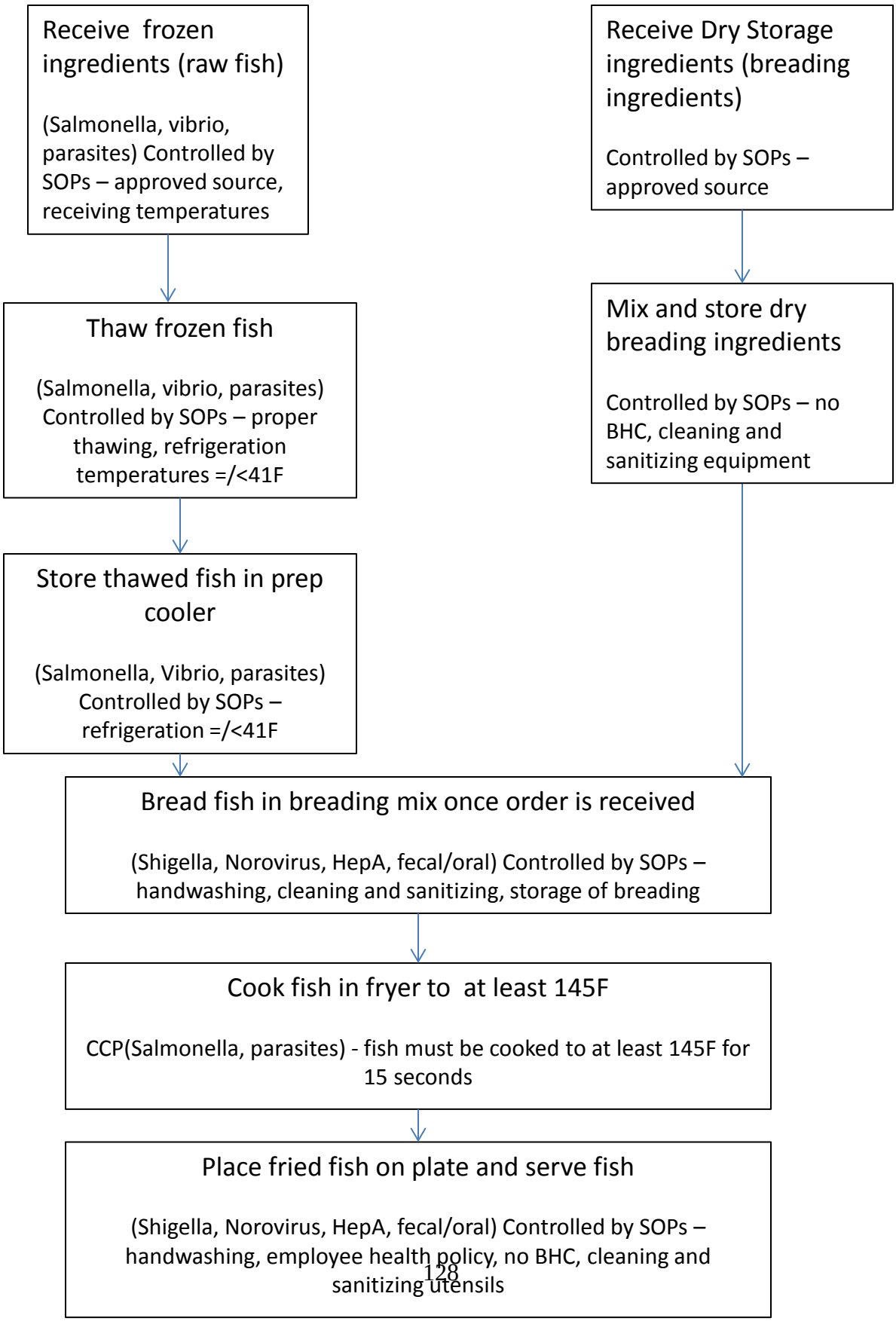
_____ _____

(Establishment Manager) (Date)

_____ _____

(Regulatory Official) (Date)

Process 2 Flow Diagram:
Breaded Fried Fish



Process 1:

Product: Oysters (High pressure processed to reduce Vibrio vulnificus and Vibrio paraheamolyticus to non-detectable levels). Shellfish held cold for immediate service.

Operational Step	Significant Hazard(s)	Critical Control Point(s)	Critical Limit or SOP
Receive (Product received during business hours)	Natural Toxins, Environmental Chemical Contaminants, Pathogens from Harvest Area (Ex. Vibrio spp, Hepatitis A&E, Shellfish toxins (PSP,DSP, NSP, ASP))	1) Receiving Temperature of Product 2) Approved Source	1) Operator verifies product is received at 41°F or below 2) SOP- Operator reviews shellfish tag and verifies each case of shellfish is from an approved shellfish shipper using current Interstate Certified Shellfish Shippers List. Operator verifies shellfish tag contains date and place of harvest, type and quantity of shellfish, and Harvester's ID#.
Storage (Product is placed in walk-in refrigerator with interior ambient temperature of 41°F)	Pathogen Growth	Cold holding	Maintain product at 41°F or below
Preparation (Shell washed and top half of shell removed at designated shellfish preparation sink, product placed on reusable platter with ice)	Various Fecal-Oral Route Pathogens and other organisms of public health importance	1) Good Personal Hygiene 2) Approved Source 3) Food Contact Surfaces Sanitized	1) SOP – Staff will wash their hands and wear gloves before preparing and plating shellfish for service. PIC will exclude or restrict ill employees 2) SOP-Ice obtained from main ice machine 3) SOP -Shell washed using hands covered with disposable glove. Other utensils used to prepare and serve shellfish sanitized before use
Serve (Product distributed to patron by wait staff)			

Process 3 –
Cooled Rotisserie Chicken

Procedures	Hazards	Critical Control Points (CCP)	Critical Control Limits (CCL)	Standard Operating Procedures (SOPs)
Receiving: Raw chicken is received and placed in cooler to maintain proper temperatures.	*Bacillus cereus* *Listeria monocytogenes* *Campylobacter jejuni* *Salmonella spp.* Fecal-oral bacteria/viruses			PIC monitors refrigeration temperatures. Proper employee handwashing procedures, personal hygiene, and employee health policy in place.
Storage: Raw chicken is maintained in walk in cooler at 41°F or below.	*Bacillus cereus* *Listeria monocytogenes* *Campylobacter jejuni* *Salmonella spp.* Fecal-oral bacteria/viruses			PIC monitors refrigeration temperatures. Proper employee handwashing procedures, personal hygiene, and employee health policy in place.
Preparation: Raw chicken is properly seasoned for the type of chicken the establishment wants to prepare.	*Bacillus cereus* *Listeria monocytogenes* *Campylobacter jejuni* *Salmonella spp.* Fecal-oral bacteria/viruses			Proper employee handwashing procedures, personal hygiene, and employee health policy in place.
Cooking: Raw chicken is then placed in the rotisserie oven for cooking. Chicken is cooked on a timer and when finished it is checked with a thermometer.	*Bacillus cereus* *Listeria monocytogenes* *Campylobacter jejuni* *Salmonella spp.* Fecal-oral bacteria/viruses	CCP 1	CCL = Cook to 165°F or above	Use of a calibrated thermometer and logs. No bare hand contact with RTE foods. Use of properly cleaned and sanitized equipment and utensils. Use of properly maintained equipment. Proper employee handwashing procedures, personal hygiene, and employee health policy in place.
Hot Holding: Rotisserie chicken is then placed in hot holding for customer grab and go.	*Bacillus cereus* *Clostridium perfringens* *Staphylococcus aureus* *Salmonella spp.* Fecal-oral bacteria/viruses	CCP 2	CCL = Hot holding at 135°F or above	Use of a calibrated thermometer and logs. No bare hand contact with RTE foods. Use of properly cleaned and sanitized equipment and utensils. Use of properly maintained equipment. Proper employee handwashing procedures, personal hygiene, and employee health policy in place.
Cooling: Product is then placed in the walk-in cooler in original containers for cooling.	*Clostridium perfringens* *Bacillus cereus* *Staphylococcus aureus* Fecal-oral bacteria/viruses	CCP 3	CCL = Cool 135F to 70F in 2 hours, 70F to 41F within 4 hours	Use of a calibrated thermometer. No bare hand contact with RTE foods. Use of properly cleaned and sanitized equipment and utensils. Use of properly maintained equipment. Proper employee handwashing procedures, personal hygiene, and employee health policy in place. Preventing contamination during storage in walk in cooler.
Cold Storage: Rotisserie chicken placed in cold display case for customer grab and go at 41°F or below for 7 days.	*Clostridium perfringens* *Bacillus cereus* *Listeria monocytogenes* Fecal-oral bacteria/viruses	CCP 4	CCL = Maintain chicken 41°F for 7 days.	Use of a calibrated thermometer. PIC monitors refrigeration temperatures. Properly maintained equipment.

STANDARDIZATION AND RESTANDARDIZATION EXERCISE SUMMARY AND SCORESHEETS

The standardization process requires:

- Field exercises to include eight (8) joint inspections of retail food establishments. Facilities selected for inspection must be comprised of high- and medium- risk facilities, to include one highly susceptible population facility, and one facility with an existing HACCP plan.
- During at least one of the joint inspections, the Candidate will develop a mock Risk Control Plan with the person in Charge for a critical control point that is out of compliance. (Annex 3, Section 1).
- During the joint inspection of a facility with an existing HACCP plan, the Candidate will conduct a verification of the HACCP plan and complete the HACCP Plan Verification Worksheet and the Verification Summary. (Annex 4, Section 1 and 2)
- The Candidate shall complete a flow diagram, with the appropriate CCPs and critical limits for each of the three processes.

The restandardization process for EHS requires:

- **EHS:** Field exercises to include four (4) joint inspections of retail food establishments. Facilities selected for inspection must be comprised of high- and medium- risk facilities, to include one highly susceptible population facility, and one facility with an existing HACCP plan.
- **Senior EHS:** Field exercises to include six (6) joint inspections of retail food establishments. Facilities selected for inspection must be comprised of high- and medium- risk facilities, to include one highly susceptible population facility, and one facility with an existing HACCP plan.
- During at least one of the joint inspections, the Candidate will develop a mock Risk Control Plan with the person in Charge for a critical control point that is out of compliance. (Annex 3, Section 1).
- During the joint inspection of a facility with an existing HACCP plan, the Candidate will conduct a verification of the HACCP plan and complete the HACCP Plan Verification Worksheet **AND/OR** the Verification Summary. (Annex 4, Section 1 and 2)

Candidate Name:_____

Date	Facility	Standard

Exercise	Date	Facility and Assignment	Standard
HACCP Verification			
Risk Control Plan			
Flow Chart, Process 1			
Flow Chart, Process 2			
Flow Chart, Process			

SCORING FORM AND INSTRUCTIONS FOR SCORING AND DETERMINING PERFORMANCE

The purpose of the following chart is to tally the disagreement between the Candidate's and the Standard's responses on the FDA Standardization Inspection Report (Annex 2 Section 1). The Standard determines whether the Candidate properly identified and categorized violative conditions on each of the "Foodborne Illness Risk Factors/*Food Code* Interventions" and the "Good Retail Practices (GRPs)" portions of the FDA Standardization Inspection Report. The Standard may mark an item "S" to reflect a disagreement in a case where the Candidate has the opportunity to make an observation or take a measurement and fails to do so, and intervention by the Standard would alert the Candidate to the missed opportunity.

Performance Criteria Tally of Disagreements in Each Establishment					
Candidate's Name:		**Standard's Name:**			
Candidate's Address: 3205 Freedom Drive	**Agency:** MCHD	**City:** Charlotte	**State:** NC	**Zip:** 28079	**County:** Mecklenburg
Standard's Address: 3205 Freedom Drive	**Agency:** MCHD	**City:** Charlotte	**State:** NC	**Zip:** 28079	**County:** Mecklenburg
Dates of Standardization:		**Location of Standardization:** Charlotte, NC			

ESTABLISHMENTS									
Performance Area	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**TOTAL (1-8)** **TOTAL (1-6)** **TOTAL (1-4)**
Risk Factors and Public Health Interventions									
Good Retail Practices									

Candidate's Composite Performance Score				
CANDIDATE'S FINAL PERFORMANCE SCORE				
Candidate's Name:		**Title:**		
Agency: Mecklenburg County Public Health		**Office Telephone Number:**		
Office Address: 3205 Freedom Drive		**City:** Charlotte	**State:** NC	**Zip:** 28079
Standard's Name:		**Standard's Title:**		
Agency: MCPH	**Office Telephone Number:**	**Location of Standardization:**		
Office Address: 3205 Freedom Drive		**City:** Charlotte	**State:** NC	**Zip:** 28079

Instructions: For the following Performance Areas circle the Level of Agreement.

PERFORMANCE AREA	LEVEL OF AGREEMENT	
A. FOODBORNE ILLNESS RISK FACTORS AND *FOOD CODE* INTERVENTIONS	**PASSES**	**FAILS**
B. GOOD RETAIL PRACTICES	**PASSES**	**FAILS**
C. APPLICATION OF HACCP PRINCIPLES	**SATISFACTORY**	**UNSATISFACTORY**
a. Process flow Charts *(Initial standardization only)*	**Satisfactory**	**Unsatisfactory**
b. Risk Control Plan *(Standardization and Restandardization)*	**Satisfactory**	**Unsatisfactory**
c. Verification of HACCP Plans *(Standardization and Restandardization)*	**Satisfactory**	**Unsatisfactory**
d. Statement of HACCP Principles *(Initial standardization only)*	**Satisfactory**	**Unsatisfactory**
D. INSPECTION EQUIPMENT	**SATISFACTORY**	**NEEDS IMPROVEMENT**
E. COMMUNICATION	**SATISFACTORY**	**NEEDS IMPROVEMENT**

STANDARD'S SIGNATURE: _____

STANDARD NAME (Print): _____

DATE: _____

SCORING FORM AND INSTRUCTIONS FOR SCORING AND DETERMINING PERFORMANCE

Foodborne Illness Risk Factors and *Food Code* Interventions: To pass this section, the Candidate must achieve an average score of 90 percent (no more than 50 disagreements for all 8 establishments) with no more than 12 disagreements per establishment.

Step 1. Determine the number of disagreements per establishment and record it in the chart (Performance Criteria Tally of Disagreements).

- If the disagreements/establishment is less than 13, proceed to step 2.
- If the disagreements/establishment is equal to or greater than 13, stop inspections. Candidate fails.

Step 2. Total the number of disagreements on Foodborne Illness Risk Factors and Food Code Interventions for all the establishments.

- If the disagreements are equal to or less than 50 for 8 establishments, the Candidate passes.
- If the disagreements are greater than 50 for 8 establishments, the Candidate fails.

- If the disagreements are equal to or less than 37 for 6 establishments, the Candidate passes.
- If the disagreements are greater than 37 for 6 establishments, the Candidate fails.

- If the disagreements are equal to or less than 25 for 4 establishments, the Candidate passes.
- If the disagreements are greater than 25 for 4 establishments, the Candidate fails.

Good Retail Practices: To pass this section, the Candidate must achieve an average score of 85 percent (no more than 32 disagreements for all 8 establishments) and have no more than 5 disagreements on GRPs per establishment.

Step 1. Determine the number of disagreements per establishment.

- If the disagreements/establishment are less than 6, proceed to step 2.
- If the disagreements/establishment are equal to or more than 6, stop inspections. Candidate fails.

Step 2. Total the number of disagreements on GRPs for all establishments.

- If the disagreements are less than or equal to 32 for 8 establishments, the Candidate passes.
- If the disagreements are greater than 32 for 8 establishments, the Candidate fails.

- If the disagreements are less than or equal to 24 for 6 establishments, the Candidate passes.
- If the disagreements are greater than 24 for 6 establishments, the Candidate fails.

- If the disagreements are less than or equal to 16 for 4 establishments, the Candidate passes.
- If the disagreements are greater than 16 for 4 establishments, the Candidate fails.

Candidate: _____ Date(s): _____

Candidate Standardization

Feedback Form

Standard Name: _____

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Standard Name: _____

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Appendix K: Example Schedule

REHS	Due Date	Standardization or Restandardization	Senior Standard	FDA Standard	Supervisor	*COVID-19 Exceptions	Comments
Program Managers/Supervisors							
Amber Daniels	1/2023	Restandardization (4)		Wendy/Stephen			Angie/QA
Lynn	6/2022	Restandardization		NCDHHS/Angie			Delayed
Wendy Bell	5/2022	Restandardization (6)		FDA/Donna	Amber Daniels	*	Delayed
Marie Cain	8/2022	Restandardization (4)		NCDHHS	Stephen Graham		
Matt Cook	10/2022	Restandardization (6)	Suataj	Wendy	Amber Daniels		
Seniors							
Suataj Williams	8/2022	Restandardization (6)	Josh	Stephen	Wendy Bell		
Chris McKenzie	11/2022	Restandardization (4)	Taylor		Matt Cook		
Daniel Squirewell	12/2022	Restandardization (6)	Suataj	Matt	Matt Muris		
Mark Oliver	12/2022	Restandardization (4)	Cassandra		Matt Cook		
Cassandra Thompson	5/2022	Restandardization	AJ	Matt Muris	Matt Muris		Completed
EHS							
Alexis Welch	12/2022	Restandardization (4)	Stephen		Shawn Blackmon		
Naly Lor	10/2022	Standardization (8)	Daniel	Matt	Lynn Lathan		
Sam Cary	10/2022	Standardization (8)	AJ	Wendy	Amy Michelone		
Anna Ortiz	10/2022	Standardization (8)	Josh	Matt	Lynn Lathan		
Amber Artis	6/2022	Standardization		Stephen Graham	Lynn Lathan		
Andrew Lee	6/2022	Standardization	Cassandra	Stephen Graham	Marie Cain		Pending Homework
Kyril Copeland	7/2022	Standardization	Taylor	Stephen Graham	Lynn Lathan		Pending - July
Terry Watson	1/2023	Restandardization (4)	Cassandra		Shawn Blackmon		

** Due to the COVID-19 pandemic, staff may have completed standardization later than the required due date. Our FDA Retail Food Specialist has requested documentation of those instances to ensure compliance in the future.*

	Indicates completion shortly after deadline of 12/2022	Matt	4
		Wendy	2

Standardization Jan-June 2022 | **Standardization July - Dec 2022**

U.S. Department of Health and Human Services Public Health Service
Food and Drug Administration

Certificate of Achievement

Presented to

Mecklenburg County Health Department

For outstanding commitment to retail food safety and the continous improvement of the retail food regulatory program as demonstrated by meeting

Standard #2 - Trained Regulatory Staff

Of the FDA Voluntary National Retail Food Regulatory Program Standards

Donna M Wanucha
FDA Retail Food Specialist

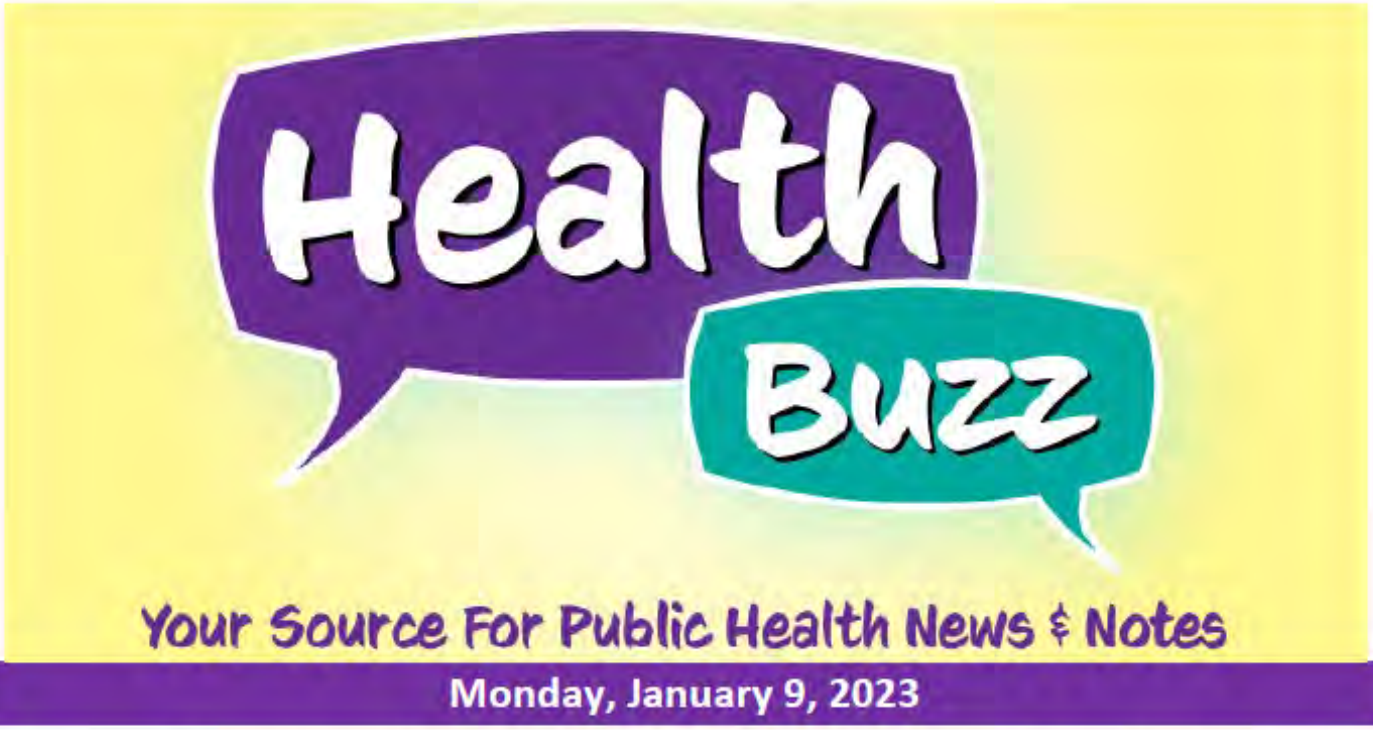
Elizabeth O'Malley
FDA Retail Food Protection Branch Director

FDA U.S. FOOD & DRUG ADMINISTRATION

Achieved on: November 30, 2022

MECKLENBURG COUNTY
North Carolina

From: Health Buzz <healthbuzz@mecklenburgcountync.gov>
Sent: Monday, January 9, 2023 2:35 PM
To: HEALTH-ALL <HEALTH-ALL@mecklenburgcountync.gov>
Subject: HealthBUZZ - 1/9/2023: MLK Day; FY23-25 Strategic Business Plan; Community Engagement Sessions; Mentorship Program and more.....



As we approach the recognition of the birth and legacy of **Dr. Martin Luther King,** I offer one of my favorite of his quotes. ***"Life's most persistent and urgent question is: What are you doing for others?"*** This question provides us with a critical reflection *and challenge* in all areas of our lives: at work, in our homes and our communities. How can we use our time, talent, resources and energy to help other people? That is at the core of our mission as a department – helping our community live healthier lives.

As I mentioned last week, I encourage everyone to not overwhelm yourself with lofty lists of new year's resolutions, but instead find simple ways to be better in 2023– whatever *better* looks like for you. That will be our goal as a department, to serve Mecklenburg County better. We are guided by a very ambitious strategic business plan but ultimately it is the community's needs and voice that will guide our activities and anchor our focus. After all, we are here to serve them. The presence of community members in our planning processes, Community Health Assessment, Violence Prevention, EHE and other efforts is essential to our work, helps to keep us authentic and

generates approaches that are most effective in advancing our shared goals.

I'd like to take a moment to acknowledge one of our programs efforts to be better. Our Environmental Health program recently met all requirements for Standard 2 of the US Food and Drug Administration's Voluntary Standards for Retail Food Service Programs. This voluntary improvement was implemented to ensure we maintain a highly-trained staff and consistency within our inspection program. Our team established an Environmental Health training team who implemented a two-tiered training approach that incorporates in-classroom and field training that meets and exceeds the standards set by US FDA. This exemplary training program built on innovation, advances our Environmental Health program ahead of the state and other local health departments and will undoubtedly make service to customers *better*. Kudos and congratulations to all involved!

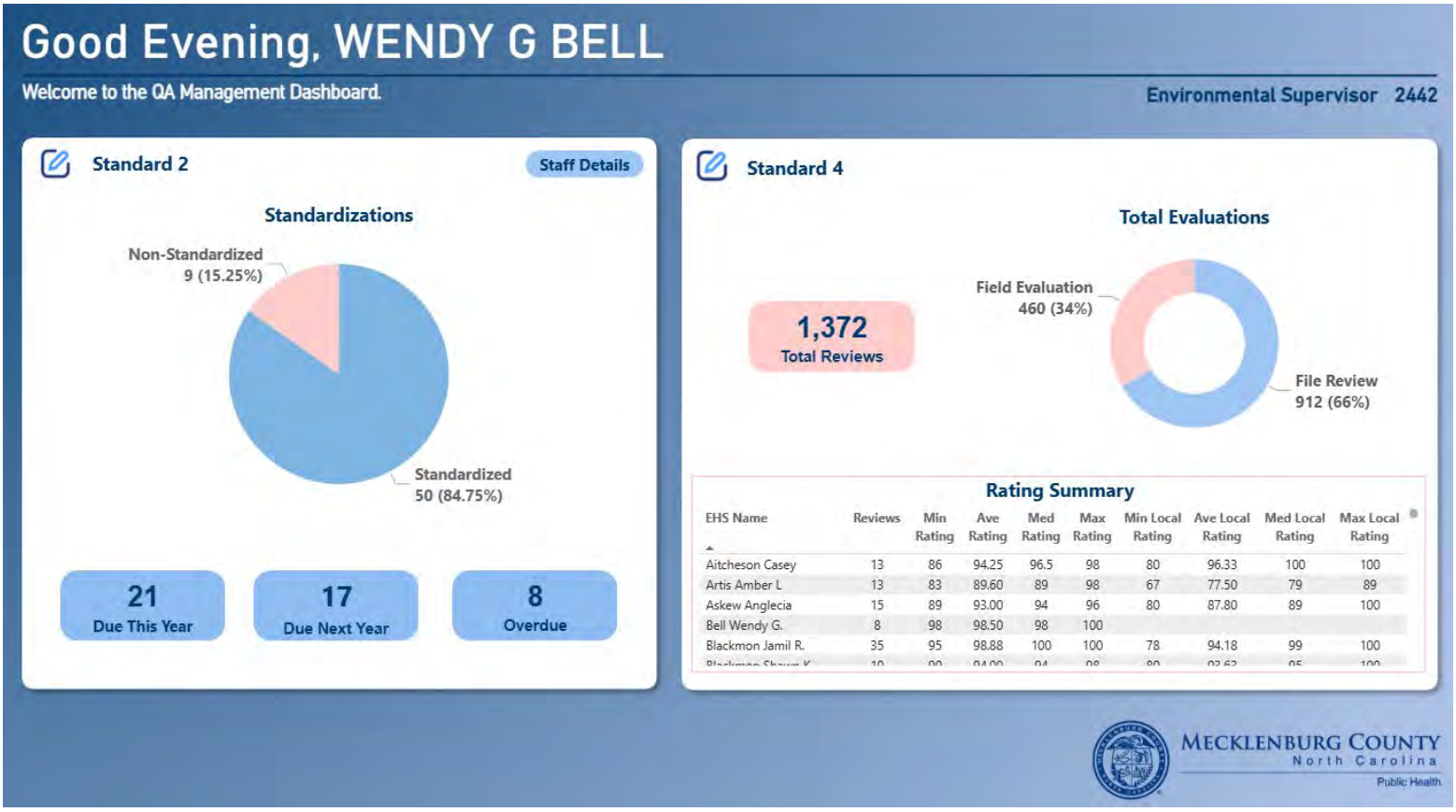
Enjoy the coming long weekend. Take a moment to do something for someone else in Dr. King's honor. Local opportunities, including community service, cultural events, etc. are listed here: MLK Day Celebrations and Observances in Charlotte 2023 - Charlotte On The Cheap.

Best,

Raynard

Mecklenburg County Environmental Health

Power BI Dashboard – Standard 2





ORIENTATION GUIDE

FOR

SANITARIANS'

INITIAL FIELD TRAINING PERIOD

Prepared by representatives of

Sanitation Branch, Environmental Health Section,
Division of Health Services, N. C. Department of
Human Resources

Educational Committee, Environmental Health Section,
N. C. Public Health Association, Inc.

Raleigh, N.C.

April 1985

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ORIENTATION GUIDE FOR SANITARIANS' INITIAL FIELD TRAINING PERIOD

1. Introduction:

In North Carolina, newly-employed sanitarians receive formal basic intern training for four weeks in one of several "orientation/training centers" located in different geographic areas of the state. They usually receive this initial field orientation/training about one month after employment. In addition, newly-employed sanitarians, except those who have had relevant work experience or those who have had appropriate academic background, are required to complete the CDC Homestudy Course 3010-G entitled "Community Hygiene".

During 1963, the orientation/training needs of North Carolina sanitarians were studied by an Ad Hoc Committee and a working subcommittee. Early studies indicated that improvement was needed in several areas, including the initial training period. A "Manual for Sanitarians Orientation Course" was developed in January 1964 and has been revised twice since that date. On October 15, 1974, a questionnaire was mailed to 22 randomly-selected supervisors across the state. Fourteen supervisors responded and indicated that the 1968 Guide needed considerable revision. Valuable suggestions were included in the responses. As part of the ongoing process of reviewing and updating, the training directors met in July and October 1984 and made revisions to this Guide.

2. Objective and Scope:

Formal academic instruction in basic science is not included in the course content. Its objective is to give the newly-employed sanitarian an organized preliminary introduction to the duties and responsibilities of health departments and sanitarians. The course is designed to introduce the newly-appointed sanitarian to: (1) the procedures for making inspections required by State and local laws; (2) the handling of certain requests for service; and (3) how to keep necessary administrative and service records. Further, as indicated by the results of the questionnaire survey, the initial training period should provide a foundation on which the newly-employed sanitarian can build and relate to after returning to his home county. It should be pointed out that the initial field training period (four weeks) cannot be expected to produce a fully trained and seasoned sanitarian.

3. Purposes:

The Guide is designed primarily to assist the individual in the selected local health department who is responsible for the direction of the orientation/training period (in the Guide he is called the Training Director) and other staff members who participate. It is suggested that any major deviation from the Guide be reported to the Sanitation Branch, Environmental Health Section, Division of Health Services, North Carolina Department of Human Resources.

Other purposes include standardization of orientation/training periods among the centers, appraisal of students and teachers, and improvement of orientation/training through regular review and revision of the Guide.

This document is intended to be used as a guide only. It is expected that Training Directors will adapt the Guide to their local situations.

4. Daily Schedule:

The Training Director should develop a daily schedule for each intern or group of interns, in accordance with availability of staff members, special work programs, etc. The following illustrative schedule is based upon 5-day weeks with an 8-hour work day. It is expected that interns spend part of their evening hours in study. Some Training Directors find it helpful to schedule a conference at the end of work each Friday to review the week's activities with the intern.

Day #1	8:00 a.m.	Intern Reports to Training Director
	8:30 a.m.	Introduction/Local Arrangements
	11:00 a.m.	Briefing on Month's Activities
	12:00 noon	Lunch
	1:00 p.m.	Briefing Session Continued; Tour of Health Center Building
	3:00 p.m.	Administration of Local Health Departments
	5:00 p.m.	Adjourn
Day #2	8:00 a.m. - 12:00 noon	Public Health Laboratory Activities
	1:00 p.m. - 5:00 p.m.	Environmental Health Records
Day #3	8:00 a.m. - 5:00 p.m.	Environmental Health Activities (General)

Day #4	8:00 a.m. - 12:00 noon	Milk Plant
	1:00 p.m. - 5:00 p.m.	Dairy Farm
Day #5	8:00 a.m. - 5:00 p.m.	Water Supplies

END OF FIRST WEEK

Day #6	8:00 a.m. - 12:00 noon	Water Supplies
	1:00 p.m. - 5:00 p.m.	Individual Sewage Disposal
Day #7	8:00 a.m. - 5:00 p.m.	Individual Sewage Disposal
Day #8	8:00 a.m. - 5:00 p.m.	Individual Sewage Disposal
Day #9	8:00 a.m. - 12:00 noon	Individual Sewage Disposal
	1:00 p.m. - 3:00 p.m.	Individual Sewage Disposal
	3:00 p.m. - 5:00 p.m.	Recreation
Day #10	8:00 a.m. - 5:00 p.m.	Institutions

END OF SECOND WEEK

Day #11	8:00 a.m. - 5:00 p.m.	Food Protection Management
Day #12	8:00 a.m. - 5:00 p.m.	Food Protection Management
Day #13	8:00 a.m. - 5:00 p.m.	Food Protection Management
Day #14	8:00 a.m. - 5:00 p.m.	Food Protection Management
Day #15	8:00 a.m. - 5:00 p.m.	Food Protection Management

END OF THIRD WEEK

Day #16	8:00 a.m. - 5:00 p.m.	Vector and Rodent Control
Day #17	8:00 a.m. - 5:00 p.m.	Lodging Places
Day #18	8:00 a.m. - 5:00 p.m.	On-site Sewage Disposal/Soil Evaluation
Day #19	8:00 a.m. - 12:00 noon	Complaint Investigation and Request for Service
	1:00 p.m. - 5:00 p.m.	On-site Sewage Disposal/Soil Evaluation
Day #20	8:00 a.m. - 10:00 a.m.	On-site Sewage Disposal/Soil Evaluation
	10:00 a.m. - 12:00 noon	Environmental Sanitation Activities (General)
	1:00 p.m. - 5:00 p.m.	Review, Discussion and Evaluation

END OF INITIAL TRAINING PERIOD

5. Subject Outlines:

The following outlines, for each of the subjects, give also the time spent, the participants, the objectives, and the activities suggested to accomplish these objectives.

SUBJECT: Briefing on Month's Activities

TIME: 3 Hours

PARTICIPANTS:
1. Training Director
2. Intern

OBJECTIVES: To inform the intern of the training course content, to introduce him to the staff members of the health department in which the training is being conducted, and to explain in detail the purpose and nature of the several training activities for sanitarians.

ACTIVITIES:

1. Explain in detail the purposes of the training period.
2. Request that the intern be observant and take full advantage of all opportunities to learn.
3. Introduce the intern to the members of the Environmental Health staff.
   a. Explain organization chart.
4. Conduct the intern on a tour of the Health Center.
   a. Point out the names of the sections or departments occupying space in the Health Center.
5. Pre-Test :
   a. Explain the reasons for giving the pre- and post-tests.
   b. Explain various educational opportunities available such as CDC homestudy courses and short courses which will help keep him/her abreast of current knowledge in the field.
   c. Give the pre-test.

SUBJECT: Administration of Local Health Departments

TIME: 2 Hours

PARTICIPANTS:
1. Health Director or designee
2. Intern
3. Training Director

OBJECTIVES: For the intern to learn the administrative and legal structure and the responsibilities of local health departments in North Carolina.

ACTIVITIES:

1. Definitions:
   a. Winslow defined public health as "The science and art of preventing disease, prolonging life, and promoting health and efficiency through organized community effort."
   b. The World Health Organization defines health as follows: "Health is a state of complete physical, mental, and social well being, and not merely the absence of disease or infirmity."
   c. Environmental health has been defined by the Harvard School of Public Health as "the science of the well-being of man as related to his environment including both the effects of man on his surroundings and the effects of his surroundings on him."
2. The legal structure of:
   a. Commission for Health Services.
   b. Administrative staff of Division of Health Services, Department of Human Resources.
   c. Local boards of health.
   d. Local health departments.
   e. Board of Sanitarian Examiners.

3. Public health laws, rules, and ordinances:

   a. State.

   b. Local:

      (1) County.

      (2) City.

4. The administration of public health departments in North Carolina:

   a. Financial support: Federal-State-Local.

   b. Personnel qualifications - State Personnel Department.

   c. Personnel management:

      (1) Duties and responsibilities of section supervisors.

      (2) Delegation of responsibilities to personnel in various sections.

      (3) Promotion of harmony between staff members through regular staff conferences.

   d. Program planning, implementation, and evaluation:

      (1) Explain meaning and importance of program planning in overall public health program.

      (2) Discuss advantages of planned program as related to conservation of time, coordination of activities, assignment of personnel to specific duties, and coverage of all public health activities rather than one specific activity.

      (3) Explain the importance of working with others outside the field of public health in order to attain a better environment.

      (4) Discuss the use of education rather than legislation to promote the public health program.

(5) Explain the importance of making a periodic survey of each program to determine its effectiveness.

e. Relationship of local health department to:

(1) Department of Human Resources, Division of Health Services.

(2) Other State agencies (Social Services, Agriculture, State Personnel Department, Attorney General, Public Instruction, Labor, Insurance, Institutions of Higher Education, Institute of Government, Division of Environmental Management, Division of Facility Services, Soil Conservation Service, etc.).

(3) Board of county commissioners and local board of health.

(4) Other official local agencies (Social Services, public school systems, municipalities, city and regional planning boards and departments, etc.).

(5) Other local agencies and groups.

SUBJECT: Public Health Laboratory Activities

TIME: 4 Hours

PARTICIPANTS:
1. Laboratory Director
2. Intern
3. Training Director

OBJECTIVES: For the intern to know the services that are provided by the public health laboratory and how these may be utilized by the sanitarian.

ACTIVITIES:
1. Scope of the public health laboratory program:
   a. Diagnostic and epidemiological - Human.
   b. Diagnostic and epidemiological - Animal.
2. Laboratory services in environmental sanitation with emphasis on what the results mean to the sanitarian:
   a. Water analysis.
   b. Milk analysis.
   c. Food analysis.
   d. Tests for sanitation of equipment and containers.
   e. Air analysis.
   f. Special samples.
   g. Soil analysis.
3. Local and state laboratory relationship:
   a. Certification of local laboratory.
   b. Services rendered by local laboratory.
   c. Services rendered by state laboratory:
      (1) Radiation.
      (2) Rabies control.

SUBJECT: Environmental Health Records

TIME: 4 Hours

PARTICIPANTS:
1. Clerk-Secretary
2. Training Director
3. Intern

OBJECTIVES: For the intern to know the services provided by the clerical and secretarial staff of the health department and how they may be utilized by the sanitarian; for the intern to know the nature of the records kept by the health department; and for the intern to appreciate the importance of records and to know the procedures followed in keeping the necessary administrative and service records for the sanitation activities.

ACTIVITIES:

1. Daily Activities Report:
   a. Explain coding system.
   b. Review and explain coding as related to the report of monthly activities.
2. Monthly Activities Report:
   a. Review and explain.
3. Annual Activities Report:
   a. Review and explain last year's annual report.
4. Service Records:
   a. Importance of record keeping.
   b. Food and lodging places and institutions; septic tanks, water supplies and privies.
   c. Inspection forms.
   d. Correspondence.
   e. Regulations.
   f. Authorization.
   g. Court cases.

5. Handling of Laboratory Reports .

6. Importance of Secretarial and Clerical Staff Services .

7. Review of Informal Collection of Environmental Health Policy Memoranda/Letters .

SUBJECT: Environmental Health Activities

TIME: 10 Hours (This material should be incorporated at appropriate times into the 4-week training period.)

PARTICIPANTS:
1. Director of Environmental Health or Sanitarian Supervisor
2. Intern
3. Training Director

OBJECTIVES: For the intern to know the activities that constitute a local environmental health program in North Carolina.

ACTIVITIES:
1. Outline the State laws and rules which are enforced by the local sanitarians.
2. Discuss the local ordinances which are enforced by the local sanitarians.
3. Enumerate and describe the environmental health activities of local health departments in North Carolina:
   a. Water Supply:
      (1) Public (Community).
      (2) Private .
   b. Liquid Waste Disposal:
      (1) On-site Sewage Disposal.
      (2) Soil Evaluation .
      (3) Public (Community) Systems.
   c. Food Protection:
      (1) Restaurant Inspection.
      (2) Other Food Establishments:
         (a) Sandwich Manufacturing Plants.
         (b) Salad Manufacturing Plants.
         (c) Vending Machines and Commissaries.
         (d) Seafood (Shellfish).
         (e) Meat Markets.

d. Milk Sanitation:

(1) Dairy Farms.

(2) Pasteurization Plants.

(3) Pasteurized Finished Product Sampling.

(4) Temperature of Finished Products.

e. Solid Waste Management:

(1) Storage.

(2) Collection.

(3) Disposal.

f. Vector and Rodent Control:

(1) Consultation.

(2) Spraying, Larviciding, Drainage, Trapping, Poisoning.

g. Institutional Environment:

(1) Components of Institutional Environment.

(2) Public Schools.

(3) Nursing and Rest Homes.

(4) Others.

h. Recreational Environment:

(1) Summer Camps.

(2) Swimming Pools.

(3) State and National Parks.

(4) Highway Rest Stops.

i. Working Environment:

(1) Interagency Relationships (OSHA and the Labor Department).

(2) Food Protection.

(3) Migrant Safety and Housing.

j. Community Air Pollution Control:

(1) Interagency Relationships.

(2) Investigation of Complaints.

k. Ionizing Radiation Protection:

(1) Interagency Relationships.

(2) Investigation of Complaints.

l. Investigation of Complaints:

(1) Determine Public Health Significance.

(2) Take or Advise Remedial Action.

m. Lodging Places.

n. Plumbing and Cross Connections.

o. Water Pollution Abatement.

p. Environmental Radiation Surveillance:

(1) Microwave Detection.

q. Noise Pollution and Detection.

r. Rabies.

4. Professional Performance.

SUBJECT: Water Supplies

TIME: 12 Hours

PARTICIPANTS: 1. Training Director
2. Intern

OBJECTIVES: To enable the intern to evaluate the location and protection of private wells, springs (ground water supply), and community water systems for compliance with existing standards.

ACTIVITIES:

1. Location of the Ground Water Supply:
   a. Distance from known sources of pollution.
   b. Location of the well on site with respect to other facilities and terrain.
2. Construction Details:
   a. Casing.
   b. Grout.
   c. Sanitary seal.
   d. Concrete slab.
   e. Pumps and pump locations.
   f. Protection from freezing.
3. Disinfection:
   a. Method.
   b. Retention time.
   c. Function, location and design of hypochlorinators.
4. Sampling:
   a. Correct procedure for collecting samples.
   b. When to collect samples.
   c. Coliform group organisms and their significance as indicators of water quality.
5. Community and Institutional Systems.

6. Cross Connections and Back Siphonage.
7. Groundwater, Division of Environmental Management.
8. Water Supply Branch, Division of Health Services.
9. Field Trip.

SUBJECT: On-site Sewage Disposal

TIME: 40 Hours

PARTICIPANTS:
1. Training Director
2. Intern

OBJECTIVES: To enable the intern to evaluate the location and operation of septic tank systems, community sewer systems, and other individual disposal systems for compliance with existing standards.

ACTIVITIES:
1. Review and discuss the State laws and rules which are enforced by local sanitarians.
2. Review and discuss the county ordinances which are enforced by the local sanitarians.
3. Explain the location, construction, and operation of ground absorption systems:
   a. Suitability of soils.
   b. Site evaluation.
   c. Required liquid capacity of tank:
      (1) Criteria for determining size of tank.
   d. Designing and locating tank.
   e. Location of inlet and outlet in tank.
   f. Amount of slope in nitrification line.
   g. Placement of drain tile.
   h. Type and amount of aggregate over and under drain tile.
   i. Depth of nitrification trench.
   j. Dosing tank and siphon.
   k. Plan review for sanitary sewage systems.
4. Schedule field trips for intern to observe the features discussed in conference:
   a. Preparation of site report including soil considerations.

b. Issuance of Improvement Permit.

c. Issuance of Certificate of Completion/Operations Permit.

5. Special requirements for:

a. HUD.

b. Farmers Home Administration.

c. Veterans Administration.

6. Community and institutional systems.

7. Other individual disposal systems.

SUBJECT: Vector and Rodent Control

TIME: 8 Hours

PARTICIPANTS:
1. Training Director
2. Intern

OBJECTIVES: To enable the intern to recognize an insect and rodent problem and recommend control procedures.

ACTIVITIES:

1. The relationship between control of the environment and control of insects and rodents:
   a. Elimination of breeding places.
   b. Elimination of shelter.
   c. Elimination of food and water.
2. Use of insecticides:
   a. Solutions, suspensions, emulsions, dusts.
   b. Application by spraying, fogging, vaporizing, dusting, U.L.V.
   c. Compounds in current usage and available to public - trade names.
3. Rodenticides:
   a. Compounds in current use - trade names.
4. Safety precautions:
   a. Directions and caution statements on labels.
5. Utilization of licensed commercial pest control operators:
   a. Field visit.
6. Pesticide regulations:
   a. Licensing of applicators.

SUBJECT: Food Protection Management

TIME: 40 Hours

PARTICIPANTS:
1. Training Director
2. Intern
3. Food Sanitarian

OBJECTIVES: To introduce the intern to the procedures for the evaluation of food service establishments according to Department of Human Resources, Division of Health Services' rules.

ACTIVITIES:
1. Review and discuss the "Rules Governing the Sanitation of Restaurants and Other Foodhandling Establishments".
2. Review and discuss the inspection forms for restaurants and other foodhandling establishments.
3. Describe the inspection routine.
   a. Meet the manager or person in charge (if manager is not present, ask for the person in charge in his absence). Advise that this is a visit to make an official inspection.
   b. Request manager to accompany sanitarian on inspection tour.
   c. Leave briefcase in office. Make inspection of entire establishment in following order, discussing violations found and improvements made, as noted. Collect water sample at least once a year.
      (1) Check water supply.
      (2) Check sewage disposal.
      (3) Check outside garbage storage, cleanliness of storage containers, and condition of outside premises.
      (4) Inspect toilet rooms.
      (5) Wash hands.

(6) Make a thorough inspection of all parts of the kitchen in an orderly fashion. Check temperature of hot and cold food storage and dishwashing. Inspect all food contact surfaces.

(7) Inspect dining area.

(8) Return to restaurant office and make out score sheet.

(9) Explain violations recorded and methods of correction.

(10) Make out new grade card, remove old grade card and post new grade card in a conspicuous place.

4. Assign intern to selected sanitarian to make field visit and inspection of restaurant. (Intern makes out practice score sheet while sanitarian makes official sheet.)

5. Intern returns to office for discussion of field visit with Training Director.

6. Other foodhandling establishments:

   a. Review and explain laws and rules governing:

      (1) Meat markets

      (2) Salad manufacturing plants

      (3) Sandwich manufacturing plants

      (4) Vending machine commissaries

      (5) Vending machine locations

      (6) Bed and breakfast homes

   b. Describe inspection routines (use applicable procedures outlined for restaurant inspection).

7. Assign intern to selected sanitarian to make inspections of some of the above-listed establishments.

8. Intern returns to office of Training Director for discussion session at the end of each day.

9. Plan Review.

10. Food service educational programs.

SUBJECT: Institutions

TIME: 8 Hours

PARTICIPANTS:
1. Training Director
2. Intern
3. Sanitarian

OBJECTIVES: To introduce the intern to the procedures for the inspection and grading of institutions according to Division of Health Services' rules, and the identities of the State agencies responsible for licensure.

ACTIVITIES:
1. Review and discuss the "Rules Governing the Sanitation of Private Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums and Educational and Other Institutions" and rules relating to Day Care Facilities, Foster Homes, Residential Care Facilities, and School Sanitation Standards.
2. Review and discuss the inspection forms for institutions.
3. Name and discuss the role of other agencies concerned with the licensing of institutions.
4. Discuss the role of the health department as it relates to public school plant inspections.
5. Explain the inspection procedures for hospitals, nursing homes, rest homes, sanitariums , sanatoriums, day care facilities, etc. Use applicable part of restaurant inspection procedure outline and add:
   a. Inspect outside premises and garbage cans. Inspect incinerator for operating room wastes.
   b. Make inspection of food service facilities.
   c. Inspect rooms, wards, etc. (only unoccupied rooms)
   d. Inspect formula room.
   e. Inspect ice machine:
      (1) Containers for transporting ice.
      (2) Ice scoop storage.

f. Inspect bedpan washer and sterilizer.

g. Inspect linen storage (clean - soiled).

h. Inspect washing and sanitization facilities for glasses and pitchers used in patients' rooms.

i. Inspect all public toilets.

j. Inspect bathrooms used by patients.

k. Inspect all refrigeration units used for storing patient foods, drink, etc.

l. Inspect all storage places.

6. Assign intern to selected sanitarian to make an official inspection of an institution covered by law. (Intern makes out practice score sheet while sanitarian makes official sheet.)

SUBJECT: Dairy Farms and Milk Plants

TIME: 8 Hours

PARTICIPANTS:
1. Training Director
2. Milk Sanitarian
3. Intern

OBJECTIVES: To introduce the intern to the procedures for making a dairy farm inspection and properly filling out the dairy farm inspection form. To enable the intern to recognize the several steps in the processing of milk in a modern pasteurization plant.

ACTIVITIES:
1. Explain and discuss the principal features of the current milk rules.
2. Explain and discuss the inspection forms for dairies.
3. Review and discuss permanent records of bacteria counts and temperatures.
4. Assign intern to a milk sanitarian to:
   a. Observe the official inspections of plant and producer dairy farms.
   b. Visit a milk processing plant, and learn the different steps in the processing of milk.

SUBJECT: Lodging Places

TIME: 8 Hours

PARTICIPANTS:
1. Training Director
2. Intern
3. Sanitarian

OBJECTIVES: To introduce the intern to the procedures for the inspection and grading of lodging establishments according to the Division of Health Services.

ACTIVITIES:
1. Review and discuss the "Rules Governing the Sanitation of Lodging Places".
2. Review and discuss the inspection form for lodging places.
3. Describe the inspection routine:
   a. Meet manager or person in charge, advise him that this is a visit to make an official inspection.
   b. Ask manager to select, from the register, rooms which are unoccupied. Ask manager to accompany sanitarian.
   c. Using items on score sheet as a guide, make thorough inspection of a representative number of rooms. If there is more than one maid employed, check a representative number of rooms cleaned by each maid.
   d. Check outside premises.
   e. Check water supply.
   f. Collect water sample at least once a year.
   g. Check sewage disposal facilities.
   h. Check facilities for washing and sanitizing glasses and ice tubs.
   i. Check ice madhine and/or storage chest.
   j. Check clean and soiled linen storage area.

k. Make out score sheet and new grade card.

l. Explain in detail the violations found and method for correction.

m. Remove old grade card and post new card.

4. Assign intern to sanitarian to make a field visit and an official inspection of a lodging place. (Intern makes out practice sheet while sanitarian makes official sheet.)

SUBJECT: Recreation Areas

TIME: 2 Hours

PARTICIPANTS:
1. Training Director
2. Intern
3. Sanitarian

OBJECTIVES: To introduce the intern to the principles of sanitation which apply to the recreational environment in summer camps, at swimming places, and similar areas. The intern shall recognize the several steps in the purification process and be able to state the recognized standards for swimming waters.

ACTIVITIES:
1. Review and discuss local ordinances governing the sanitation of swimming pools.
2. Review and discuss "Rules Governing the Sanitation of Summer Camps".
3. Review and discuss the inspection form for summer camps.
4. Review and discuss the different types of filters used in swimming pools.
5. Discuss the chemicals used in swimming pool water treatment.
6. Arrange for intern to make a field visit and an inspection of a swimming pool and a summer camp.
7. Natural bathing areas.

SUBJECT: Complaint Investigation and Requests for Service

TIME: 4 Hours

PARTICIPANTS:
1. Training Director
2. Intern
3. Sanitarian

OBJECTIVES: To introduce the intern to the procedures for investigating complaints and securing necessary corrective action, keeping in mind the public health significance of the situation. To introduce the intern to the procedures for appraising situations and making recommendations, in accordance with current acceptable environmental sanitation practices, to persons requesting assistance.

ACTIVITIES:

1. Complaint Investigation:
   a. Explain and discuss the different types of complaints received by the health department, the importance of thorough investigations, and potential public relations benefits.
   b. Review and discuss the State law regarding abatement of an imminent hazard.
   c. Explain action to be taken in case of a complaint not affecting the public health.
   d. Explain what steps should be taken if sanitarian has to resort to legal action to secure correction.
   e. Give examples of past complaints and explain in detail how corrections were secured.
   f. Have intern accompany sanitarian in making a complaint investigation:
      (1) Have intern write a short narrative report of the investigation, including:
         (a) Sanitarian's initial approach.
         (b) Nature of conditions found.

(c) Whether or not an imminent hazard existed.

(d) Steps taken by sanitarian to secure correction.

2. Requests for Service:

a. Explain to intern the importance of good public relations in carrying out his duties.

b. Give examples of recognized standards used by sanitarians (NSF Standards, "Protection of Private Water Supplies", etc.) and explain how these are used.

c. Explain that the health department often receives misdirected requests for services performed by other agencies, and that such requests are courteously referred to the proper agency. Give examples.

(1) Request for license to operate boarding home for children.

(2) Request for permit to operate a soft drink bottling plant.

d. Describe a specific case in which advice was requested and given, to an establishment under inspection, on how to comply with the legal requirements (e.g., how to arrange new dish-washing equipment).

e. Arrange for intern to accompany sanitarian on visit to give assistance in response to a request (preferably relating to a food service establishment).

f. Discuss with intern after visit.

SUBJECT: Review, Discussion, and Evaluation

TIME: 4 Hours

PARTICIPANTS:
1. Training Director
2. Intern

OBJECTIVES: To provide an opportunity for the intern to review the orientation course, to ask questions relating to the topics covered, and to successfully complete a final examination.

ACTIVITIES:
1. Review and discuss the orientation course with the intern.
2. Have intern complete the examination (post-test) and correct the examination before the question period.
3. Answer intern's questions, consulting other staff members if necessary.

6. Examination:

Examination questions have been prepared to cover most of the subjects. The questions are designed to find out how well the instruction given during the orientation course met the stated objectives. These questions are included in a separate leaflet.

Interns should be given the same examination: (1) at the start of the course on Day #1, and (2) at the end of the course on Day #20, as indicated in the Subject Outlines, (often referred to as "Pre-Test" and "Post-Test"); and the results should be compared.

It should be noted that the Pre-Test and Post-Test results are given an evaluation of several things, including:

a. Information given by trainers.
b. Information received by intern.
c. Needs for changes in orientation course.

7. Weekly Report of Sanitarian Orientation Activities [DHS 1057 (Revised 4/85)]:

The following report is to be completed at the end of each week by the intern in triplicate, with copies to:

a. Head, Sanitation Branch, Environmental Health Section, Division of Health Services, N. C. Department of Human Resources, Raleigh, North Carolina
b. Training Director (of Training Center)
c. Intern's files

The primary purpose of this report is to encourage close adherence to the proposed course schedule.

N. C. Department of Human Resources
Division of Health Services

WEEKLY ACTIVITY REPORT
SANITARIAN INTERN

ORIENTATION CENTER	INTERN'S NAME	WEEK ENDING FRIDAY	REPORT NUMBER

ACTIVITY	TOTAL HOURS FROM "GUIDE"	HOURS THIS WEEK	TOTAL HOURS TO DATE
1. Introduction/Local Arrangements	3		
2. Briefing Session	3		
3. Administration, Local Health Departments	2		
4. Public Health Laboratory Activities	4		
5. Environmental Health Records	4		
6. Environmental Health Activities (General)	10		
7. Water Supplies	12		
8. On-Site Sewage Disposal/Soil Evaluation	40		
9. Vector & Rodent Control	8		
10. Food Protection Management	40		
11. Institutions	8		
12. Dairy Farm & Milk Plant	8		
13. Lodging Places	8		
14. Recreation	2		
15. Complaint Investigations & Requests for Services	4		
16. Review, Discussion, Evaluation	4		
TOTALS	160		

DHS 1057 (Revised 4/85)
Sanitation (Review 4/89)

Purpose: This Weekly Activity Report is used to record the hours a sanitarian intern spends on the listed activities during his orientation/initial field training period.

Preparation: The sanitarian intern shall complete this form in triplicate every Friday during the orientation/initial field training period.

Distribution:

1. Original to: Sanitation Branch
   Division of Health Services
   P. O. Box 2091
   Raleigh, NC 27602-2091

2. Copy to Training Officer

3. Copy for Intern's file

Disposition: This form may be destroyed in accordance with Standard 6, Personnel Records, of the Records Disposition Schedule published by the North Carolina Division of Archives and History.

Additional Forms May Be Ordered From: Sanitation Branch
Division of Health Services
P. O. Box 2091
Raleigh, NC 27602-2091

8. Sanitarian Intern Evaluation Report [DHS 1058 (Revised 4/85)]

The following report is to be completed by the Training Director at the end of the course after consultation with staff members who participated. The report is made in duplicate, with copies to:

a. Head, Sanitation Branch, Environmental Health Section, Division of Health Services, N. C. Department of Human Resources, Raleigh, North Carolina
b. Training Director's files

The Head, Sanitation Branch, will treat the report as confidential and will use it in preparing an impersonal report by letter to the intern's Health Director.

N. C. Department of Human Resources
Division of Health Services

SANITARIAN INTERN EVALUATION REPORT

(For use at end of initial four-week period of orientation)

NAME OF INTERN: _____

EMPLOYING DEPT. AND ADDRESS: _____

ORIENTATION CENTER: _____

INSTRUCTIONS:

Check the one statement below which best describes the Sanitarian Intern's:

	OUTSTANDING 5	ABOVE AVERAGE 4	AVERAGE 3	BELOW AVERAGE 2	POOR 1
1. PERSONALITY	( )	( )	( )	( )	( )
2. APPEARANCE	( )	( )	( )	( )	( )
3. TACT	( )	( )	( )	( )	( )
4. COMMON SENSE	( )	( )	( )	( )	( )
5. ABILITY TO MEET PUBLIC	( )	( )	( )	( )	( )
6. COOPERATION	( )	( )	( )	( )	( )
7. RELATIONSHIP WITH OTHER EMPLOYEES	( )	( )	( )	( )	( )
8. ATTITUDE TOWARD DIRECTION & INSTRUCTION	( )	( )	( )	( )	( )
9. INITIATIVE	( )	( )	( )	( )	( )
10. LEARNING SPEED	( )	( )	( )	( )	( )
11. PUNCTUALITY	( )	( )	( )	( )	( )
12. USE & APPLICATION OF TIME	( )	( )	( )	( )	( )
13. PROGRESS IN STUDY OF LAWS & REGULATIONS	( )	( )	( )	( )	( )
14. INTEREST & ENTHUSIASM IN WORK	( )	( )	( )	( )	( )

15. CONDUCT: Is this Sanitarian's conduct on the job such as to be a credit to the Local Health Department, and to the N. C. Division of Health Services?

YES ( ) NO ( ) NOT CERTAIN ( )

If answer is NO, please explain: _____

16. Would you employ this person - if you had a suitable vacancy on your staff?

YES ( ) NO ( ) NOT CERTAIN ( )

If answer is NO, please explain: _____

_____ _____ _____

(Signature) (Title) (Date)

DHS 1058 (Revised 4/85)
Sanitation (Review 4/89)

Purpose: This Sanitarian Intern Evaluation Report is used to evaluate the sanitarian intern's orientation/initial field training period.

Preparation: The training officer shall complete this form in duplicate upon completio of the orientation/initial field training period.

Distribution:

1. Original to: Sanitation Branch
   Division of Health Services
   P. O. Box 2091
   Raleigh, NC 27602-2091

2. Copy to Training Officer

Disposition: This form may be destroyed in accordance with Standard 6, Personnel Records, of the Records Disposition Schedule published by the North Carolina Division of Archives and History.

Additional Forms May Be Ordered From: Sanitation Branch
Division of Health Services
P. O. Box 2091
Raleigh, NC 27602-2091

N. C. Department of Human Resources
Division of Health Services

SANITARIAN INTERN

PERSONAL HISTORY

NAME: _____ DATE OF BIRTH: _____

SEX: MALE _____ FEMALE _____

MARITAL STATUS: SINGLE _____ MARRIED _____ NO. DEPENDENTS _____

PRESENT MAILING ADDRESS: _____ TELEPHONE: _____

PERMANENT MAILING ADDRESS: _____ TELEPHONE: _____

CITIZENSHIP: U.S. _____ OTHER-Specify _____

MILITARY SERVICE: YES _____ NO _____

(A) Branch of Service _____

(B) Date of Entry into Active Service _____

(C) Date of Separation from Active Service _____

(D) Type of Separation _____

EDUCATION:

Type of Education	Name and Location	Did You Graduate?	Degree or Diploma and Year Received	Major Subject
HIGH SCHOOL				
COLLEGE or UNIVERSITY				
GRADUATE or PROFESSIONAL				
OTHER EDUCATION Internship, etc.				

HOBBIES-OTHER INTERESTS: _____

CIVIC ORG., CLUBS, etc.: _____

PREVIOUS WORK EXPERIENCE: _____

_____

_____

IN CASE OF EMERGENCY, NOTIFY: _____ RELATIONSHIP: _____

ADDRESS: _____ TELEPHONE: _____

EMPLOYING HEALTH DEPARTMENT: _____ DATE OF EMPLOYMENT: _____

DHS 2255 (Revised 4/85)
Sanitation (Review 4/89)

Purpose: This Sanitarian Intern Personal History form is to provide the designated orientation/initial field training center with background information on the sanitarian intern. Most importantly, it provides a name and telephone number for emergency situations.

Preparation: The sanitarian intern shall complete this form in duplicate at the beginning of the orientation/initial field training period.

Distribution

1. Original to Training Officer
2. Copy to: Sanitation Branch
   Division of Heal h Services
   P. O. Box 2091
   Raleigh, NC 2760?-2091

Disposition: This form may be destroyed in accordance with Standard 6, Personnel Records, of the Records Disposition Schedule published by the North Carolina Division of Archives and History.

Additional Forms May Be Ordered From: Sanitation Branch
Division of Health Services
P. O. Box 2091
Raleigh, NC 27602-2091



Appendix D

Part III: Baseline and Program Assessment
Hazard Analysis Critical Control Point Principles

Content includes:

- **D1: Inspection Frequency and Inspection Risk Category**
- **D2: Dashboard of Inspection Data**
- **D3: NC Inspection Form**
- **D4: NC Marking Instructions**
- **D5: NC Compliance and Enforcement Manual**
- **D6: Mecklenburg County Local Specialized Process Committee Charter**
- **D7: Mecklenburg County Local Specialized Process Committee Resources**

MECKLENBURG COUNTY
North Carolina

Mandated Inspection Frequencies

Retail Food

Risk Category 4

July 1st – October 31St

November 1st – February 28th

March 1st – June 30th

Educational Visits

July 1st – June 30th

Risk Category 3

July 1st – October 31St

November 1st – February 28th

March 1st – June 30th

Risk Category 2

July 1st – December 31st

January 1st – June 30th

Risk Category 1

July 1st – June 30th

Status Code Quarterly Checks for B/C/D/E

July 1st – September 30th	October 1st – December 31st	January 1st – March 31st	April 1st – June 30th

Risk Categorization of Food Establishments

North Carolina Administrative Code 10A NCAC 46 .0213

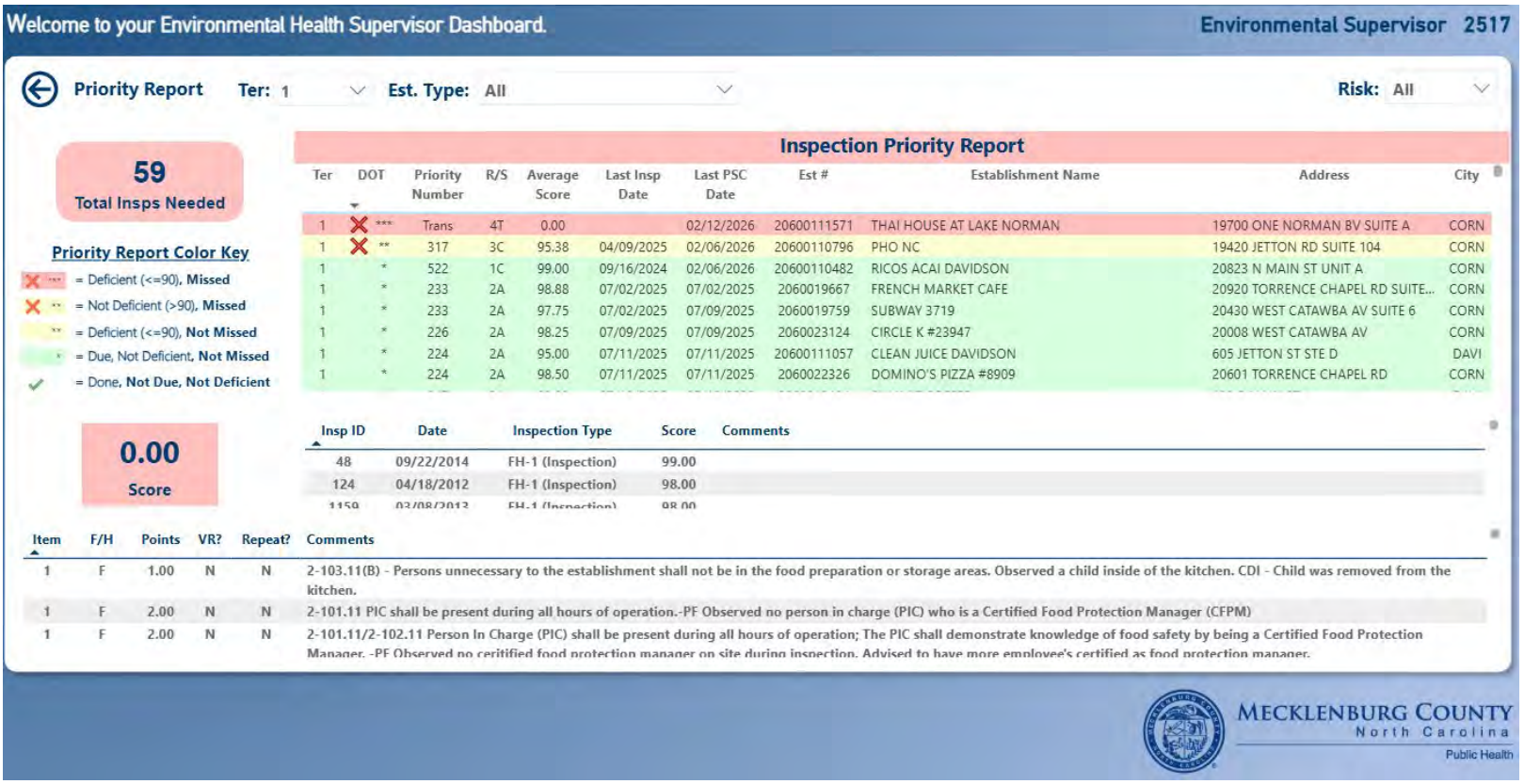
Risk Type	Examples
Risk Type 1 ❖ Prepare only *Non-PH/Non-TCS Foods	***Example*** • Drink stand using multi-use utensils • Institutional food service†
Risk Type 2 ❖ Cook and cool no more than 2 *PH/TCS foods ❖ *PH/TCS raw animal food ingredients received in a ready-to-cook form	***Examples*** • Fast food • Grocery store deli/produce • Pushcart/MFU • Limited food service establishment • Sandwich shop • School lunch room
Risk Type 3 ❖ Cook and cool no more than 3 *PH/TCS foods ❖ *PH/TCS raw animal food ingredients not received in a ready-to-cook form	***Examples*** • Grocery store deli • Meat market • MFU • Sandwich shop • School lunch room
Risk Type 4 ❖ Cook and cool an unlimited number of *PH/TCS foods ❖ Food establishments serving highly susceptible populations (HSP) ❖ Food establishments using specialized processes	***Examples*** • Full service restaurant • Grocery store deli • Institutional food service • MFU • NC approved variances for specialized processing methods • School lunch room (serving HSP)

***Potentially hazardous food (time/temperature controlled for safety food)**
†In accordance with § 130A-235 (does not exempt the CFPM requirement)

Revised: February 2018

Mecklenburg County Environmental Health

Inspection Priority Dashboard



Food Establishment Inspection Report

Score: _____

Establishment Name: _____ **Establishment ID:** _____

Location Address: _____

City: _____ State: North Carolina

Zip: _____ County: _____

Permittee: _____

Telephone: _____

◯ Inspection ◯ Re-Inspection

Wastewater System:

◯ Municipal/Community ◯ On-Site System

Water Supply:

◯ Municipal/Community ◯ On-Site Supply

Date: _____ Status Code: _____

Time In: _____ Time Out: _____

Category#: _____

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: _____

No. of Repeat Risk Factor/Intervention Violations: _____

Foodborne Illness Risk Factors and Public Health Interventions

Risk factors: Contributing factors that increase the chance of developing foodborne illness.

Public Health Interventions: Control measures to prevent foodborne illness or injury

Compliance Status						OUT			CDI	R	VR
Supervision .2652											
1	IN	OUT	N/A		PIC Present, demonstrates knowledge, & performs duties	1		0			
2	IN	OUT	N/A		Certified Food Protection Manager	1		0			
Employee Health .2652											
3	IN	OUT			Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0			
4	IN	OUT			Proper use of reporting, restriction & exclusion	3	1.5	0			
5	IN	OUT			Procedures for responding to vomiting & diarrheal events	1	0.5	0			
Good Hygienic Practices .2652, .2653											
6	IN	OUT			Proper eating, tasting, drinking or tobacco use	1	0.5	0			
7	IN	OUT			No discharge from eyes, nose, and mouth	1	0.5	0			
Preventing Contamination by Hands .2652, .2653, .2656, .2658											
8	IN	OUT			Hands clean & properly washed	4	2	0			
9	IN	OUT	N/A	N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0			
10	IN	OUT	N/A		Handwashing sinks supplied & accessible	2	1	0			
Approved Source .2653, .2655											
11	IN	OUT			Food obtained from approved source	2	1	0			
12	IN	OUT		N/O	Food received at proper temperature	2	1	0			
13	IN	OUT			Food in good condition, safe & unadulterated	2	1	0			
14	IN	OUT	N/A	N/O	Required records available: shellstock tags, parasite destruction	2	1	0			
Protection from Contamination .2653, .2654											
15	IN	OUT	N/A	N/O	Food separated & protected	3	1.5	0			
16	IN	OUT			Food-contact surfaces: cleaned & sanitized	3	1.5	0			
17	IN	OUT			Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0			
Potentially Hazardous Food Time/Temperature .2653											
18	IN	OUT	N/A	N/O	Proper cooking time & temperatures	3	1.5	0			
19	IN	OUT	N/A	N/O	Proper reheating procedures for hot holding	3	1.5	0			
20	IN	OUT	N/A	N/O	Proper cooling time & temperatures	3	1.5	0			
21	IN	OUT	N/A	N/O	Proper hot holding temperatures	3	1.5	0			
22	IN	OUT	N/A	N/O	Proper cold holding temperatures	3	1.5	0			
23	IN	OUT	N/A	N/O	Proper date marking & disposition	3	1.5	0			
24	IN	OUT	N/A	N/O	Time as a Public Health Control; procedures & records	3	1.5	0			
Consumer Advisory .2653											
25	IN	OUT	N/A		Consumer advisory provided for raw/ undercooked foods	1	0.5	0			
Highly Susceptible Populations .2653											
26	IN	OUT	N/A		Pasteurized foods used; prohibited foods not offered	3	1.5	0			
Chemical .2653, .2657											
27	IN	OUT	N/A		Food additives: approved & properly used	1	0.5	0			
28	IN	OUT	N/A		Toxic substances properly identified stored & used	2	1	0			
Conformance with Approved Procedures .2653, .2654, .2658											
29	IN	OUT	N/A		Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0			

Good Retail Practices

Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status						OUT			CDI	R	VR
Safe Food and Water .2653, .2655, .2658											
30	IN	OUT	N/A		Pasteurized eggs used where required	1	0.5	0			
31	IN	OUT			Water and ice from approved source	2	1	0			
32	IN	OUT	N/A		Variance obtained for specialized processing methods	2	1	0			
Food Temperature Control .2653, .2654											
33	IN	OUT			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	OUT	N/A	N/O	Plant food properly cooked for hot holding	1	0.5	0			
35	IN	OUT	N/A	N/O	Approved thawing methods used	1	0.5	0			
36	IN	OUT			Thermometers provided & accurate	1	0.5	0			
Food Identification .2653											
37	IN	OUT			Food properly labeled: original container	2	1	0			
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657											
38	IN	OUT			Insects & rodents not present; no unauthorized animals	2	1	0			
39	IN	OUT			Contamination prevented during food preparation, storage & display	2	1	0			
40	IN	OUT			Personal cleanliness	1	0.5	0			
41	IN	OUT			Wiping cloths: properly used & stored	1	0.5	0			
42	IN	OUT	N/A		Washing fruits & vegetables	1	0.5	0			
Proper Use of Utensils .2653, .2654											
43	IN	OUT			In-use utensils: properly stored	1	0.5	0			
44	IN	OUT			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	IN	OUT			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	IN	OUT			Gloves used properly	1	0.5	0			
Utensils and Equipment .2653, .2654, .2663											
47	IN	OUT			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0			
48	IN	OUT			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	IN	OUT			Non-food contact surfaces clean	1	0.5	0			
Physical Facilities .2654, .2655, .2656											
50	IN	OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51	IN	OUT			Plumbing installed; proper backflow devices	2	1	0			
52	IN	OUT			Sewage & wastewater properly disposed	2	1	0			
53	IN	OUT	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0			
54	IN	OUT			Garbage & refuse properly disposed; facilities maintained	1	0.5	0			
55	IN	OUT			Physical facilities installed, maintained & clean	1	0.5	0			
56	IN	OUT			Meets ventilation & lighting requirements; designated areas used	1	0.5	0			
									TOTAL DEDUCTIONS:		

Instructions for Marking the Food Establishment Inspection Report, Including Code References for Risk Factors/Interventions and Good Retail Practices

All references and code sections in these marking instructions are based on the Rules Governing the Food Protection and Sanitation of Food Establishments.

A. GENERAL MARKING INSTRUCTIONS

HEADER Information

Establishment Name	Complete this section using the "usual/common name" or "Doing Business As" name of the business. This information should be the same as the license/permit application completed at the initiation of the business.
Location Address	Street address of the actual business location
Zip Code	Actual business location
Telephone	Contact phone number for the establishment
Establishment ID#	Tracking number for Inspections, Statistics and Fees
County	Name the county where the establishment exists
Inspection Type	Mark the appropriate box
Wastewater Type	Mark the appropriate box
Water Supply	Mark the appropriate box
Permit Holder	Name of Owner or Operator as shown on application
Establishment Type	Establishment Types as defined by the FDA Standard: Institutions – Hospitals, Nursing Homes, Elementary Schools Restaurants – Fast Food, Full-Service Retail Food Services – Deli Departments, Meat & Poultry Departments, Produce Departments & Salad Bars, Seafood Departments
Risk Category	Designation of risk level for determining frequency of inspection **Risk Category I** applies to food service establishments that prepare only non-time/temperature control for safety(non-TCS)/non-potentially hazardous(non-PHF) foods. **Risk Category II** applies to food service establishments that cook and cool no more than two TCS/PHF foods. Raw animal foods shall be received in a ready-to-cook form. **Risk Category III** applies to food service establishments that cook and cool no more than three TCS/PHF foods. **Risk Category IV** applies to food service establishments that cook and cool an unlimited number of TCS/PHF foods. This category also includes those facilities using specialized processes or serving a highly susceptible population.
Number of Risk Factor/ Intervention Violations	The number of boxes marked OUT in items 1-29 should be counted and the total number placed here
Number of Repeat Risk Factor/Intervention Violations	The number of boxes marked R (repeat) in items 1-29 should be counted and the total number placed here
Score	A score earned by the establishment as a result of an inspection or reinspection
Date	The date of the inspection including month, day, and year
Time In	The actual time the inspection begins
Time Out	The actual time the inspection ends
Status Code	Designate the appropriate Status Code as defined by Inspections, Statistics and Fees Program
Contact Number	The Regulatory Authority Contact Number
Total Deductions	Total point deductions
Verification Date	The date the verification inspection will be conducted

B. RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention (CDC) as contributing factors in foodborne illness outbreaks. Risk factors include: Food from Unsafe Sources, Improper Holding Temperatures, Inadequate Cooking, Contaminated Equipment, and Poor Personal Hygiene. These items are prominent on the Food Establishment Inspection Report because maintaining these items in compliance is vital to preventing foodborne illness. Additionally, five key public health interventions were introduced in the 1993 Food Code that supplemented the other interventions long-established by the Food and Drug Administration (FDA) model codes and guidances to protect consumer health. The five key interventions are: Demonstration of Knowledge, Employee Health Controls, Controlling Hands as a Vehicle of Contamination, Time and Temperature Parameters for Controlling Pathogens, and the Consumer Advisory.

Establishments should be inspected at the time processes are ongoing, food handling by employees, preparation, cooling, cooking, holding etc. Time of inspection should vary to capture the processes that occur at the onset or end of operation such as cooling, receiving of foods, etc.

For each item on the inspection report form in the Foodborne Illness Risk Factors and Public Health Interventions section, the inspector should indicate one of the following for **COMPLIANCE STATUS: "IN"** which means that the item is in compliance; **"OUT"** which means that the item is not in compliance; "**N.O."** which means that the item was not observed during the inspection; or **"N.A."** which means that the item is not applicable for the facility. If **N.A.** or **N.O.** is not listed as an option for a particular item, this means that this item must be evaluated during the inspection and a compliance status must be determined. **If the item is marked "OUT", document details of each violation for the item number in the "Observations and Corrective Actions" section on the second page of the inspection report.** Compliance status should be determined as a result of observations that establish a pattern of non-compliance. Consideration should be given to the seriousness of the observation with regard to prevention of foodborne illness.

For items marked **"OUT**,**"** further indicate the status of the violation by marking the corresponding box for Corrected During Inspection **(CDI)** and/or Repeat violation **(R)**. Marking **CDI** indicates that all violations cited under that particular item number have been corrected and verified before completing the inspection. The actual corrective action taken for each violation should be documented in the "Observations and Corrective Actions" section of the inspection report. For example, Item #10 *Handwashing sink* is marked out of compliance because the establishment does not have soap and paper towels at the handwashing sink. The person in charge partially corrects the problem by putting soap at the sink but does not replace the paper towels or provide any other effective means for drying hands. The corrective action taken for the soap is documented in the narrative on the form, but **CDI** is **not** marked for Item #10 because all violations under that item were not corrected. Marking Verification Required **(VR)** indicates correction is warranted within the timeframe specified under 8-405.11. Marking **R** indicates that the same violation under a particular item number was cited on the last inspection report. Using the same scenario, on the subsequent inspection if the provision of soap and paper towels is not in violation, but the handwashing sink is blocked and inaccessible (which is also cited under Item #10 *Handwashing sink*), **R** would **not** be marked because this is a new violation which was not cited on the previous inspection report.

The purpose and objective of a Food Service Establishment inspection program is to assess the operation and ensure risk factors are in control. Reducing risk factors have a direct correlation in the reduction of foodborne illness. The goal is to observe processes and behaviors in retail food establishments. When (P) and (Pf) violations are observed, it is required to seek correction. For long term active managerial control of (P) and (Pf) violations, the REHS should engage in seeking compliance and develop Risk Control Plans (RCP) between the department and the establishment.

C. MARKING INSTRUCTIONS FOR EACH RISK FACTOR AND INTERVENTION ON THE INSPECTION REPORT

Supervision

1. PIC present, demonstrates knowledge, and performs duties

IN/OUT This item should be marked IN or OUT of compliance. The person in charge (PIC) has three assigned responsibilities – Presence; Demonstration of Knowledge; and Duties. This item is marked OUT of compliance if any **one** of the responsibilities is not met.

A. Person in charge is present – This item is marked OUT of compliance if there is no PIC per 2-101.11(A) and (B).

B. Demonstration of Knowledge – The PIC has three options for demonstrating knowledge. This item is marked IN compliance if the PIC meets at least one of the options. The three
options for demonstration of knowledge allowed by the Food Code are:
1. Certification by an ACCREDITED PROGRAM as specified in 2-102-20.
2. Complying with this Code by having no violations of priority items during the current inspection; or
3. Correct responses to the inspector's questions regarding public health practices and principles applicable to the operation. The inspector should assess this item by asking open-ended questions that would evaluate the PIC's knowledge in each of the areas enumerated in ¶ 2-102.11(C)(1), (4)-(16). Questions can be asked during the initial interview, menu review, or throughout the inspection as appropriate. The Inspector should ask a sufficient number of questions to enable the inspector to make an informed decision concerning the PIC's knowledge of the Code requirements and public health principles as they apply to the operation. The dialogue should be extensive enough to reveal whether or not that person is enabled by a clear understanding of the Code and its public health principles to follow sound food safety practices and to produce foods that are safe, wholesome, unadulterated, and accurately represented.

C. Duties of the PIC – This item must be marked IN or OUT of compliance based on the interaction and observation with the PIC and food employee. The inspector needs to determine the systems or controls the PIC has put into practice regarding oversight and/or routine monitoring of the Duties listed in § 2-103.11. This is accomplished by 1) discussion with the PIC, and 2) verified through observation that the systems or controls are actually being implemented. This concept is commonly referred to as Active Managerial Control. This item must be marked OUT of compliance when there is a pattern of non-compliance and obvious failure by the PIC to ensure employees are complying with the duties listed in § 2-103.11. Since marking this item out of compliance requires judgment, it is important that this item not be marked for an isolated incident, but rather for an overall evaluation of the PIC's ability to ensure compliance with the duties described in § 2-103.11.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Section:

2-101.11	Assignment [Pf]
2-102.11(A), (B) and (C)(1), (4)-(16)	Demonstration [Pf]
2-103.11(A)-(P)	Person-In-Charge-Duties [Pf]

2. Certified Food Protection Manager

IN/OUT This item must be marked IN or OUT of compliance. This item is marked IN compliance when it is observed that the person in charge is a certified food protection manager.

This item is marked OUT when it is observed that there is no person in charge that is deemed a certified food protection manager or the certified food protection manager certificate is deemed not to be from an accredited program.

N.A. This item may be marked N.A. for Category I establishments and Congregate Nutrition Sites.
N.O. Do NOT MARK this item N.O.

Applicable Code Section:
2-102.12(A) Certified Food Protection Manager

Employee Health / Responding to Contamination Events

3. Management and food employee knowledge, and conditional employee; responsibilities and reporting.

IN/OUT This item must be marked IN or OUT of compliance. This item is marked IN compliance when the following criteria are met:

1. The PIC is aware of their responsibility to inform food employees and conditional employees of their responsibility to report certain symptoms or diagnosed diseases to the PIC and for the PIC to report to the RA as specified under Food Code ¶ 2-103.11(O) and ¶¶ 2-201.11 (A), (B), (C), and (E); **and**

2. The PIC provides documentation or otherwise satisfactorily demonstrates during the inspection, that all food employees and conditional employees are informed of their responsibility to report to management information about their health and activities as it relates to diseases that are transmissible through food, as specified under ¶ 2-201.11(A). Satisfactory compliance may be documented by completion of Form 1-B, Conditional Employees or Food Employees Reporting Agreement, in Annex 7 of the 2017 Food Code for each employee or other similar State or local form containing the same information; **or**

3. In lieu of a written policy, compliance may be demonstrated by:

a) Presenting evidence such as a curriculum and attendance rosters documenting that each employee has completed a training program which includes all the information required on Form 1-B regarding their reporting responsibilities; **or**

b) Implementation of an employee health policy which includes a system of employee notification using a combination of training, signs, pocket cards, or other means to convey all of the required information on Form 1-B to all food employees and conditional employees. A signed acknowledgement by the employee should be part of any employee health policy.

The regulatory authority is encouraged to establish a policy of selecting one employee at random during each inspection and requesting the PIC verify, by one of the previously listed methods, that the selected employee has been **informed** of his or her responsibility to report symptoms, exposures, and diagnosed illnesses to management. The PIC is not expected to quote symptoms and diseases from memory but should be able to locate that information on Form 1-B or similar documents used to demonstrate compliance.

Additional information is provided in Annex 3 of the Public Health Reasons for Subpart 2-201, including a number of questions, which may be used as a reference to assist the regulatory authority in determining compliance with this item.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
2-102.11(C)(2), (3) and (17) Demonstration [Pf]
2-103.11(O) Person in Charge-Duties [Pf]
2-201.11(A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees [P, Pf]

4. Proper use of reporting, restriction, and exclusion

IN/OUT This item must be marked IN or OUT of compliance. Compliance must be based on firsthand observations or information and cannot be based solely on responses from the PIC to questions regarding hypothetical situations or knowledge of the Food Code. This item is marked IN when the following criteria are observed at the time of the inspection:

- There are no ill employees.
- There are no employees experiencing symptoms with or without a diagnosis that require reporting, or reason for the PIC to exclude or restrict an employee
- A food employee who works in a food establishment serving a HSP or non-HSP, is restricted due to diagnoses with an infection from nontyphoidal Salmonella and is asymptomatic

This item should be marked OUT of compliance when:

- Inspector observes a working employee with specific reportable symptoms (subparagraph 2-201.11 (A)(1)); or
- The inspector becomes aware that an employee has reported information about their health and activities as it relates to diseases that are transmissible through food and the PIC has not acted to restrict/exclude an employee as required by the Food Code (§2-201.12 & §2-201.13); or
- The inspector becomes aware that the PIC has not notified the Regulatory Authority that an employee is jaundiced or diagnosed with an illness due to a pathogen as specified under subparagraphs 2-201.11 (A)(2)(a)-(f) of the Food Code.
- There are food employees working in the food establishment that have been diagnosed with an illness as specified in paragraphs 2-201.11(A)(2-5); Additionally, in food establishments exclusively serving a highly susceptible population, there are to be no food employees with an active sore throat with a fever working in the food establishment.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
2-201.11 (D) and (F) Responsibility of Permit Holder, Person in Charge, and Conditional Employees Responsibility of the PIC to Exclude or Restrict [P]
2-201.12 Exclusions & Restrictions [P]
2-201.13 Removal, Adjustment, or Retention of Exclusions & Restrictions [P]

5. Clean-up of Vomiting and Diarrheal Events

IN/OUT This item should be marked IN or OUT of compliance. This item is marked IN compliance when it is demonstrated that the food establishment has written procedures available for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. Refer to the Public Health Reasons (§2-501.11 Clean-up of Vomiting and Diarrheal Events) for suggested recommendations as to what the food establishment can include within their plan (this is not an exhaustive list).

This item is marked OUT of compliance if the establishment does not demonstrate the ability to provide written procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Section:
2-501.11 Clean-up of Vomiting and Diarrheal Events [Pf]

Good Hygienic Practices

6. Proper eating, tasting, drinking, or tobacco use

IN/OUT This item must be marked IN or OUT of compliance based on direct observations or discussions of the appropriate hygienic practices of food employees. This item should be marked IN compliance when a food employee is observed drinking from a closed beverage container subsequently stored on a nonfood-contact surface and separate from exposed food, clean equipment, and unwrapped single-service and single-use articles. This item should be marked OUT of compliance when food employees are observed improperly tasting food, eating, drinking, or smoking, or there is supporting evidence of these activities taking place in non-designated areas of the establishment. A beverage that is consumed in a designated area must still be stored in a manner to prevent the contamination of food, equipment, utensils, linens and single-service/single-use articles.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
2-401.11 Eating, Drinking, or Using Tobacco
3-301.12 Preventing Contamination When Tasting [P]

7. No discharge from eyes, nose, and mouth

IN/OUT This item must be marked IN or OUT of compliance based on direct observations of food employees. This item should be marked IN compliance when no food employees are observed having persistent coughing, sneezing, runny nose, or watery eyes. This item should be marked OUT of compliance when a food employee has persistent coughing, sneezing, runny nose, or watery eyes subjecting food and food-contact surfaces to potential contamination.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
2-401.12 Discharges from the Eyes, Nose, and Mouth

Preventing Contamination by Hands

8. Hands clean and properly washed

IN/OUT This item must be marked IN or OUT of compliance. This item is marked IN compliance only when employees are observed using proper handwashing techniques at appropriate times and places. Hands are not required to be washed between each change of gloves, if it is observed that there was no change in the task being performed and no activities which could potentially result in cross contamination.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
2-301.11 Clean condition – Hands and Arms [P]
2-301.12 Cleaning Procedure [P]
2-301.14 When to Wash [P]
2-301.15 Where to Wash [Pf]

2-301.16 Hand Antiseptics [Pf]

9. No bare hand contact with RTE foods or pre-approved alternate properly followed

IN/OUT This item should be marked IN or OUT of compliance. This item is marked IN compliance only when food employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods or if the food employee contacts exposed RTE food with bare hands at the time the RTE food is being added as an ingredient to a food that:

- Contains a raw animal food and is to be cooked in the food establishment to heat all parts of the food to minimum temperatures specified in ¶¶3-401.11(A)-(B) or §3-401.12; or
- Does not contain a raw animal food but is to be cooked in the food establishment to heat all parts of the food to a temperature of at least 63°C (145°F).

This item is also marked IN compliance when food employees are observed properly following a pre-approved alternative procedure to no bare hand contact. This item should be marked OUT of compliance if one food employee is observed handling ready-to-eat food with their bare hands in the absence of a prior approval and written procedures for bare hand contact. Refer to subparagraph 3-301.11 (E)(1)-(7) for a listing of conditions that must be met in order to receive prior approval by the Regulatory Authority. Bare hand contact by food employees serving a Highly Susceptible Population is prohibited and no alternative to bare hand contact is allowed. This item is also marked OUT when food employees contact exposed RTE food with bare hands that is to be added as ingredients to a food that is not properly heat treated as specified in Sub-¶3-301.11(D)(1)-(2).

N.A. **Do Not Mark** this item N.A.
N.O. This item may be marked N.O. for establishments that prepare ready-to-eat foods only, but no food preparation is performed at the time of inspection.

Applicable Code Sections:
3-301.11 Preventing Contamination from Hands [P, Pf]
3-801.11(D) Pasteurized Foods, Prohibited Re-Service, and Prohibited Foods [P]

10. Adequate handwashing sinks, properly supplied and accessible

IN/OUT This item must be marked IN or OUT of compliance based on observations in determining that handwashing sinks are properly equipped and conveniently located for food employee use. This item must be marked OUT of compliance when the facility is not stocked with soap, hand drying provisions or equipped with the required signage. In addition, if the handwashing sink is not located to be available to food employees who are working in food preparation, food dispensing and warewashing areas, is blocked by portable equipment or stacked full of soiled utensils or other items, or the facility is unavailable for regular employee use, this item must be marked OUT of compliance.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
5-202.12 Handwashing Sinks, Installation
5-203.11 Handwashing Sinks-Numbers and Capacities [Pf]
5-204.11 Handwashing Sinks-Location and Placement [Pf]
5-205.11 Using a Handwashing Sink – Operation and Maintenance [Pf]
6-301.11 Handwashing Cleanser, Availability [Pf]
6-301.12 Hand Drying Provision [Pf]
6-301.13 Handwashing Aids and Devices, Use Restrictions
6-301.14 Handwashing Signage

Approved Source

11. Food obtained from approved source

IN/OUT This item must be marked IN or OUT of compliance based on direct observations of food products, food labels and packaging, water analyses, and discussion with the PIC or other food employees. This item should be marked IN compliance when the regulatory authority is able to determine approved food sources. A review of supplier names, shipment invoices, buyer specification plans, molluscan shellfish tags, proof of regulatory permit/licensure of a food source, etc. can be used to document approved food sources. Milk and milk products must comply with Grade A Standards. This item should be marked OUT of compliance when an approved food source cannot be determined and if the RA did not approve the sale or service or wild harvested mushrooms and it is observed in the food establishment for sale and service.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

3-201.11 Compliance with Food Law **P, Pf**
3-201.12 Food in a Hermetically Sealed Container **P**
3-201.13 Fluid Milk and Milk Products **P**
3-201.14 Fish **P**
3-201.15 Molluscan Shellfish **P**
3-201.16 Wild Mushrooms **P**
3-201.17 Game Animals **P**
3-202.13 Eggs **P**
3-202.14 Eggs and Milk Products, Pasteurized **P**
3-202.110 Juice Treated – Commercially Processed **P, Pf**
5-101.13 Bottled Drinking Water **P**

12. Food received at proper temperature

IN/OUT This item should be marked IN or OUT of compliance based on actual food temperature measurements of TCS foods being received. This item should be marked IN compliance when food is received and found at proper temperatures during the inspection. This item should be marked OUT of compliance if food is received and accepted, but an actual food temperature measurement of a TCS food by the regulatory authority at the time of delivery exceeds the temperature specifications for receiving as prescribed by the Code.

N.A. **Do Not Mark** this item N.A.
N.O. This item may be marked N.O. if food is not received during the inspection.

Applicable Code Sections:

3-202.11 Temperature **P, Pf**

13. Food in good condition, safe and unadulterated

IN/OUT This item must be marked IN or OUT of compliance based on direct observations of the integrity of product packaging, wholesomeness, and signs of adulteration. This item must be marked IN compliance when a dent in a canned food has not compromised the hermetic seal; cuts made in outer cardboard packaging during opening of the case do not enter the inner product packaging; the true appearance, color, or quality of a food is not misrepresented; and food is honestly presented. This item must be marked OUT of compliance when the integrity of food packaging has been compromised or the true appearance, color, or quality of a food has been intentionally altered.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
3-101.11 Safe, Unadulterated and Honestly Presented [P]
3-202.15 Package Integrity [Pf]

14. Required records available: shellstock tags, parasite destruction

IN/OUT This item should be marked IN or OUT of compliance based on direct observations of fish in storage, shellstock tags, and/or records of freezing of fish for parasite destruction. This item should be marked IN compliance if the permit holder provides a statement from supplier(s) identifying that fish sold as raw, raw-marinated or undercooked is frozen by supplier for parasite destruction; or there are freeze records maintained by the permit holder when fish are frozen for parasite destruction on the premises. This item should be marked OUT of compliance if there are no shellstock tags available, when the shellstock tags are incomplete, when there is evidence of commingling of shellstock, or when no records of freezing of fish for parasite destruction are available. Fish exempt from freezing requirements are found in paragraph 3-402.11(B).

N.A. This item may be marked N.A. when shellstock are not used in the establishment and the only fish sold as raw, raw-marinated or undercooked is the tuna species or aquacultured fish listed as exempted from freezing in the Food Code.

N.O. This item may be marked N.O. when shellstock or raw, raw-marinated and undercooked fish are sold periodically in the establishment but are not being sold at the time of inspection and prior compliance through tags, invoices, or purchase records cannot be verified.

Applicable Code Sections:
3-202.18 Shellstock Identification [Pf]
3-203.12 Shellstock, Maintain Identification [Pf]
3-402.11 Parasite Destruction [P]
3-402.12 Records, Creation, & Retention [Pf]

Protection from Contamination

15. Food separated and protected

IN/OUT This item should be marked IN or OUT of compliance based on direct observations of food storage and food handling practices. This item should be marked OUT of compliance when ready-to-eat foods are subject to potential contamination by raw animal foods; raw animal foods are observed not separated by type based on minimum cook temperatures by spacing or placing in separate containers; food is not packaged or covered during storage (unless in the process of cooling); or food is in contact with soiled equipment and utensils; or single-use gloves used for more than one task.

N.A. This item may be marked N.A. when there are no raw animal foods used in the facility and only packaged foods are sold.

N.O. This item is marked N.O. when raw animal foods are used or served seasonally and you are unable to determine compliance.

Applicable Code Sections:
3-302.11 Packaged and Unpackaged Food – Separation, Packaging, and Segregation [P, C]
3-304.11 Food Contact with Equipment and Utensils [P]
3-304.15(A) Gloves, Use Limitation [P]
3-306.13(A) Consumer Self-Service Operations [P]

16. Food-contact surfaces: cleaned and sanitized

IN/OUT This item must be marked IN or OUT of compliance based on direct observations of food-contact surfaces of equipment and utensils; actual measurements/readings of chemical sanitizer concentration, hot water sanitizing temperature, pH, hardness, water pressure, etc. using test strips, thermometers, heat-sensitive tapes, and equipment gauges; observations of cleaning and sanitizing procedures; and discussion of cleaning and sanitizing procedures and frequency with the PIC or other food employees. This item must be marked IN compliance when manual and/or mechanical methods of cleaning and sanitizing are effective and performed at the prescribed

frequency.
There should be an overall assessment of the food-contact surfaces of equipment and utensils in clean storage and in use to determine compliance. For example, this item is not marked OUT of compliance based on one visibly soiled utensil, such as a plate or knife. This item must be marked OUT of compliance when manual and/or mechanical methods of cleaning and sanitizing food-contact surfaces of equipment and utensils are ineffective, or if one multiuse piece of equipment such as a slicer or can opener is visibly soiled and being used at the time of the inspection. This item is also marked OUT if it is observed that equipment or utensils that have come into contact with a major food allergen such as fish were not cleaned and sanitized prior to use for other types of raw animal foods.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
4-501.111 Manual Warewashing Equipment, Hot Water Sanitization Temperatures **P**
4-501.112 Mechanical Warewashing Equipment, Hot Water Sanitization Temperatures **Pf**
4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization – Temperature, pH, Concentration and Hardness **P, Pf**
4-501.115 Manual Warewashing Equipment, Chemical Sanitization Using Detergent-Sanitizers
4-601.11(A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils **Pf**
4-602.11 Equipment Food-Contact Surfaces and Utensils – Frequency **P, C**
4-602.12 Cooking and Baking Equipment
4-702.11 Before Use After Cleaning **P**
4-703.11 Hot Water and Chemical – Methods **P**

17. Proper disposition of returned, previously served, reconditioned, and unsafe food

IN/OUT This item must be marked IN or OUT of compliance. This item is marked OUT of compliance if food is found unsafe, adulterated, not honestly presented, from an unapproved source, or if ready-to-eat food is contaminated by employees and is not discarded or reconditioned according to an approved procedure, or if previously served unwrapped, unprotected food is observed being re-served.

N.A. **Do Not Mark** this item N.A.
N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:
3-306.14 Returned Food and Re-service of Food **P**
3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food **P**

Time/Temperature Control for Safety Food

18. Proper cooking time and temperatures

NOTE: *The cooking temperatures of foods must be measured to determine compliance or noncompliance. Do not rely upon discussions with managers or cooks to make a determination of compliance or noncompliance. The temperature of raw animal foods in each species cooked during the inspection should be taken. For instance, if the facility fries chicken, scrambles eggs, bakes fish, grills hamburgers, and slow-roasts prime rib during the inspection – the cook temperatures of all of the products should be measured and recorded. Temperatures, both IN compliance and OUT of compliance, should be recorded in the "Temperature Observations" section of the inspection report. The time of inspections should be varied so that cooking can be observed.*

IN/OUT This item should be marked IN or OUT of compliance. This item should be marked OUT of compliance if the items checked do not meet the temperature requirements for cooking and the employee doing the cooking attempts to serve the product without returning the product to the cooking process. This item shall be marked OUT if the facility offers or serves undercooked comminuted meat on a children's menu. If a food is cooked below the required temperature but

the facility has an approved non-continuous cooking procedure, approved Consumer Advisory or an approved variance with HACCP plan for that food item, mark the item IN compliance, record the temperature and document the reason it is IN compliance. Foods cooked with a non-continuous cooking process are marked OUT of compliance if the food item does not meet the time/temperature requirements for cooking as specified in 3-401.11(A)-(C) and if written procedures describing how the foods are prepared and stored after initial heating but prior to cooking for sale or service are not available for review.

N.A. This item may be marked N.A. when no raw animal foods are cooked in the establishment.

N.O. This item may be marked N.O. when you are unable to determine the cooking temperature of any food. The inspection should be arranged at an optimum time for measuring at least one cooked item.

Internal Cooking Temperature Specifications

Internal Cooking Temperature	Raw Animal Foods
145°F for 15 seconds	• Raw eggs cooked for immediate service • Fish, except as listed below • Intact Meat • Commercially raised game animals, rabbits
155°F for 17 seconds:	• Ratites (Ostrich, Rhea and Emu) • Injected meats • Mechanically tenderized meats • Raw eggs not for immediate service • Comminuted meat, fish, or commercially raised game animals
165°F for <1 second (instantaneous):	• Wild game animals • Poultry • Stuffed fish, meat, pork, pasta, ratites & poultry • Stuffing containing fish, meat, ratites & poultry

**Whole Meat Roasts Refer to cooking charts in the Food Code ¶ 3-401.11(B)*

Applicable Code Sections:

3-401.11 Raw Animal Foods – Cooking **P, Pf**

3-401.12 Microwave Cooking **P, C**

3-401.14 Non-Continuous Cooking of Raw Animal Foods **P, Pf**

19. Proper reheating procedures for hot holding

NOTE: The reheating temperatures of foods must be taken to determine compliance or non-compliance. Use discussions with managers or cooks and your direct observations to determine compliance or non-compliance. Temperatures IN and OUT of compliance should be recorded in the "Temperature Observations" section of the inspection report.

IN/OUT This item should be marked IN or OUT of compliance based on actual temperature measurements of foods upon completion of the reheating process and prior to being placed in hot holding using a calibrated food temperature measuring device. This item should be marked OUT of compliance if the items checked are not reheated to the required temperatures or within 2 hours prior to hot holding.

N.A. This item may be marked N.A. when foods are **not** held over for a second service and/or reheating for hot holding is not performed in the establishment.

N.O. This item may be marked N.O. when foods are held over for a second service, but **no** foods are reheated for hot holding during the time of inspection.

Applicable Code Sections:
3-403.11 Reheating for Hot Holding [P]

20. Proper cooling time and temperatures

NOTE: The requirement for cooling cooked TCS food is that the food must be cooled from 135°F to 41°F or less in 6 hours provided that the food is cooled from 135°F to 70°F within the first 2 hours. For example, if a facility cools chili from 135°F to 70°F in 1.5 hours; they then have 4.5 hours to get it from 70°F to 41°F or less. There are two critical limits that must be met with cooling. Discussions with the person in charge along with observations should be used to determine compliance. For instance, during discussion the person in charge says that a food product was cooled overnight in the walk-in cooler. The product is checked, and the temperature is 50°F. Eight hours have elapsed from closing to opening. This item should be marked OUT because the product did not cool from 135°F to 70°F within two hours and from 135°F to 41°F or less within a total of 6 hours. This item should also be marked OUT if the product did not cool from ambient temperatures to 41°F within 4 hours such as canned foods. Temperatures IN compliance and OUT of compliance should be recorded in the "Temperature Observations" section of the inspection report. Since the entire cooling process is difficult to observe during an inspection, a determination of whether foods are currently being cooled should be made at the onset of the inspection. If cooling is taking place, temperatures should be taken to make a determination of whether proper cooling is possible with procedures being used. The PIC must demonstrate that both critical limits have been met for the cooling process. Observations of methods and information provided from the operator shall demonstrate if the process is IN or OUT of compliance.

IN/OUT This item should be marked IN or OUT of compliance based on actual temperatures of TCS foods in the cooling process. The basis for determining IN or OUT of compliance can also be supported through discussion and/or record review which would provide the inspector reliable data of the "start time" for cooling from 135°F. See above NOTE for an example of using actual temperature and discussion with the PIC in determining OUT of compliance without actually being at the establishment during the entire cooling of TCS process, from start to finish.

N.A. This item may be marked N.A. when the establishment does **not** receive raw eggs, shellstock, or milk, prepares **no** TCS food from ambient temperature ingredients that require cooling, and does **not** cool cooked TCS food.

N.O. This item may be marked N.O. when the establishment does cool TCS food, but proper cooling per the prescribed temperature and time parameters cannot be determined during the length of the inspection.

Applicable Code Sections:
3-501.14 Cooling [P]

21. Proper hot holding temperatures

NOTE: Temperatures IN compliance and OUT of compliance should be recorded in the "Temperature Observations" section of the inspection report.

IN/OUT This item should be marked IN or OUT of compliance based on actual food temperature measurements using a calibrated food temperature measuring device. This item should be marked IN compliance when the regulatory authority determines that, of the TCS food temperature measurements taken during the inspection, no hot holding temperatures are less than prescribed by the Code. This item is marked OUT of compliance if one TCS food is found out of temperature unless Time as a Public Health Control (TPHC) is used for that TCS food.

N.A. This item may be marked N.A. when the establishment does **not** hot hold food.

N.O. This item may be marked N.O. when the establishment does hot hold food, but no foods are being held hot during the time of inspection. Inspections should be conducted during a time when hot holding temperatures can be taken.

Applicable Code Sections:
3-501.16(A)(1) Time/Temperature Control for Safety Food, Hot and Cold Holding [P]

22. Proper cold holding temperatures

NOTE: Temperatures IN compliance and OUT of compliance should be recorded in the "Temperature Observations" section of the inspection report.

IN/OUT This item should be marked IN or OUT of compliance based on actual food temperature measurements using a calibrated food temperature measuring device. Discussions should be made with the PIC to determine if a food is in the process of cooling, TPHC is used, or there is an approved method to render a food so that it is not TCS food. This item should be marked IN compliance when the regulatory authority determines that, of the temperature measurements taken during the inspection, no cold holding temperatures are greater than prescribed by the Code. This item should be marked OUT of compliance if one TCS food is found out of temperature, with supportive evidence unless TPHC is used for that TCS food.

N.A. This item may be marked N.A. when the establishment does **not** cold hold food.

N.O. This item may be marked N.O. when the establishment does cold hold food, but no foods are being held cold during the time of inspection. Inspections should be conducted during a time when cold holding temperatures can be taken.

Applicable Code Sections:

3-501.16(A)(2) and (B) Time/Temperature Control for Safety Food, Hot and Cold Holding **P**

23. Proper date marking and disposition

IN/OUT This item should be marked IN or OUT of compliance. This item would be IN compliance when there is a system in place for date marking all foods that are required to be date marked and is verified through observation. If date marking applies to the establishment, the PIC should be asked to describe the methods used to identify product shelf-life or "consume-by" dating. The regulatory authority must be aware of food products that are listed as exempt from date marking and date marking time frames. For disposition, mark IN when foods are all within date marked time limits or food is observed being discarded within date marked time limits or OUT of compliance, such as when date marked food exceeds the time limit or date-marking is not done.

N.A. This item may be marked N.A. when there is **no** ready-to-eat, TCS food prepared on- premise and held, or commercial containers of ready-to-eat, TCS food opened and held, over 24 hours in the establishment.

N.O. This item may be marked N.O. when the establishment does handle foods requiring date marking, but there are no foods requiring date marking in the facility at the time of inspection.

Applicable Code Sections:

3-501.17 Ready-To-Eat Time/Temperature Control for Safety Food, Date Marking **Pf**

3-501.18 Ready-To-Eat Time/Temperature Control for Safety Food, Disposition **P**

24. Time as a Public Health Control: procedures and records

IN/OUT This item should be marked IN or OUT of compliance based on direct observations, record review, a discussion with the PIC, and the review of any standard operating procedures to determine if the intent of the Code for use of TPHC is met. This provision only applies if it is the actual intention or conscious decision by the PIC to store TCS food out of temperature control using TPHC; otherwise, it may be a cold or hot holding issue. This item should be marked IN compliance if there is an approved written procedure at the food establishment that identifies the types of food products that will be held using time only, describes the procedure for how TPHC will be implemented, and if applicable delineates how food items, previously cooked and cooled before time is used, are properly cooled; and food items (marked or identified) do not exceed the 4-hour limit at any temperature or 6-hour limit at 70°F or less. This item should be marked OUT of compliance when the PIC implies the use of TPHC but does not have an effective mechanism for indicating the point in time when the food is removed from temperature control to the 4 or 6-hour discard time, or a written procedure or an effective mechanism for using TPHC is not present at the facility.

N.A. This item may be marked N.A. when the establishment does not use time only as the public health control.

N.O. This item may be marked N.O. when the establishment uses time only as the public health control but is not using this practice at the time of inspection.

Applicable Code Sections:

3-501.19 Time as a Public Health Control [P, Pf]

Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN/OUT This item should be marked IN or OUT of compliance based on a thorough review with the PIC of the posted, written, and special/daily menus, to determine if untreated shell eggs, meats, fish, or poultry are used as an ingredient or ordered as a raw, raw-marinated, partially cooked, or undercooked food. The advisory also applies to shellstock offered for sale from a retail service case. This item should be marked IN compliance if the establishment provides an advisory that meets the intent of the Food Code for both the disclosure and reminder components. This item should be marked OUT of compliance when raw or undercooked foods are served or sold and there is no consumer advisory, the food item is not **disclosed**, or there is no **reminder** statement. The consumer advisory does not exempt the requirement for freezing for parasite control, nor should it be used for foods that have only gone through the initial heating and cooling stages of a non-continuous cooking process.

N.A. This item may be marked N.A. when a food establishment does not serve a ready-to-eat food that necessitates an advisory, i.e., an animal food that is raw, undercooked, or not otherwise processed to eliminate pathogens.

N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

3-603.11 Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens [Pf]

Highly Susceptible Populations

26. Pasteurized foods used; prohibited foods not offered

NOTE: Discussions with the PIC and employees regarding whether or not certain foods are served, or certain practices occur in the establishment, along with observations should be used to determine compliance.

IN/OUT This item should be marked IN or OUT of compliance based on direct observations and discussions with the PIC and food employees regarding whether or not certain foods are served, or certain practices occur in an establishment serving a highly susceptible population. Violations of bare hand contact by food employees serving a highly susceptible population ¶ 3-801.11(D) is marked under Item #9. This item should be marked IN compliance if only treated/pasteurized juices/juice beverages are served; only pasteurized eggs are used in recipes if eggs are undercooked and if eggs are combined, unless there is a cook step or HACCP plan to control *Salmonella* enteriditis; no raw or partially cooked animal foods or raw seed sprouts are served; and no unopened packaged food is re-served following service to patients in medical isolation or quarantine.

N.A. This item may be marked N.A. if a highly susceptible population is not served.

N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

3-801.11(A), (B), (C), (E) and (G) Pasteurized Foods, Prohibited Re-Service, and Prohibited Food [P]

Chemical

27. Food additives: approved and properly used

IN/OUT This item should be marked IN or OUT of compliance based on direct observations of food ingredients in storage and listed as product ingredients supplemented by discussion with the PIC. This item is marked IN compliance if approved food and color additives are on site and used properly or if sulfites are on the premises, and they are not applied to fresh fruits/vegetables for raw consumption. Approved food additives are listed and have threshold limits in accordance with the CFRs, and does not apply to food additives that are considered Generally Recognized as Safe (GRAS), such as salt, pepper, etc. This item is marked OUT of compliance if unapproved additives are found on the premises or approved additives are improperly used, such as sulfites being applied to fresh fruits or vegetables.

N.A. This item may be marked N.A. if the food establishment does **not** use any additives or sulfites on the premises.

N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

3-202.12 Additives **P**
3-302.14 Protection from Unapproved Additives **P**

28. Toxic substances properly identified, stored, and used

IN/OUT This item should be marked IN or OUT of compliance based on direct observations of chemical labeling, storage, reconstitution, and application of bulk and working containers of cleaning agents and sanitizers, personal care items, first aid supplies, medicines, pesticides, and potential toxic and poisonous substances. This item should be marked IN compliance when bulk and working containers of cleaning agents and sanitizers are labeled; sanitizing solutions are not exceeding the maximum concentrations; personal care items, first aid supplies, medicines, and chemicals are stored separate from and not above food, equipment, utensils, linens, and single-service and single-use articles; and restricted use pesticides are applied only by or under the supervision of a certified applicator. This item should be marked OUT of compliance if a cleaning agent or sanitizer is not properly identified and stored; if a sanitizing solution has a higher concentration than prescribed and medicines and first aid kits are improperly labeled and stored. Violations of solutions exceeding the recommended concentration in chemical washes for fruits and vegetables (§7-204.12) would be marked under Item #42.

N.A. **Do Not Mark** this item N.A.

N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

7-101.11 Identifying Information, Prominence-Original Containers **Pf**
7-102.11 Common Name-Working Containers **Pf**
7-201.11 Separation-Storage **P**
7-202.11 Restriction-Presence and Use **Pf**
7-202.12 Conditions of Use **P, Pf, C**
7-203.11 Poisonous or Toxic Material Containers-Container Prohibitions **P**
7-204.11 Sanitizers, Criteria-Chemicals **P**
7-204.12 Chemicals for Washing, Treatment, Storage and Processing Fruits and Vegetables, Criteria **P**
7-204.13 Boiler Water Additives, Criteria **P**
7-204.14 Drying Agents, Criteria **P**
7-205.11 Incidental Food Contact, Criteria-Lubricants **P**
7-206.11 Restricted Use Pesticides, Criteria **P**
7-206.12 Rodent Bait Stations **P**
7-206.13 Tracking Powders, Pest Control and Monitoring **P, C**
7-207.11 Restriction and Storage-Medicines **P, Pf**
7-207.12 Refrigerated Medicines, Storage **P**
7-208.11 Storage-First Aid Supplies **P, Pf**

7-209.11 Storage-Other Personal Care Items
7-301.11 Separation-Storage and Display, Stock and Retail Sale [P]

Conformance with Approved Procedures

29. Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan

NOTE Except for fish a HACCP plan is not required when a TCS food is packaged using a reduced oxygen packaging method and is labeled with production time and date, held at required cold holding temperature, and removed from ROP packaging within 48 hours after packaging at the food establishment.

IN/OUT This item should be marked IN or OUT of compliance based on direct observations of food preparation and storage, a discussion with the PIC to determine if there are specialized food processes [i.e. smoking food, curing food, reduced oxygen packaging, using food additives to render a food so that it is not TCS food, cook chill, sous vide, etc.] and the record review of standard operating procedures and HACCP documentation. This item should be marked IN compliance when observations of food operations and review of available records indicate compliance is being met with regards to specialized food processes and HACCP plans were submitted to the regulatory authority prior to conducting a ROP operation that conforms to procedures within §3-502.12.This item should be marked OUT of compliance if the inspection reveals specialized food processes that are not approved by the regulatory authority are performed or not conducted in accordance with the approved variance or a HACCP plan was not submitted to the regulatory authority prior to engaging in a ROP operation without a variance. This item is also OUT when the approved variance as specified in ¶8-103.12(A) is not kept at the food establishment.

Note: ***Do not mark items requiring a special approval due to variations such as 2-compartment sink use, lack of a dumpster pad, extended date-marking, extended TPHC, etc. These violations shall be marked under the citation from which it deviates.***

a) **This item should be marked OUT of compliance if the inspection reveals specialized food processes that are not approved by the Regulatory Authority**. The specialized process must stop immediately, and no food involved in that process may be sold or served. Local EHS should contact their Health Director or Environmental Health Regional Specialist for embargo assistance. The regional staff will assist in determining if voluntary disposal should be requested. If the process is stopped immediately, mark the item OUT with 1/2 credit deducted for the original violation. Document CDI and include comments concerning the outcome of the food in question. The operator should be told the type of approval required and proper request form(s) should be provided. If, during the next inspection, it is determined that the specialized process is still being conducted, this item should be marked OUT with full credit deducted and an Intent to Suspend the permit should be issued. The operator should be told to stop the process immediately. If the operator continues the specialized process without regulatory approval, an Immediate Permit Suspension should be issued. The establishment would be allowed to resume operation after verification that the specialized process has stopped, and disposal of all food associated with that process.

b) **This item should be marked OUT of compliance with ½ credit deduction if an establishment has received a Variance Approval and/or HACCP plan approval for a specialized process, but an inspection or verification visit reveals the operators are not in compliance with 8-103.12.** The specialized process should be stopped in order to assess severity and root cause of non-compliance. If food product is available, local EHS should contact regional staff for guidance on disposal or Embargo action. Operators should be reminded that non-compliance may result in loss of Variance and HACCP plan approvals. If an establishment continues to be non-compliant with their approval, local

staff should mark this item OUT with full deductions and pursue suspension or revocation of the Variance and/or HACCP approvals. If a Variance Approval or HACCP plan approval is revoked and the operator wants to resume the specialized process, the request for an approval must start over. Completed applications and necessary documents must be resubmitted to the appropriate group.

N.A. This item may be marked N.A. if the establishment is not required by the regulatory authority to have a variance or HACCP plan for a specialized process listed in the citations below.

N.O. **Do Not Mark** this item N.O.

Applicable Code Sections:

3-404.11 Treating Juice **P, Pf**
3-502.11 Variance Requirement **Pf**
3-502.12 Reduced Oxygen Packaging, Criteria **P, Pf**
4-204.110(B) Molluscan Shellfish Tanks **P, Pf**
8-103.12 Conformance with Approved Procedures **P, Pf**
8-201.13 When a HACCP Plan is Required
8-201.14 Contents of a HACCP Plan **Pf**

Good Retail Practices (GRPs)

D. MARKING INSTRUCTIONS FOR EACH GOOD RETAIL PRACTICE (GRP) ON THE INSPECTION REPORT

Good Retail Practices (GRPs) are systems to control basic operational and sanitation conditions within a facility, and if not controlled, they could be contributing factors to foodborne illness by introducing hazards (biological, chemical and physical), into the end product, *e*ither directly or indirectly. For example, equipment in disrepair, such as a cutting board with deep grooves/cuts, makes effective cleaning difficult or impossible, and thereby could introduce a bacterial hazard onto food that comes into contact with the board. In addition, in assessing GRPs, it is important to make an overall assessment of the conditions by looking for trends versus an isolated incident; and the potential public health impact. For example, a few missing floor tiles in a dry area may not rise to the level of a "violation"; however, missing floor tiles in an area where equipment is subject to in-place manual cleaning without the use of an enclosed clean in place (CIP) system, i.e., using pressure hoses over band saws, slicers, or mixers, could create conditions whereby a bacterial hazard could be introduced on to the food equipment. These items usually require judgment, and if uncorrected, the regulatory authority must decide whether or not these conditions would lead to potential contamination.

GRPs are the methods used in, or the facilities or controls used for, the receiving, preparation, storage, serving, packaging or holding of food which are designed to assure unsanitary conditions do not lead to the introduction of hazards or unintentional substances into the end product. The intention of this inspection form is to focus the inspector's attention on those factors that have been shown to be most often linked with causing foodborne illness. For marking the GRPs section, indicate **IN** and **OUT** and the point value debited if a code provision under that item is **OUT** of compliance. Indicate **N.A.** and **N.O.** where applicable. Document each violation of the code provision for the item number in the "Observations and Corrective Actions" section on the second page of the inspection report. For items marked **OUT** of compliance, further indicate the **VIOLATION STATUS** by marking the corresponding box**: CDI** = Corrected During Inspection, **R** = Repeat violation and **VR** = Verification Required per the same instructions as given in the Risk Factor section.

E. TEMPERATURE OBSERVATIONS

Item/location	Record the common name of the food as well as the condition, process, and location of the food at the time of monitoring e.g. hot holding, refrigerator, prep-table. Temperatures in compliance and out of compliance should be documented.
Food Temperature	Record the temperature indicated on the inspector's thermometer. Specify the measurement in °F or °C. *(Note: Food temperature measuring devices that are scaled only in Fahrenheit should be accurate to ±2°F in the intended range of use. Food temperature measuring devices that are scaled only in Celsius or dually scaled in Celsius and Fahrenheit should be accurate to ± 1°C in the intended range of use.)*

F. OBSERVATIONS AND CORRECTIVE ACTIONS

Include here specific descriptions of violations observed and recorded in the Risk Factors and Interventions section and Good Retail Practices section. Also include corrective actions for the noted violations and temperatures.

G. SIGNATURE BLOCK

Person in Charge	The PIC is the individual present at a food establishment who is responsible for the operation at the time of the inspection.
Regulatory Authority	The RA is the individual conducting the inspection.

Safe Food and Water

30. Pasteurized eggs used where required

Certain menu items use eggs as an ingredient in the preparation of RTE foods, such as Caesar salad, Hollandaise sauce, etc. This is verified by discussion with the PIC and food employees regarding the substitution of pasteurized egg products for raw eggs in uncooked foods, unless allowed under ¶ 3-401.11(D)(2).

N.A. This item may be marked N.A. if the establishment does not serve RTE foods that include raw eggs as an ingredient or if the establishment properly uses a consumer advisory for RTE foods that are made with non-pasteurized raw/undercooked eggs.

Applicable Code Section:

3-302.13 Pasteurized Eggs Substituted for Raw Eggs for Certain Recipes **P**

31. Water and ice from approved source

There are two types of systems: Public Water System or Non-Public Water System. Regardless of its source, it must meet drinking water standards established by EPA and applicable state drinking water quality standards. If a non-public system is used as Drinking water, the water is sampled / tested at least yearly and records retained on file at the food establishment or per state regulations. Consideration must be given to the supply containers, piping, hoses, etc., connected to the APPROVED source when water is made available for mobile and/or temporary food establishment without a permanent supply.

Applicable Code Sections:

3-202.16 Ice **P**
5-101.11 Approved System-Source **P**
5-102.11 Standards-Quality **P**
5-102.12 Nondrinking Water **Pf**
5-102.13 Sampling **Pf**
5-102.14 Sample Report
5-104.12 Alternative Water Supply **Pf**

32. Variance obtained for specialized processing methods

When a Food Establishment wants to deviate from a requirement in the code, utilizes Specialized Processing Methods as specified in § 3-502.11 such as Smoking Food for Preservation, curing food etc. a variance must first be obtained from the regulatory authority. A HACCP plan may also be required as listed in ¶ 8-201.13(A) as part of the variance request.

Note: Do not mark items requiring a special approval due to variations such as 2- compartment sink use, lack of a dumpster pad, extended date-marking, extended TPHC, rendering a food non-TCS. These violations shall be marked under the citation from which it deviates.

a) The specialized process must stop immediately, and no food involved in that process may be sold or served. Local EHS may request the Health Director or Environmental Health Regional Specialist to use their Embargo authority to detain food. The regional staff will assist in determining if voluntary disposal should be requested. If the process is stopped immediately, mark the item OUT with 1/2 credit deducted for the original violation. Document CDI and include comments concerning the outcome of the food in question. The operator should be told the type of approval required (local or state) and proper request form(s) should be provided. If, during the next inspection, it is determined that the specialized process is still being conducted, this item should be marked OUT with full credit deducted and an Intent to Suspend the permit should be issued. The operator should be told to stop the process immediately. If the operator continues the specialized process without regulatory approval, an Immediate Permit Suspension should be

issued. The establishment would be allowed to resume operation after verification that the specialized process has stopped, and disposal of all food associated with that process.

b) Failure to comply with Item #30 will mean Item #27 is out of compliance as well. Item #30 refers only to receiving variance and HACCP plan approvals, where required. Therefore, the local EHS will need to determine which approval is needed for the process in question. Once that determination has been made, the guidance in the previous paragraphs should be followed for point deductions and/or permit action.

N.A. This item may be marked N.A. if the establishment is not engaged in a specialized processing method, other operation requiring a variance and a HACCP plan, or a process or processing method determined by the regulatory authority to require a variance and a HACCP plan.

Applicable Code Section:
8-103.11 Documentation of Proposed Variance and Justification **Pf**

Food Temperature Control

33. Proper cooling methods used; adequate equipment for temperature control

A determination must first be made that cooling food is part of the processing step. To assess whether or not the methods used facilitate the cooling criteria specified under § 3-501.14, a discussion with the PIC should support actual observations used in cooling foods. There should be enough equipment with sufficient capacity used for the cooling, heating and hot/cold holding of foods requiring temperature control as specified in Chapter 3 to meet the demands of the operation. Observations must support the determination of compliance status. Frozen food is solid to the touch.

Applicable Code Sections:
3-501.11 Frozen Food
3-501.15 Cooling Methods **Pf**
4-301.11 Cooling, Heating, and Holding Capacities-Equipment **Pf**

34. Plant food properly cooked for hot holding

In determining compliance, observation along with an actual cooking temperature must be obtained.

N.A. This item may be marked N.A. if vegetables and fruits are **not** cooked for hot holding in the establishment.
N.O. This item may be marked N.O. when plant foods are cooked for hot holding but are not available for observation during the inspection.

Applicable Code Section:
3-401.13 Plant Food Cooking for Hot Holding **Pf**

35. Approved thawing methods used

Observing and then gaining an understanding of the establishment's thawing method(s) will help in determining whether a violation exists from the approved thawing methods found under § 3-501.13 as well as the level of risk imposed. Keep in mind that various food products especially those destined for deep-fat frying are often slacked (not thawed) prior to cooking.

Applicable Code Sections:
3-501.12 Time/Temperature Control for Safety Food, Slacking
3-501.13 Thawing **Pf, C**

N.A. This item may be marked N.A. if TCS food are **not** thawed.
N.O. This item may be marked N.O. if this food is thawed, but thawing was not observed during the inspection.

36. Thermometers provided and accurate

Thermometers provide a means for assessing active managerial control of TCS food temperatures. Determine compliance by observing the in-use storage location and verifying the scaling of the temperature measuring devices in the range of use to measure food, water, or ambient air temperatures. Food thermometers must be calibrated at a frequency to ensure accuracy. Food thermometers should be accessible for use by employees and have a probe size appropriate to the food item.

Applicable Code Sections:

4-203.11 Temperature Measuring Devices, Food-Accuracy **Pf**
4-203.12 Temperature Measuring Devices, Ambient Air and Water-Accuracy **Pf**
4-204.112 Temperature Measuring Devices-Functionality **Pf**
4-302.12 Food Temperature Measuring Devices **Pf**
4-502.11(B) Good Repair and Calibration **Pf**

Food Identification

37. Food properly labeled: original container

Packaged foods are required to conform to specific labeling laws. Foods packaged within the food establishment must also conform to the appropriate labeling laws, with considerations given to accuracy as well as not being misleading such as species substitutions, e.g. white tuna instead of Escolar. In addition, all major food allergens, if present, must be accurately declared on the package. Working containers and bulk foods removed from their original packaging require some level of assessment as to how recognizable the food is without labeling by its common name. Molluscan shellfish and vended TCS foods must specifically be assessed based on their specific packaging and labeling requirements.

Applicable Code Sections:

3-202.17 Shucked Shellfish, Packaging and Identification **Pf, C**
3-203.11 Molluscan Shellfish, Original Container
3-302.12 Food Storage Containers Identified with Common Name of Food
3-601.11 Standards of Identity
3-601.12 Honestly Presented
3-602.11 Food Labels **Pf, C**
3-602.12 Other Forms of Information

Prevention of Food Contamination

38. Insects and rodents not present; no unauthorized animals

An assessment is made through observation and discussion with the PIC for measures taken to control the presence of pests in the food establishment, including elimination of entry points and harborage areas, and removal of pests and its evidence. Insect trapping devices must not be located over food preparation areas. Animals must only be present as service animals or as approved in outdoor dining.

Applicable Code Sections:

2-403.11 Handling Prohibition-Animals **Pf**
6-202.13 Insect Control Devices, Design and Installation
6-202.15 Outer Openings, Protected
6-202.16 Exterior Walls and Roofs, Protective Barrier
6-501.111 Controlling Pests **Pf, C**
6-501.112 Removing Dead or Trapped Birds, Insects, Rodents and other Pest
6-501.115 Prohibiting Animals **Pf**

39. Contamination prevented during food preparation, storage and display

The observation and understanding of the flow of food items from the point of receipt to the point of sale, service or distribution is necessary to determine whether a violation exists. Food is subject to direct and indirect sources of contamination in the establishment. Sources may be related to the working environment, packaging, adequacy of storage facilities, and exposure of food on display to contamination (i.e. salad bars).

Applicable Code Sections:

3-202.19 Shellstock, Condition
3-303.11 Ice Used as Exterior Coolant, Prohibited as Ingredient **P**
3-303.12 Storage or Display of Food in Contact with Water or Ice
3-304.13 Linens and Napkins, Use Limitations
3-305.11 Food Storage-Preventing Contamination from the Premises
3-305.12 Food Storage, Prohibited Areas
3-305.14 Food Preparation
3-306.11 Food Display-Preventing Contamination by Consumers **P**
3-306.12 Condiments, Protection
3-306.13(B) and (C) Consumer Self-Service Operations **Pf**
3-307.11 Miscellaneous Sources of Contamination
6-404.11 Segregation and Location-Distressed Merchandise **Pf**

40. Personal cleanliness

Observation of facility personnel for clean outer clothing, effective hair restraints, prohibited jewelry and the condition or protection of fingernails must be made. This includes the use of single-use gloves over an impermeable bandage, finger cot or finger stall.

Applicable Code Sections:
2-302.11 Maintenance-Fingernails **Pf**
2-303.11 Prohibition-Jewelry
2-304.11 Clean Condition-Outer Clothing
2-401.13 Use of Bandages, Finger Cots, or Finger Stalls
2-402.11 Effectiveness-Hair Restraints

41. Wiping cloths: properly used and stored

Wiping cloths are to be used for a designated purpose. When stored in solution, the solutions should be visibly clean and maintained at the proper sanitizer concentration (§4-501.114). Solutions exceeding the recommended sanitizer concentrations would be marked on the Inspection Form under item #28, Toxic substances properly identified, stored, and used. Sponges, if present, are not to be used in contact with clean/sanitized food contact surfaces.

Applicable Code Sections:
3-304.14 Wiping Cloths, Use Limitation
4-101.16 Sponges Use Limitation
4-901.12 Wiping Cloths, Air Drying Location

42. Washing fruits and vegetables

Raw fruits and vegetables are to be washed prior to their preparation or offered as RTE. Chemicals are allowed for washing fruits and vegetables, along with simply washing them in water. Chemicals that are used in the wash water for fruits and vegetables must be listed and approved with threshold limits in accordance with the CFR's. Refer to the label or labeling of the additive for adequate directions and to assure safe use. Discussion with the PIC and food employees will help determine the establishment's practice.

N.A. This item may be marked N.A. if the establishment does not serve or process fruits and vegetables or if fruits and vegetables are pre-washed when received.

Applicable Code Sections:
3-302.15 Washing Fruits and Vegetables
7-204.12 Chemicals for Washing, Treatment, Storage and Processing Fruits and Vegetables, Criteria **P**

Proper Use of Utensils

43. In-use utensils: properly stored

Based on the type of operation, there are a number of methods available for storage of in-use utensils during pauses in food preparation or dispensing, such as in the food, clean and protected, or under running water to

prevent bacterial growth. If stored in a container of water, the water temperature must be at least 135°F. In-use utensils may not be stored in chemical sanitizer or ice between uses. Ice scoops may be stored handles up in an ice bin.

Applicable Code Sections:
3-304.12 In-Use Utensils, Between-Use Storage

44. Utensils, equipment and linens: properly stored, dried & handled

An assessment is made of the overall storage practices and handling of clean equipment and utensils, including tableware located in the various areas within an establishment, including the basement, wait station and dining room. Equipment must be air dried prior to storage, and linens must be properly cleaned and stored.

Applicable Code Sections:
4-801.11 Clean Linens
4-802.11 Specifications-Laundering Frequency
4-803.11 Storage of Soiled Linens
4-803.12 Mechanical Washing
4-901.11 Equipment and Utensils, Air-Drying Required
4-903.11(A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing
4-903.12 Prohibitions
4-904.11 Kitchenware and Tableware-Preventing Contamination
4-904.12 Soiled and Clean Tableware
4-904.13 Preset Tableware
4-904.14 Rinsing Equipment and Utensils after Cleaning and Sanitizing

45. Single-use and single-service articles; properly stored and used

These items are not designed to be cleaned and re-used; therefore, they must be properly stored and protected to prevent contamination. Food establishments without facilities for cleaning and sanitizing kitchenware and tableware shall provide only single-use and single-service articles.

Applicable Code Sections:
4-502.12 Single-Service and Single-Use Articles, Required Use **P**
4-502.13 Single-Service and Single-Use Articles-Use Limitations
4-502.14 Shells, Use Limitations
4-903.11(A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing
4-903.12 Prohibitions
4-904.11 Kitchenware and Tableware-Preventing Contamination

46. Gloves used properly

The observation of food preparation activities and glove-use by food employees is necessary. There should be a discussion with the PIC on how gloves are used, if applicable, in food preparation activities. Gloves may serve as a source of cross-contamination if misused. ***Note:*** *Single-use gloves used for more than one task should be marked under #15.*

Applicable Code Sections:
3-304.15(B)-(D) Gloves, Use Limitations

Utensils and Equipment

47. Equipment, food and non-food-contact surfaces approved; cleanable, properly designed, constructed and used

Equipment and utensils must be properly designed and constructed, and in good repair. Proper installation and location of equipment in the food establishment are important factors to consider for ease of cleaning in preventing accumulation of debris and attractants for insects and rodents. Equipment must be properly used and in proper adjustment, such as calibrated food thermometers.

Applicable Code Sections:
3-304.16 Using Clean Tableware for Second Portions and Refills
3-304.17 Refilling Returnables [P]
4-101.11 Characteristics-Materials for Construction and Repair [P, C]
4-101.12 Cast Iron, Use Limitations
4-101.13 Lead, Use Limitation [P, C]
4-101.14 Copper Use Limitation [P]
4-101.15 Galvanized Metal, Use Limitation [P]
4-101.17 Wood, Use Limitation
4-101.18 Nonstick Coatings, Use Limitation
4-101.19 Nonfood-Contact Surfaces
4-102.11 Characteristics-Single-Service and Single-Use [P, C]
4-201.11 Equipment and Utensils-Durability and Strength
4-201.12 Food Temperature Measuring Devices [P]
4-202.11 Food-Contact Surfaces-Cleanability [Pf]
4-202.12 CIP Equipment [Pf, C]
4-202.13 "V" Threads, Use Limitation
4-202.14 Hot Oil Filtering Equipment
4-202.15 Can Openers
4-202.16 Nonfood-Contact Surfaces
4-202.17 Kick Plates Removable
4-204.12 Equipment Openings, Closures and Deflectors
4-204.13 Dispensing Equipment, Protection of Equipment and Food [P, C]
4-204.15 Bearings and Gear Boxes, Leakproof
4-204.16 Beverage Tubing, Separation
4-204.17 Ice Units, Separation of Drains
4-204.18 Condenser Unit, Separation
4-204.110(A) Molluscan Shellfish Tanks [P]
4-204.120 Equipment Compartments, Drainage
4-204.122 Case Lot Handling Apparatuses, Movability
4-205.10 Food Equipment, Certification and Classification
4-302.11 Utensils, Consumer Self-Service [Pf]
4-401.11 Equipment, Clothes Washers, Dryers and Storage Cabinets, Contamination Prevention-Location
4-402.11 Fixed Equipment, Spacing or Sealing-Installation
4-402.12 Fixed Equipment, Elevation or Sealing
4-501.11 Good Repair and Proper Adjustment-Equipment
4-501.12 Cutting Surfaces
4-501.13 Microwave Ovens
4-502.11(A) and (C) Good Repair and Calibration-Utensils and Temperature and Pressure Measuring Devices
4-603.11 Dry Cleaning-Methods
4-902.11 Food-Contact Surfaces-Lubricating and Reassembling
4-902.12 Equipment-Lubricating and Reassembling
.2663 **OUTDOOR DINING AND BEVERAGE FACILITIES**

48. Warewashing facilities: installed, maintained and used; test strips

Adequate warewashing facilities must be available and used for the cleaning and sanitization of food-contact surfaces, including the availability of means to monitor its use and the effectiveness of sanitization. For example, an irreversible registering temperature indicator is provided and readily accessible for measuring the utensil surface temperature for establishments that have a hot water mechanical warewashing operation. Observation of manual and mechanical warewashing methods are made to assess the procedure for cleaning and sanitizing equipment and utensils. This item is marked OUT of compliance when cleaners and sanitizers are not available for use within the food establishment.

Applicable Code Sections:
4-203.13 Pressure Measuring Devices, Mechanical Warewashing Equipment
4-204.113 Warewashing Machine, Data Plate Operation Specifications
4-204.114 Warewashing Machines, Internal Baffles
4-204.115 Warewashing Machines, Temperature Measuring Devices [Pf]
4-204.116 Manual Warewashing Equipment, Heaters and Baskets [Pf]
4-204.117 Warewashing Machines, Automatic Dispensing of Detergents and Sanitizers [Pf]
4-204.118 Warewashing Machines, Flow Pressure Device
4-204.119 Warewashing Sinks and Drainboards, Self-Draining
4-301.12 Manual Warewashing, Sink Compartment Requirements [Pf, C]

4-301.13 Drainboards
4-302.13 Temperature Measuring Devices, Manual and Mechanical Warewashing [Pf]
4-302.14 Sanitizing Solutions, Testing Devices [Pf]
4-303.11 Cleaning Agents and Sanitizers, Availability [Pf]
4-501.14 Warewashing Equipment, Cleaning Frequency
4-501.15 Warewashing Machines, Manufacturers' Operating Instructions
4-501.16 Warewashing Sinks, Use Limitation
4-501.17 Warewashing Equipment, Cleaning Agents [Pf]
4-501.18 Warewashing Equipment, Clean Solutions
4-501.19 Manual Warewashing Equipment, Wash Solution Temperature [Pf]
4-501.110 Mechanical Warewashing Equipment, Wash Solution Temperature [Pf]
4-501.113 Mechanical Warewashing Equipment, Sanitization Pressure
4-501.116 Warewashing Equipment, Determining Chemical Sanitizer Concentration [Pf]
4-603.12 Precleaning
4-603.13 Loading of Soiled Items, Warewashing Machines
4-603.14 Wet Cleaning
4-603.15 Washing, Procedures for Alternative Manual Warewashing Equipment
4-603.16 Rinsing Procedures

49. Non-food-contact surfaces clean

Observations should be made to determine if the frequency of cleaning is adequate to prevent soil accumulations on non-food-contact surfaces.

Applicable Code Sections:
4-601.11(B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils
4-602.13 Nonfood Contact Surfaces

Physical Facilities

50. Hot and cold water available; adequate pressure

Regardless of the supply system, the distribution of water to the facility must be protected and operated according to law. Adequate pressure is to be maintained at all fixtures during peak demand including the capacity to provide hot water at peak hot water demand.

N.A. This item may be marked N.A. if the establishment is a hot dog push cart that does not require running water.

Applicable Code Sections:
5-103.11 Capacity-Quantity and Availability [Pf]
5-103.12 Pressure [Pf]
5-104.11 System [Pf]

51. Plumbing installed; proper backflow devices

The observation of an approved plumbing system, installed and maintained, including the equipment and devices connected to the potable water supply, is necessary to determine whether a violation exists. An assessment of the layout of the establishment and the water distribution system is made to determine if there are any points at which the potable water supply is subject to contamination or is in disrepair.

Applicable Code Sections:
5-101.12 System Flushing and Disinfection [P]
5-201.11 Approved-Materials [P]
5-202.11 Approved System and Cleanable Fixtures [P, C]
5-202.13 Backflow Prevention, Air Gap [P]
5-202.14 Backflow Prevention Device, Design Standard [P]
5-202.15 Conditioning Device, Design
5-203.13 Service Sink
5-203.14 Backflow Prevention Device, When Required [P]
5-203.15 Backflow Prevention Device. Carbonator [P]

5-204.12 Backflow Prevention Device, Location
5-204.13 Conditioning Device, Location
5-205.12 Prohibiting a Cross Connection [P, PF]
5-205.13 Scheduling Inspection and Service for a Water System Device [Pf]
5-205.14 Water Reservoir of Fogging Devices, Cleaning [P]
5-205.15 System Maintained in Good Repair [P, C]
5-301.11 Approved-Materials, Mobile Water Tank and Mobile Food Establishment Water Tank [P, C]
5-302.11 Enclosed System, Sloped to Drain
5-302.12 Inspection and Cleaning Port, Protected and Secured
5-302.13 "V" Type Threads, Use Limitation
5-302.14 Tank Vent, Protected
5-302.15 Inlet and Outlet, Sloped to Drain
5-302.16 Hose, Construction and Identification [P, C]
5-303.11 Filter, Compressed Air [P]
5-303.12 Protective Cover or Device
5-303.13 Mobile Food Establishment Tank Inlet
5-304.11 System Flushing and Sanitization-Operation and Maintenance [P]
5-304.12 Using a Pump and Hoses, Backflow Prevention
5-304.13 Protecting Inlet, Outlet and Hose Fitting
5-304.14 Tank, Pump and Hoses, Dedication [P]

52. Sewage and waste water properly disposed

There are two types of systems: public sewage treatment plant and an individual sewage disposal system. Observations of the facilities overall sewage and wastewater system is necessary to determine if a violation exists. Indications that a system is not functioning properly may include the presence of sewage back-up into the establishment or outdoors on the ground. Condensate drippage and other non-sewage wastes must be drained to a system in accordance to LAW, and backflow prevention, if required, installed between the sewage system and drain of equipment holding food or utensils. Mobile wastewater holding tanks must also be assessed for capacity and maintenance.

Applicable Code Sections:

5-401.11 Capacity and Drainage
5-402.11 Backflow Prevention [P]
5-402.12 Grease Trap
5-402.13 Conveying Sewage [P]
5-402.14 Removing Mobile Food Establishment Wastes [Pf]
5-402.15 Flushing a Waste Retention Tank
5-403.11 Approved Sewage Disposal System [P]
5-403.12 Other Liquid Wastes and Rainwater

53. Toilet facilities: properly constructed, supplied and cleaned

A toilet facility should be assessed to determine if: it is not an attractant to insects; the number of fixtures are adequate; toilet tissue and a covered trash receptacle (ladies room only) are provided; fixtures are not being kept clean; and the door self-closes to prevent recontamination of hands.

N.A. This item may be marked N.A. if the establishment is a mobile food unit or a hot dog push cart that does not have toilet facilities.

Applicable Code Sections:

5-203.12 Toilets and Urinals
5-501.17 Toilet Room Receptacle, Covered
6-202.14 Toilet Rooms, Enclosed
6-302.11 Toilet Tissue, Availability [Pf]
6-402.11 Conveniently Located
6-501.18 Cleaning of Plumbing Fixtures
6-501.19 Closing Toilet Room Doors

54. Garbage and refuse properly disposed; facilities maintained

The assessment of the refuse collection and disposal areas for proper receptacles and maintenance is necessary to determine whether a violation exists. Since refuse areas may attract and harbor insects and pests, as well as create a public health nuisance, particular attention must be paid to the maintenance of the refuse facilities and area.

Applicable Code Sections:

5-501.11 Outdoor Storage Surface
5-501.12 Outdoor Enclosure
5-501.13 Receptacles
5-501.15 Outside Receptacles
5-501.16 Storage Areas, Rooms and Receptacles, Capacity and Availability
5-501.18 Cleaning Implements and Supplies
5-501.19 Storage Areas, Redeeming Machines, Receptacles and Waste Handling Units, Location
5-501.110 Storage Refuse, Recyclables and Returnables
5-501.111 Area, Enclosures and Receptacles, Good Repair
5-501.112 Outside Storage Prohibitions
5-501.113 Covering Receptacles
5-501.114 Using Drain Plugs
5-501.115 Maintaining Refuse Areas and Enclosures
5-501.116 Cleaning Receptacles
5-502.11 Frequency-Removal
5-502.12 Receptacles or Vehicles
5-503.11 Community or Individual Facility
6-202.110 Outdoor refuse Areas, Curbed and Graded to Drain

55. Physical facilities installed, maintained and clean

Observations are made of the overall conditions or practices related to the physical facility (e.g., materials used, good repair, and maintained). It is important to make an overall assessment of the physical facility conditions to determine the level of compliance and the potential public health impact involved if compliance is not met. Storage of maintenance tools, use of laundry facilities, if applicable, disposal of mop water and separate living/sleeping quarters are included in this section.

Applicable Code Sections:

4-301.15 Clothes Washers and Dryers
4-401.11(C) Equipment, Clothes Washers and Dryers, and Storage Cabinets, Contamination Prevention
4-803.13 Use of Laundry Facilities
6-101.11 Surface Characteristics-Indoor Areas
6-102.11 Surface Characteristics-Outdoor Areas
6-201.11 Floors, Walls and Ceilings-Cleanability
6-201.12 Floors, Walls, and Ceilings, Utility Lines
6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed
6-201.14 Floor Carpeting, Restrictions and Installation
6-201.15 Floor Covering, Mats and Duckboards
6-201.16 Wall and Ceiling Coverings and Coatings
6-201.17 Walls and Ceilings, Attachments
6-201.18 Walls and Ceilings, Studs, Joists, and Rafters
6-202.19 Outdoor Walking and Driving Surfaces, Graded to Drain
6-202.111 Private Homes and Living or Sleeping Quarters, Use Prohibition **P**
6-202.112 Living or Sleeping Quarters, Separation
6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods
6-501.12 Cleaning, Frequency and Restrictions
6-501.13 Cleaning Floors, Dustless Methods
6-501.15 Cleaning Maintenance Tools, Preventing Contamination **Pf**
6-501.16 Drying Mops
6-501.17 Absorbent Materials on Floors, Use Limitation
6-501.113 Storing Maintenance Tools

6-501.114 Maintaining Premises, Unnecessary Items and Litter

56. Meets ventilation and lighting requirements; designated areas used

Observations should be made to ensure that the ventilation is adequately preventing an accumulation of condensation, grease or other soil from potentially contaminating food and the surrounding environment and that lights are at an adequate light intensity, and personal belongings are properly stored to maintain clean and sanitary facility and protect food and equipment.

Applicable Code Sections:

4-202.18 Ventilation Hood Systems, Filters
4-204.11 Ventilation Hood Systems, Drip Prevention
4-301.14 Ventilation Hood Systems, Adequacy
6-202.11 Light Bulbs, Protective Shielding
6-202.12 Heating, Ventilation, Air Conditioning System Vents
6-303.11 Intensity-Lighting
6-304.11 Mechanical-Ventilation
6-305.11 Designation-Dressing Areas and Lockers
6-403.11 Designated Areas-Employee Accommodations for eating/drinking/smoking
6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition
6-501.110 Using Dressing Rooms and Lockers

COMPLIANCE AND ENFORCEMENT STRATEGIES



North Carolina

Food Protection and Facilities Program

INNOVATION UNIFORMITY
North Carolina
RETAIL PROGRAM STANDARDS NETWORK
IMPACT PREVENTION

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

Version 4

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COMPLIANCE AND ENFORCEMENT STRATEGIES

Section 1: BACKGROUND

This manual was originally developed in 2011 by the North Carolina Department of Environmental Health (NCDENR), Food Protection Branch. The initial workgroup comprised Environmental Health Regional Specialists and Registered Environmental Health Specialists (REHSs). Its purpose was to create a centralized resource for enforcement guidance, promoting consistency across programs. The project received funding from the Food and Drug Administration (FDA) and was awarded through the Association of Food and Drug Officials (AFDO).

In 2017, a new workgroup was convened to revise the manual by integrating compliance guidance. The update aimed to support jurisdictions in meeting the requirements of Standard 3 — Inspections based on HACCP principals — for sustained compliance, and to assist with procedures aligned with Standard 6 — Compliance and Enforcement. This revision was led by Wake County, with continued funding from the FDA and an award from AFDO.

In 2023, the North Carolina Retail Program Standards Network (NCRPSN) formed a workgroup to update the manual in alignment with the 2017 North Carolina Food Code and recent regulatory changes. Richmond County led this effort, funded by the FDA and awarded by the National Environmental Health Association (NEHA).

This current edition has been reviewed and approved by the North Carolina Department of Health and Human Services (NCDHHS), Food Protection Program. It serves as:

- A training resource for local REHSs
- A compliance reference for file reviews
- A supporting document for jurisdictions participating in the FDA Voluntary National Retail Food Regulatory Program Standards, specifically for conformance with Standard 6

Section 2: PURPOSE

This manual provides guidance and assistance with the compliance and enforcement of North Carolina statutes and rules pertaining to Risk Factors and Interventions at regulated retail food and drink establishments. Compliance and enforcement activities encompass all voluntary and regulatory actions taken to achieve compliance with regulations. Compliance and enforcement activities result in the timely correction of code violations. This collaborative process will enable the Environmental Health Specialist to ensure the facility complies with all applicable regulations. This manual supplements the current laws, rules, and marking instructions. For further clarification on any issue addressed within this manual, refer to the applicable statutes and regulations. The regulatory authority for inspections is outlined in the NC General Statutes, NC Rules Governing Food Establishments, and the NC Food Code Manual.

FDA Standard 6 serves as a cornerstone of food safety regulation and public health protection by outlining the essential framework for the effective implementation of compliance and enforcement strategies. Its primary goal is to ensure establishments are held to consistent corrective measures, thereby reducing the risk of foodborne illnesses across jurisdictions. The manual emphasizes the importance of developing credible short- and long-term corrective strategies for each identified violation. These strategies are not only essential for achieving compliance but also play a key role in mitigating the recurrence of critical risk factors. Additionally, the manual incorporates the FDA's violation crosswalk for Standard 6, a critical tool used to align observed violations with the corresponding Food Code interventions. This crosswalk serves as a reference to help inspectors, regulators, and enforcement personnel ensure that every violation is evaluated in terms of its public health impact and associated preventive measures.

FDA Standard 6 and North Carolina's Enforcement Strategies Manual work in tandem to establish a science-based, proactive approach to food safety enforcement. By focusing on risk reduction, documentation, and intervention alignment, they empower regulatory programs to not only correct unsafe practices but also foster a culture of compliance and accountability throughout the food industry.

Section 3: ACRONYMS

This document uses the following acronyms:

- AMC–Active Managerial Control
- CDI – Corrected During Inspection
- CIP – Clean in Place
- EHS – Environmental Health Specialist
- FCA– Follow-up Corrective Action
- HACCP – Hazard Analysis Critical Control Point
- HSP – Highly Susceptible Population
- PIC – Person in Charge
- RCP – Risk Control Plan
- RTE – Ready to Eat Food
- SOP – Standard Operating Procedure
- TCS – Time/Temperature Control for Safety
- TPHC – Time as a Public Health Control
- VR– Verification Required

Section 4: STANDARD 6 ESTABLISHMENT FILE REVIEW DEFINITIONS

Standard 6 outlines a jurisdiction's enforcement strategies to ensure compliance with regulations. This includes all voluntary or involuntary conformity with provisions set forth by the jurisdiction to safeguard public health and ensure that food is safe. As part of this process, each jurisdiction is required to have acronyms to include as part of each establishment file worksheet. The definitions below have been obtained from resources such as the Conference for Food Protection, Food Code, and FDA Retail Food Specialist.

- Active Managerial Control – means the purposeful incorporation of specific actions or procedures by industry management into their businesses to attain control over foodborne illness risk factors.
- CIP (Clean-in-Place) – means cleaned in place by the circulation or flowing by mechanical means through a piping system of a detergent solution, water rinse, and sanitizing solution onto or over equipment surfaces that require cleaning, such as the method used, in part, to clean and sanitize a frozen dessert machine.
- Corrected During Inspection – indicates that all violations cited under that particular item number have been corrected and verified before completing the inspection.
- *Follow-up Corrective Action – occurs after the routine inspection, such as a re-inspection, training, risk control plan, and internal conferences.
- Hazard Analysis Critical Control Point – "HACCP plan" means a written document delineating the formal procedures for following the HAZARD Analysis and CRITICAL CONTROL POINT principles developed by The National Advisory Committee on Microbiological Criteria for Foods.
- PERSON IN CHARGE – the individual present at a FOOD ESTABLISHMENT responsible for the operation at the time of inspection.
- READY TO EAT – as defined in the NC Food Code.
- *Repeat Risk Factor Violations – the same risk factor violation under the same citation on the last inspection report that requires additional activities to obtain compliance. Options include the following: Risk Control Plans or Training.
- Risk Control Plan – 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.
- Standard Operating Procedures – a written method of controlling a practice in accordance with predetermined specifications to obtain a desired outcome.
- TIME/TEMPERATURE CONTROL FOR SAFETY – as defined in the NC Food Code.
- TPHC – means using time (instead of temperature) to control the growth of microorganisms and ensure product safety. TPHC allows an establishment to hold time/temperature control for safety products (TCS) in the temperature danger zone for a maximum period of time only if the proper procedures are followed.
- Verification Required – indicates correction is warranted within the timeframe specified under 8-405.11.

Note: Words in uppercase format are words that can be found defined in the FDA Food Code. Definitions with an "" are required for Standard 6.*

Section 5: FDA RISK FACTORS AND INTERVENTIONS

Epidemiological outbreak data repeatedly identify five major risk factors related to employee behaviors and preparation practices in retail and food service establishments contributing to foodborne illness.

Risk Factors
• Food from Unsafe Sources • Poor Personal Hygiene • Inadequate Cooking • Improper Holding/Time and Temperature • Contaminated Equipment/Protection from Contamination

The Food Code addresses controls for risk factors and further establishes five key public health interventions to protect consumer health. Specifically, these interventions are:

Interventions
• Demonstration of Knowledge by the Person in Charge (PIC) • Implementation of Employee Health Policies • No Bare Hand Contact • Time/Temperature Relationships • Consumer Advisory

Section 6: ENFORCEMENT AND COMPLIANCE TOOLS

Regulatory and non-regulatory enforcement and compliance tools are means to achieve the goal of reducing foodborne illness risk factors. They are reactive measures that respond to violations observed during inspections. Compliance with regulations is best achieved when operators are educated in the best practices of food safety, take ownership, and incorporate food safety concepts into their daily operations. This is known as Active Managerial Control (AMC), a proactive measure, and should be assessed by EHSs during routine regulatory inspections. During routine regulatory inspections, EHSs observe facility operations and provide feedback to operators. Education and enforcement are both tools to encourage compliance; however, enforcement actions such as those listed call attention to violations and highlight areas that need immediate and long-term attention. Enforcement actions include:

1. **Grading and Escalation:** NCGS 130A-248 requires the State to adopt rules 15A NCAC 18A .2662 have a system for grading such as Grade A, Grade B, and Grade C. The rules require the grade/score to be posted at "a conspicuous place where the public may readily observe it upon entering the food establishment." Public notification of food establishment grades/scores provides consumers with information in making dining decisions and encourages operators to maintain a high level of performance. The state provides marking instructions (Food Code Marking Instructions) that offer guidance on how to mark the inspection sheet. "See Section - 11". To demonstrate credible follow-up for violations that repeatedly occur and/or fail to gain correction at the time of inspection, 15A NCAC 18A .2661 (e-f), defines how escalating points must be carried out.

2. **Verification Visits:** Verification visits are required when priority and priority foundation items are not corrected during an inspection or when there is a deviation from a HACCP plan. (8-405.20) The EHS must ensure the correction of priority and priority foundation violations during the inspection or with a verification visit, which shall not exceed 72 hours for Priority Items or 10 days for Priority Foundation items from the observation 8-405.11 Timely Correction.

3. **Voluntary Disposal and Embargo:** Embargo grants the authority to voluntarily dispose of adulterated or misbranded food. If voluntary disposal does not occur, the process moves to detainment, which is performed by the local health director or the Environmental Health Regional Specialist.
    - Voluntary Disposal: When an EHS observes adulterated or misbranded foods, voluntary disposal is an option for correction. The EHS shall document the voluntary disposal on the inspection form. When needed, a Product Disposition Form or a comment addendum can be used to document the disposal of food. Discarded foods should be destroyed or denatured to be sure they are not sold later. The PIC and the EHS should sign and date the product disposition form. For the purposes of this document, the term discard implies voluntary disposal by an operator or PIC.
    - Embargo: **GS 130A-21:** The purpose of embargo authority is to prevent adulterated or misbranded food or drink from being served to the public. Embargo is an order from a public health official requiring a person/establishment to detain or hold food that may be adulterated or misbranded. The embargoed item(s) may not be destroyed without a court order. The state Department of Agriculture and Consumer Services (DACS) has primary embargo authority in North Carolina. Public health's authority extends only to establishments regulated by state public health laws or the subject of a communicable disease investigation. The only public health officials who may order an embargo are state EH agency officials, regional specialists, or a local health director (who must consult with a regional specialist or other state EH agency official). Public health must notify NCDACS when the public health embargo authority is exercised. Link to Embargo tags.

4. Risk Control Plan: A risk control plan is a mutually agreed-upon plan written by the management of the food establishment and approved by the EHS to address chronic problems with risk factors and interventions. The plan describes the establishment's management system for controlling the chance of harm. Examples of appropriate RCPs are included in the appendices of this document. A RCP is an option to be considered when the same risk factor or intervention has been found out of compliance on multiple inspections. ***Note:*** *In order to meet standard 6, jurisdictions should have specific policies that describe the use of risk control plans if it is being used as a long-term compliance tool.*

5. Permit Actions – GS 130A-23: A permit action is the process of suspending or revoking a permit. A permit may be suspended or revoked if the agency finds a violation of a provision of a state statute or rule that applies to the permit, a condition placed on the permit, or the permit was issued based on incorrect or inadequate information that materially affected the decision to issue the permit. Suspension or revocation may be immediate if the violation presents an imminent hazard (as specified in applicable law). Otherwise, suspension or revocation requires notice of intent to suspend or revoke. The law does not prescribe when to suspend versus revoke, but in most situations, it is advisable to consider suspension if the problem can be corrected or revocation when the situation cannot be corrected easily.
   A. Intent to Suspend: A tentative or provisional decision to cease permitted operations if all identified rule violations have not been corrected within 30 days. If all identified rule violations have not been corrected during the prescribed time, the department must suspend the permit, as stated in the notice. Suspension disallows operations until all identified rule violations are corrected and verified by the EHS.
   B. Intent to Revoke: A tentative or provisional decision to permanently cease permitted operations if all identified rule violations have not been corrected within 30 days. Once revoked, the operator must apply for a new permit.
   C. Immediate Suspension: A notice to cease facility operation immediately due to an imminent hazard. Once suspended, all identified rule violations must be corrected before the notice is lifted.
   D. Immediate Revocation: A notice to cease facility operation immediately due to an imminent hazard. Once revoked, the operator must apply for a new permit. Note: The permit is immediately revoked if a score drops below 70.

Note: This Compliance and Enforcement Manual is intended to be a guide for all jurisdictions using the 2017 NC Food Code. It is imperative that jurisdictions use their own policies and chain of command structure to make final decisions in enforcement actions noted in this document. In addition, jurisdictions should consult with NCDHHS Regional Specialists when needed.

Section 7: LEGAL REMEDIES

1. **Injunction – GS 130A-18**

   An injunction is a court order. In the public health context, an injunction orders a person to stop violating public health laws. The state or a local health director may seek an injunction for violating a public health statute, rule, or a local board of health rule. An action for an injunction must be filed in the county's superior court where the violation occurred. A person who fails to comply with an injunction may be held in contempt of court.

2. **Public Health Nuisance – G.S. 130A-19**

   A public health nuisance is a situation on property that impacts public health. Determining whether a situation is a public health nuisance that is subject to legal remedy can be difficult. There is no law that clearly explains what constitutes a public health nuisance. The state health director or a local health director may determine that a public health nuisance exists and order the person in charge of a property to abate the nuisance. If the person does not take action pursuant to the order, the state or local health director may file an action in the superior court to enforce the order.

3. **Abatement for Imminent Hazard – GS 130A-20**

   An imminent hazard is a situation that, if no immediate action is taken, is likely to cause an immediate threat to human life, an immediate threat of serious physical injury or serious adverse health effects, or a serious risk of irreparable damage to the environment. After determining an imminent hazard, a health director may either issue an abatement order or take direct action to abate the hazard. The health department will incur costs if the director elects to abate rather than order abatement. Ordinarily, the department will have a lien on the property for the costs, but the lien may be defeated in some circumstances.

4. **Administrative Penalties – G.S. 130A-22**

   An administrative penalty is a monetary fine. They may be imposed on a person who violates laws related to lead certification, OSWW, or smoking. The amount of the penalty is set by state laws. If a person fails to pay, the imposer of the penalty (state or local health director) may file an action in Superior Court.

5. **Misdemeanor – GS 130A-25**

   A person may be charged with a misdemeanor for violating any public health statute or rule except those pertaining to smoking. The violation is a class 1 misdemeanor under GS 14-3. When a person is convicted of a misdemeanor for violating public health laws, they ordinarily are sentenced in accordance with North Carolina's Structured Sentencing laws.

   There is an exception: if the conviction violates the communicable disease laws, the person may be sentenced to up to two years imprisonment. The case is tried in the district court. If the defendant is found guilty, they may appeal to the superior court for a new trial.

6. **Right of Appeal – Review Process and Appeals Procedure**

   If a permit holder disagrees with a decision of the local health department on the interpretation, application, or enforcement of the rules, the permit holder may (1) Request an informal review per 15A NCAC 18A .2676 or (2) Initiate a contested case in accordance with GS 150B.

Section 8: KEY OF NC VIOLATION CODES FOR FDA RISK FACTORS

The following key shows each Risk Factor and Intervention with the item number on the inspection sheet and each relevant violation code.

2017											
RISK FACTORS											
Unsafe Sources		Inadequate Cooking		Improper Holding Temperatures Hot & Cold, Rapid cooling		Poor Personal Hygiene		Contaminated Food Contact Surface & Equipment			
Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation
11	3-201.11 **P, Pf**	18	3-401.11 **P, Pf**	20	3-501.14 **P**	6	2-401.11 **C**	15	3-302.11 **P**	28 cont	7-203.11 **P**
	3-201.12 **P**		3-401.12 **P,C**	21	3-501.16(A)(1) **P**		3-301.12 **P**		3-304.11 **P**		7-204.11 **P**
	3-201.13 **P**		3-401.14 **P,Pf**	22	3-501.16 (A)(2) and (B) **P**	7	2-401.12 **C**		3-304.15(A) **P**		7-204.12 (D) **P**
	3-201.14 **P**	19	3-403.11 **P**			8	2-301.11 **P**		3-306.13(A) **P**		7-204.13 **P**
	3-201.15 **P**						2-301.12 **P**	16	4-501.111 **P**		7-204.14 **P**
	3-201.16 **P**						2-301.14 **P**		4-501.112 **Pf**		7-205.11 **P**
	3-201.17 **P**						2-301.15 **Pf**		4-501.114 **P, Pf**		7-206.11 **P**
	3-202.13 **P**						2-301.16 **Pf**		4-501.115 **C**		7-206.12 **P**
	3-202.14 **P**					10	5-202.12 **C**		4-601.11(A) **Pf**		7-206.13 **P,C**
	3-202.110 **P,Pf**						5-203.11 **Pf**		4-602.11 **P,C**		7-207.11 **P, Pf**
	5-101.13 **P**						5-204.11 **Pf**		4-602.12 **C**		7-207.12 **P**
12	3-202.11 P,Pf						5-205.11 **Pf**		4-702.11 **P**		7-208.11 **P,Pf**
13	3-101.11 **P**						6-301.11 **Pf**		4-703.11 **P**		7-209.11 **C**
	3-202.15 **Pf**						6-301.12 **Pf**				7-301.11 **P**
14	3-202.18 **Pf**						6-301.13 **C**	17	3-306.14 **P**	42	7-204.12 (A)(B)(C)**P**
	3-203.12 **Pf**						6-301.14 **C**		3-701.11 **P**	48	4-501.113 **C** **FDA Food Code under #16*
	3-402.11 **P**							27	3-202.12 **P**		
	3-402.12 **Pf**								3-202.14 **P**		
26	3-801.11 (A)(B)(C)(E)(G) **P, C**							28	7-101.11 **Pf**		
									7-102.11 **Pf**		
									7-201.11 **P**		
									7-202.11 **Pf**		
									7-202.12 **P,Pf,C**		

Section 9: KEY OF NC VIOLATION CODES FOR FDA INTERVENTIONS

2017									
INTERVENTIONS									
Time/ Temperature Parameters not Met (Time as a Control, date marking)		Bare Hand Contact with Ready-to-Eat Food		Consumer Advisory (when required)		Demonstration of Knowledge by PIC		Employee Health Control system or policy implemented	
Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation	Item #	Food Code Citation
23	3-501.17 **Pf**	9	3-301.11 **P, Pf**	25	3-603.11 **Pf**	1	2-101.11 **Pf**	3	2-102.11 (C)(2), (3) and (17) **Pf**
	3-501.18 **P**		3-801.11(D) **P**				2-102.11 (A), (B) (C)(1), (4)-(16) **Pf**		2-103.11(O) **Pf**
24	3-501.19 **P, Pf, C**						2-103.11 (A)-(P) **Pf**		2-201.11 (A), (B), (C), (E) **P, Pf**
						2	2-102.12(A)**C**	4	2-201.11 (D) and (F) **P**
						29	3-404.11 **P, Pf**		2-201.12 **P**
							3-502.11 **Pf**		2-201.13 **P**
							3-502.12 **P, Pf**	5	2-501.11 **Pf**
							4-204.110(B) **Pf**		
							8-103.12 **P, Pf**		
							8-201.13 **C**		
							8-201.14 **Pf**		

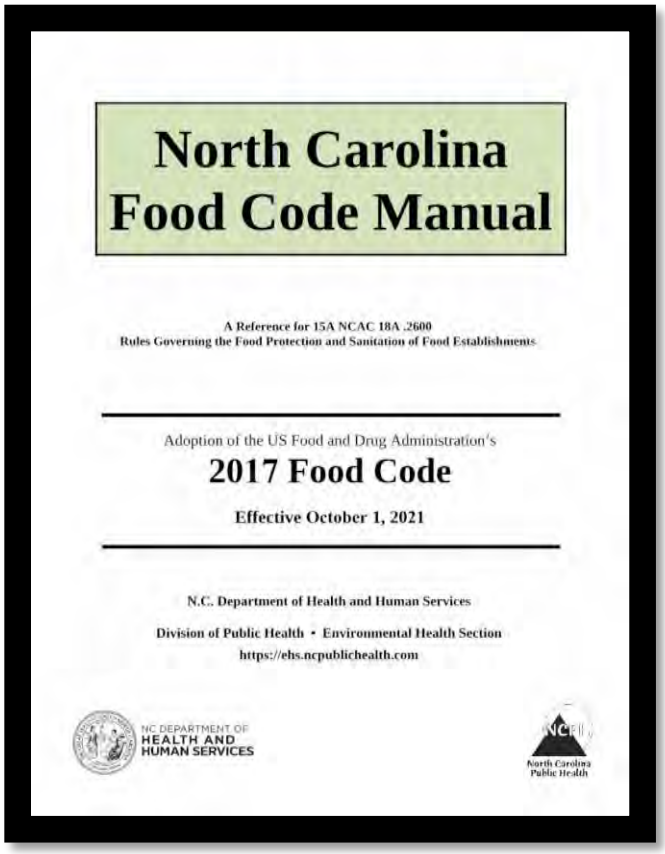
Section 10: CORRECTIVE ACTION FOR PRIORITY, PRIORITY FOUNDATION, AND CORE CITATIONS

The following chart provides acceptable corrective actions for FDA non-compliant Risk Factors and Interventions, both short and long-term. This chart links the NC Food Code reference to the inspection form item number and the corrective action. The corrective action is chosen based on the severity and recurring nature of the violation. Long-term compliance options address the continuing control of risk factors and interventions.

The majority of the scenarios for each citation have been considered and vetted through previous versions of this manual. Not all situations and observations can be detailed for short- and long-term corrections. Observations and corrective actions not covered in this manual guidance should be sought through management and policies of the department or the Environmental Health Regional Specialist. It is beneficial to document the source of the guidance if not contained in the manual.

Due to North Carolina not adopting 8-406.11 of the FDA Food Code, which requires a timeframe for the correction of core violations, the following actions should be taken for core violations:

1. Initial Action: Record the observed violation in the Inspection Report, using grading as the means of enforcement action. Collaborate with the person in charge to attempt correction on-site. If the core violation can be corrected on-site, make a corresponding notation on the inspection sheet.
2. Subsequent inspection: If the violation has been corrected, no further action is required. If it remains uncorrected during the inspection, the inspector should attempt on-site correction and document it as a repeat violation on the inspection report, employing grading as the enforcement action taken. Escalating points should be considered for multiple repeated citations of the same core violation. If the core violation is contributing to priority foundation and priority violations, further permit action may be necessary.



COMPLIANCE AND ENFORCEMENT STRATEGIES

RISK FACTOR AND PUBLIC HEALTH INTERVENTIONS

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Intervention: Demonstration of Knowledge by PIC			
2-101.11, **Pf**	1	* Assignment	2-101.11- PIC is designated. CDI or VR required.	2-101.11 - An additional PIC is designated and trained to fill the role when one is absent.
2-102.11 (A), (B), (C) (1,4-16), **Pf**		* Demonstration of Knowledge	2-102.11 (A), (B), (C) (1,4-16)- PIC is provided education during inspection to be able to answer the questions correctly. CDI or VR required.	2-102.11 (A), (B), (C) (1,4-16)- PIC is re-enrolled in an ANSI-accredited course as needed to maintain the credential.
2-103.11 (A)-(P), **Pf**		* Duties of PIC	2-103.11(A)-(P)- PIC works with EHS to regain AMC. CDI or VR required.	2-103.11(A)-(P) - PIC receives additional training. Establishment identifies a knowledgeable PIC with AMC.
	Intervention: Demonstration of Knowledge by PIC			
2-102.12 (A), **C**	2	* Certification by an accredited program	2-102.12(A)- Give information on where the course/exam is given. ANSI Approved Courses	2-102.12(A)-PIC passed an ANSI Accredited course. ANSI Approved Courses
	Intervention: Employee Health Control System or Policy Implemented			
2-102.11 (C) (2), (3) & (17), **Pf**	3	* PIC demonstration of knowledge about employee health.	2-102.11 (C) (2), (3) & (17)- EHS provides additional training so PIC can answer questions correctly. CDI or VR required.	2-102.11 (C) (2), (3) & (17)- PIC retrained on areas of knowledge. Demonstration of Knowledge Questions
2-103.11 (O), **Pf**		* PIC ensures employees are informed about the Employee Health Policy	2-103.11(O) - Health policy information is provided to PIC. Methods include Posting policy in employee areas, mailing/emailing policy to employees, scheduling educational meetings with employees, etc. EHS provides an approved health policy to PIC if the facility does not have one, along with training. CDI or VR required.	2-103.11(O) - PIC receives additional training and instruction. Approved health policy is made available to PIC.
2-201.11 (A)(B)(C)(E), **P, Pf**		* Responsibilities and reporting symptoms and diagnosis.	2-201.11(A)(B)(C)(E) -The PIC and employees are instructed on when and how to report. EHS provides an approved health policy or PIC creates their own. CDI or VR required.	2-201.11(A)(B)(C)(E) - Train new and existing employees to report. Provide health policy to employees by an effective method. EHS provides PIC with educational material on requirements to aid in the development/update of health policy. Employee Health Policy Examples

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Intervention: Employee Health Control System or Policy Implemented			
2-201.11 (D)(F), **P**	4	* Responsibility of PIC to exclude/restrict sick employees and the responsibility of employees to comply.	2-201.11(D) - Exclude or restrict employees. (F) - Comply with exclusion and restriction specifications. CDI Required	2-201.11(D)(F) - PIC trained on exclusion and restriction policy. FDA Employee Health Policy Tool
2-201.12, **P**		* Conditions of exclusion and restriction.	2-201.12- Exclude or restrict employees based on specific symptoms, diagnoses, and exposures. Exclude or restrict employees if reinstatement requirements are not met. CDI Required	2-201.12 - PIC trained to recognize specific symptoms, diagnoses, and exposures that require exclusion and restriction of employees. PIC trained on reinstatement requirements. FDA Employee Health Policy Tool
2-201.13, **P**		* Managing exclusions and restrictions.	2-201.13- Comply with removing, adjusting, and continuing exclusion conditions. CDI Required	2-201.13- PIC trained to adhere to conditions. EH Decision Flow Chart
	Intervention: Employee Health Control System or Policy Implemented			
2-501.11, **Pf**	5	* Proper Clean-up of vomit and diarrheal procedures	2-501.11- Written procedures are provided to PIC and made available for employees to follow when responding to vomiting or diarrheal events. EHS provides training when giving out educational materials. CDI or VR Required	2-501.11- Employees trained on clean-up procedures. Clean-Up Procedures Clean-Up Flyer
	Risk Factor: Poor Personal Hygiene			
2-401.11, **C**	6	* Proper eating, drinking, or tobacco use.	2-401.11- Clean and sanitize food contact surfaces and discard food contaminated by food employees. Store employee drinks correctly or discard them. CDI Required	2-401.11- Train employees on the risk of contaminating food to be sold or served. Train employees on proper storage of personal food, drink, and tobacco.
3-301.12, **P**		* Prevent Contamination while tasting	3-301.12 - Discard utensils if single-use. Clean and sanitize utensils if multi-use and discard food contaminated by food employees. CDI Required	3-301.12 - Train employees on the risk of contaminating food to be sold or served. Train employees on the proper method of taste-testing food.
	Risk Factor: Poor Personal Hygiene			
2-401.12, **C**	7	* Discharge from the eyes, nose, and mouth	2-401.12 Clean and sanitize food contact surfaces or utensils and discard food contaminated by food employees. Food employees are sent home or restricted. CDI Required	2-401.12- PIC trained to recognize specific symptoms; train employees on the risk of contaminating food, clean equipment, utensils and linens; or unwrapped single-service or single-use article.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Poor Personal Hygiene			
2-301.11, **P**	8	* Clean condition of hands and arms	2-301.11 - Employee washes hands and exposed portions of arms. CDI Required	2-301.11 - Train employees on the need to wash hands and exposed portions of arms.
2-301.12, **P**		* Cleaning procedure of hands and arms	2-301.12 - Employee rewashes hands and exposed portions of arms, including surrogate prosthetic devices for hands or arms with cleaning compound, for at least 20 seconds at a properly installed and equipped handwashing sink. CDI Required	2-301.12- Train employees on how to clean their hands. Provide or post instructional handwashing material at handwashing sinks.
2-301.14, **P**		* When to wash hands and arms	2-301.14 - Employee washes hands and exposed portions of arms. CDI Required	2-301.14 - Train employees on when to wash hands and exposed portions of arms. Provide or post instructional material on when to wash hands.
2-301.15, **Pf**		* Where to wash hands and arms	2-301.15 - Employee washes hands and exposed portions of arms in a handwashing sink. If hands were washed in food preparation or warewashing sink, that sink is cleaned and sanitized before use. CDI Required	2-301.15 - Train employees on where to wash their hands. Post signs that designate handwashing sinks.
2-301.16, **Pf**		* Hand Antiseptics	2-301.16- If hand antiseptic used was not compliant for use in the facility; the employee must rinse their hands to remove the unapproved hand antiseptic and remove the non-compliant hand antiseptic from the facility. If the hand antiseptic is not compliant for hands in direct contact with food, the employee must rinse hands in clean water or limit activity to no direct bare-hand contact with food. If the hand dip solution is not clean or weak, discard it. CDI Required	2-301.16- Review specifications on hand antiseptics used in the facility. Remove unapproved hand antiseptics from the facility. Change to a different type of hand antiseptic. Train employees on how to use hand antiseptics. Provide or post instructional hand antiseptic use material at handwashing sinks. Sample RCP Located under Section 12 Handwashing Procedures Handwashing sign
	Intervention: Bare-Hand Contact with Ready-To-Eat Food			
3-301.11, **P, Pf, C**	9	* Bare-Hand Contact	3-301.11 (A) Have employees correctly wash their hands. CDI (B) – Discard or cooking food to at least 145F. Educate on bare-hand contact. CDI or VR (C) - Change food contact method. Educate employees on bare-hand contact and how to minimize it. CDI or VR Required	3-301.11(B) - Train employees on preventing bare-hand contact with exposed RTE food. Provide suitable utensils. (C) - Train employees on methods to minimize bare hand and arm contact with food not in ready-to-eat form. Provide suitable utensils.
3-801.11 (D), **P**		* Bare hand contact is prohibited in establishments that serve the HSP population.	3-801.11(D) - If the facility serves an HSP, and food is contacted with bare hands, the food must be discarded. This includes produce with barehand contact during the washing procedure. CDI or VR Required	3-801.11 - Train employees on preventing all bare-hand contact with foods in a facility that serves an HSP. Provide suitable utensils.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Poor Personal Hygiene			
5-202.12(A) **C**	10	* Handwash Sink Installation	5-202.12(A) - Adjust water heater. Verify temperature rise to at least 100F. CDI or VR Required	5-202.12(A) - Repair/Replace plumbing system components. Consult licensed plumber.
5-203.11(A) **Pf**		* Number of and wash sink, supplied and accessible	5-203.11(A) - Require installation of additional handwash sinks. Cease operation or install temporary handwash stations with a standard operating procedure if approved. CDI or VR Required	5-203.11(A) - Install handwash sinks. Consult a licensed plumber.
5-204.11(A)(B) **Pf**		* Location and Placement	5-204.11(A)(B) - Require relocation or installation of handwash sinks. Install temporary handwash stations with a standard operating procedure if approved. CDI or VR Required	5-204.11(A)(B) - Relocate or install handwash sinks. Consult licensed plumber.
5-205.11 **Pf**		* Operation and maintenance	5-205.11(A) - Make accessible. (B) - Discontinue unapproved use. CDI or VR Required	5-205.11(A)(B) - Train employees.
6-301.11 **Pf**		* Handwashing Cleanser, Available	6-301.11 - Supply the sink with hand cleanser. CDI Required	6-301.11 - Train employees.
6-301.12 **Pf**		* Hand Drying Provision	6-301.12(A)(B)(C)(D) – Supply sink with hand drying provision. CDI Required	6-301.12(A)(B)(C)(D) - Train employees.
6-301.13		* Handwashing Aids and Devices	6-301.13-Remove handwashing signage.	6-301.13-Train employees.
6-301.14		* Handwashing sign	6-301.14-Post handwashing signage.	6-301.14-Train employees.
	Risk Factor: Unsafe Sources			
3-201.11, **P, Pf**	11	*Compliance with Food Law	3-201.11 - Discard/reject/return. Voluntary Disposal/Embargo. CDI Required 3-201.11 (E) -– Obtain processing information or comply with 3-401.11. CDI or VR required 3-201.11(E)(3)(c) - Assess risk and consider allowing PIC to add a label or implement Voluntary Disposal/Embargo. CDI Required	3-201.11 - Train employees on approved sources of food and product specifications. Change supplier to an approved vendor that provides supporting documents. 3-201.11(E)(3)(c) - Train employees on requirements for whole-muscle, intact beef.
3-201.12, **P**		*Food in hermetically sealed containers	3-201.12, 3-201.13, 3-201.14, 3-201.15, 3-201.16, 3-201.17,3-202.13, 3-202.14, 3-202.110, 5-101.13 - Discard/reject/return. Voluntary Disposal/Embargo. CDI Required *Interstate Resources:* Interstate Certified Shellfish Shippers List *Intrastate Resources:* NC Division of Marine Fisheries Shellfish Sanitation & Recreational Water Quality Section Shawn Nelson – Office Supervisor Shawn.Nelson@ncdenr.gov	3-201.12, 3-201.13, 3-201.14, 3-201.15, 3-201.16, 3-201.17, 3-202.13, 3-202.14, 3-202.110, 5-101.13 Train employees. Change supplier to an approved vendor that provides supporting documents. Sample RCP Located under Section 12
3-201.13, **P**		* Fish		
3-201.14, **P**		* Molluscan		
3-201.15, **P**		* Shellfish		
3-201.16, **P**		* Wild mushrooms		
3-201.17, **P**		*Game Animals		
3-202.13, **P**		* Eggs		
3-202.14, **P**		* Eggs and milk products pasteurized		
3-202.110, **P, Pf**		* Juice Treated		
5-101.13, **P**		* Bottled Drinking Water		

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Unsafe Sources			
3-202.11, **P, Pf**	**12**	* Food received at the proper temperature.	3-202.11 -Discard/reject/return. Voluntary Disposal/Embargo. CDI Required	3-202.11 - Train employees on how to receive food correctly. Change supplier. Verify that the supplier is an approved vendor and has proper equipment. *Sample RCP Located under Section 12*
	Risk Factor: Unsafe Sources			
3-101.11, **P**	**13**	* Safe, unadulterated, and honestly presented.	3-101.11 - Discard/reject/return. Voluntary Disposal/Embargo. CDI Required	3-101.11 - Train employees on how to check deliveries and do inventory. Change supplier if the problem continues.
3-202.15, **P**		* Package Integrity	3-202.15 – Dented cans that have visible evidence the hermetic seal has been compromised (bulging, leaking, dome-shaped lid, dented on or around hermetic seal). Discard/reject/segregate and return. Voluntary Disposal/Embargo. CDI Required	3-202.15 - Train employees on how to check deliveries, segregate damaged merchandise and do inventory. Change supplier if the problem continues. *Sample RCP Located under Section 12*
	Risk Factor: Unsafe Sources			
3-202.18, **Pf**	**14**	* Shellstock Identification	3-202.18 - Discard/reject/return. Voluntary Disposal/Embargo. CDI or VR	3-202.18 - Train employees. Change suppliers. Create a checklist to verify certifications and shellstock tags upon receiving. Develop RCP with a log for receiving stock.
3-203.12, **Pf**		* Maintaining Identification of Shellstock	3-203.12 – If tags are properly dated but no system is in place. Tags must be placed in chronological order. CDI or VR Required. If tags are not properly dated and no system. VR Required	3-203.12 - Train employees. Change suppliers. Create a checklist to verify certifications and shellstock tags upon receiving. Develop RCP for accurate record keeping.
3-402.11, **P**		* Parasite Destruction	3-402.11 -Discard/reject/return. Voluntary Disposal/Embargo. Obtain parasite destruction documentation or Cook food to the proper temperature. CDI or VR Required	3-402.11 - Train employees. Change suppliers. Modify the menu to exclude these items.
3-402.12, **Pf**		* Records, Creation, and Retention	3-402.12 -Discard/reject/return. Voluntary Disposal/Embargo. Obtain documentation or cook food to the proper temperature. CDI or VR Required	3-402.12 - Change record-keeping procedures.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Contaminated Food Contact Equipment			
3-302.11, **P,C**	15	* Packaged and Unpackaged Food Separation, Packaging, and Segregation	3-302.11 - PIC must relocate food items to minimize contamination. Rearrange storage of foods. Cover food. CDI or VR Required Discard RTE foods contaminated from raw species foods. Discard the food if determined to be adulterated from contamination. Assess risk and consider the option of cooking the food to the critical limit of observed species causing contamination. CDI Required	3-302.11 - Train employees. Acquire additional storage equipment. Label shelving and storage areas. Alter storage procedures. *Sample RCP Located under Section 12*
3-304.11, **P**		* Food Contact with Equipment and Utensils	3-304.11 - PIC must relocate food items to minimize contamination. Rearrange storage of foods to approved surfaces. Discard food if determined to be adulterated. CDI or VR Required	3-304.11 - Train employees. Acquire additional approved contact surfaces. Alter storage procedures.
3-304.15 (A), **P**		* Glove Use Limitations (single-use gloves)	3-304.15(A) - Discard gloves and wash hands. Discard contaminated food. Assess risk and consider cooking contaminated food to 145F. Clean and sanitize equipment/utensils determined to be contaminated. CDI Required	3-304.15(A) - Train employees.
3-306.13 (A), **P**		* Consumer Self-Service Operations (Raw animal foods)	3-306.13(A) Remove from consumer self-service. CDI Required	3-306.13(A) - Alter menu and/or presentation methods. Refrigerator and Freezer Storage Order

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Contaminated Food Contact Equipment			
4-501.111, **P**	16	* Manual Warewashing Equipment, Hot Water Sanitization temperatures	4-501.111, 4-501.112, 4-501.114 - Repair equipment or correct sanitizer to proper concentration. Switch to manual washing if capacity allows; rewash/sanitize utensils if needed. Switch to single-use utensils. CDI or VR Required 4-501.115 – Rewash/sanitize using correct procedures. Begin using approved emergency SOPs. Contact vendor contractor for emergency equipment repair. Assess risk and consider closure if the violation cannot be corrected during inspection (Correction includes effective sanitization method and sanitization of all utensils/equipment that were not subjected to effective/approved sanitization method).	4-501.111, 4-501.112, 4-501.114, 4-501.115 - Repair/Replace equipment. Re-supply chemical stock. Train employees on correct cleaning and sanitizing of food contact surfaces. Develop a log to verify that cleaning/sanitizing equipment works properly (Irreversible measuring thermometer, disk, thermolabels). Develop an RCP with logs to ensure CIP equipment is cleaned and sanitized per required frequency. Create approved SOPs for emergencies. *Sample RCP Located under Section 12*
4-501.112, **Pf**		* Mechanical Warewashing, Hot Water Sanitization Temperatures		
4-501.114, **P, Pf**		* Manual and Mechanical Washing Temperature, PH, Concentration and Hardness		
4-501.115, **C**		* Manual Warewashing Equipment Chemical Sanitization Using Detergent Sanitizers		
4-601.11 (A), **Pf**		* Equipment, Food contact surfaces, Nonfood Contact surfaces and Utensils cleaned	4-601.11(A) -– Food contact surfaces are taken out of use. Repeat the cleaning procedure. CDI or VR Required	4-601.11(A) - Train employees.
4-602.11, **P, C**		* Equipment, Food contact surfaces, Nonfood Contact surfaces and Utensils - Frequency	4-602.11 - Clean the utensils or equipment. CDI or VR Required	4-602.11 - Train employees.
4-602.12, **C**		* Cooking and Baking Equipment	4-602.12-Clean the cooking and baking equipment. CDI or VR Required	4-602.12-Train employees.
4-702.11, **P**		* Before Use After Cleaning	4-702.11 - Sanitize the utensil or equipment. CDI or VR Required	4-702.11 - Train employees.
4-703.11, **P**		* Hot Water and Chemical	4-703.11 - Sanitize the utensils or equipment by an approved method. CDI or VR Required	4-703.11 - Train employees. Repair/replace equipment. Change sanitization methods used in the facility.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Contaminated Food Contact Equipment			
3-306.14, **P**	17	* Proper disposition of returned, previously served, reconditioned, and unsafe food.	3-306.14 - Discard the food. CDI Required	3-306.14(A) - Train employees.
3-701.11, **P**		* Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food	3-701.11 Discard the food. CDI Required	3-701.11 (A)(C)(D) - Train employees. 3-701.11(B) - Train employees. Change source.
	Risk Factor: Inadequate Cooking			
3-401.11, **P, Pf**	18	*Raw Animal Foods	3-401.11, 3-401.12, 3-401.14 - Continue cooking to the proper temperature. If the food is intended to be undercooked, provide a Consumer Advisory. Discard if non-continuous cooking parameters are not met. CDI or VR Required	3-401.11, 3-401.12, 3-401.14- Train employees. Repair/Replace/Acquire food temperature measurement device. Create and adhere to RCP. Provide a Consumer Advisory. *Sample RCP Located under Section 12*
3-401.12, **P, C**		*Microwave Cooking		
3-401.14, **P, Pf**		*Non-Continuous Cooking of Raw Animal Foods		
	Risk Factor: Inadequate Cooking			
3-403.11, **P**	19	* Proper reheating procedure for hot holding.	3-403.11- If the reheating procedure did not exceed 2 hours, continue the reheating procedure within the remaining time period not to exceed 2 hours. Discard the food if it exceeds 2 hours. CDI Required	3-403.11 - Train employees. Repair/Replace/Acquire reheating equipment. Create and adhere to RCP. *Sample RCP Located under Section 12*
	Risk Factor: Improper Holding Temperatures			
3-501.14, **P**	20	* Time/Temperature Control for Safety (TCS): Proper cooling time and temperature.	3-501.14 – **Hot to Cold** – First cooling parameter: If it takes more than 2 hours from 135ºF to 70°F; discard. Second cooling parameter: If it takes more than a total of 6 hours from 135ºF to 41°F; discard. **Ambient** – If it takes more than 4 hours to cool TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared from ingredients at ambient temperatures to 41F; discard. CDI Required If there is still time to correct cooling parameters, reheat rapidly to 165F and start the process over or see Short-Term Compliance under item number 33.	3-501.14 - Train employees. Repair/Replace/Acquire rapid cooling equipment. Begin or change the cooling monitoring procedure. Create and adhere to RCP. *Sample RCP Located under Section 12* Cooling Procedure Cooling Parameter Calculator

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Improper Holding Temperatures			
3-501.16 (A)(1), **P**	**21**	TCS Time/Temperature: *Proper hot holding temperatures.	3-501.16(A)(1) – Rapidly reheat to 165°F and maintain 135°F or above. Reheat to 165°F and cool properly for cold hold. CDI Required Discard the food if temperature abused for more than 2 hours. Discard the food if it is unknown how long it was temperature abused. Verification (VR) if the violation was due to equipment failure.	3-501.16(A)(1) - Train employees. Repair/Replace/Acquire hot hold equipment. Begin or change the existing temperature monitoring procedure. Change hot holding to TPHC. Create and adhere to RCP. *Sample RCP Located under Section 12*
	Risk Factor: Improper Holding Temperatures			
3-501.16 (A)(2) and (B), **P**	**22**	Potentially Hazardous Food (PHF) Time/Temperature: *Proper cold holding temperatures.	3-501.16(A)(2) and(B) - Discard food if temperature abused for more than 4 hours. Discard food if it is unknown how long the food was temperature abused. If EHS can verify that food was temperature abused less than 4 hours, consider the following options: Serve immediately. Rapidly reheat to 165°F and maintain 135°F or above or serve immediately. Cool and cold hold. Emergency TPHC - Product must be identified to indicate the time it was removed from temperature control and procedures must be completed onsite. CDI or Verification (VR) if the violation was due to equipment failure – not enough to CDI	3-501.16(A)(2) and(B) - Train employees. Repair/Replace/Acquire cold hold equipment. Begin or change the existing temperature monitoring procedure. Change cold holding to TPHC. Create and adhere to RCP. *Sample RCP Located under Section 12* Sample Cold Holding Label

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Intervention: Time/Temperature Parameters Not Met			
3-501.17, **PF**	23	*Time/Temperature Control for Safety Food – Datemarking	3-501.17 - Discard the food if it exceeds the 7-day requirement. If food is not labeled, consider adding labels (PIC demonstrates food preparation date) or discarding. CDI Required	3-501.17 - Train employees. Change ineffective date marking procedures. Create and adhere to RCP.
3-501.18, **P**		* Time/Temperature Control for Safety Food– Disposition	3-501.18 - Discard the food. CDI Required	3-501.18 - Train employees. Change ineffective disposition date monitoring procedure. Create and adhere to RCP. *Sample RCP Located under Section 12* Date Marking
	Intervention: Time/Temperature Parameters Not Met			
3-501.19, **P, Pf**	24	* Time/Temperature Control for Safety Food: Time as a Public Health Control.	3-501.19 - If EHS can verify when food was removed from temperature control, document qualifying factors for this correction and consider the following options: If time exceeds the 4 or 6-hour holding time. Discard the food. CDI Required If TPHC food doesn't have time recorded, consider labeling with time (PIC demonstrates food preparation time) or discarding. CDI Requir If procedures are not available, they must be completed onsite or a verification is required.	3-501.19 - Create approved written TPHC procedures. Discontinue TPHC and use temperature control. Install cold hold or hot hold equipment. Create and adhere to RCP.
	Intervention: Consumer Advisory			
3-603.11, **Pf**	25	Consumer Advisory: Provided for raw or undercooked foods.	3-603.11 - Provide Consumer Advisory. Cook to the final temperature or add CA requirements to the menu. CDI or VR Required	3-603.11 - Train employees. Modify the menu. Modify recipes. 2017 Food Code Annex (3-603.11) Consumer Advisory - Shellfish

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Risk Factor: Unsafe Sources			
3-801.11 (A)(B)(C) (E)(G), **P, C**	26	Highly Susceptible Populations: Pasteurized foods are used; prohibited foods are not offered.	3-801.11(A) - Discard or remove prohibited juice from the HSP facility. CDI Required	3-801.11(A)(1)(2) – Remove prohibited juice from the menu. Change supplier to one that provides non-prohibited juices. (A)(3) Create and abide by the approved HACCP plan.
			3-801.11(B) - Discard the food or use the food in a recipe that cooks the eggs to at least 155F for at least 15 seconds. CDI Required	3-801.11(B) - Change ingredients to substitute pasteurized eggs for raw eggs.
			3-801.11(C) - Cease service of these foods to HSP or fully cook the food to the proper temperature. CDI Required	3-801.11(C) - Remove undercooked items from the menu.
			3-801.11(E) - Discard the eggs being held under time. CDI Required	3-801.11(E) - Store raw eggs at 45F or below.
			3-801.11(G) - Discard the reserved food. CDI Required	3-801.11(G) - Train employees.
	Risk Factor: Contaminated Food Contact Equipment/Protection from Contamination			
3-202.12, **P**	27	Food additive approved.	3-202.12 - Remove unapproved additives from premises. CDI Required	3-302.12 - Train employees. Change food suppliers.
3-302.14, **P**		Food additive properly used.	3-302.14 - Discard food containing unapproved additives or restricted levels of approved additives. CDI Required	3-302.14 - Train employees. Re-evaluate storage procedures. Modify menu.
	Risk Factor: Contaminated Food Contact Equipment			
7-101.11, **Pf**	28	* Poisonous or toxic materials original containers	7-101.11 -– PIC labels container. Discard or remove the product from the facility if product is unknown. CDI Required	7-101.11 - Change product or source.
7-102.11, **Pf**		* Working containers common name	7-102.11 - Label the container or discard the product if the identity is unknown. CDI Required	7-102.11 - Train employees.
7-201.11, **P**		* Poisonous or toxic materials storage	7-201.11 - Move material to an approved location. (If contamination occurs, discard). CDI Required	7-201.11- Alter storage locations and methods. Train employees.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
7-202.11, **Pf**	28	* Poisonous or toxic restriction	7-202.11 - Remove material from facility. CDI or VR Required	7-202.11 - Train employees.
7-202.12 **P, PF, C**		* Poisonous or toxic conditions of use	7-202.12 - Decontaminate surfaces, discard food, and discard single-service and single-use articles that contain unapproved or improperly used poisonous or toxic material. CDI or VR Required	7-202.12- Train employees. (C) Use Certified Pesticide Applicator.
7-203.11, **P**		* Poisonous or toxic container prohibitions	7-203.11 - Discard the container. Discard contaminated food. CDI Required	7-203.11 - Train employees.
7-204-11 **P**		* Chemicals sanitizer criteria	7-204.11 -– Dilute sanitizer to proper concentration. Have equipment repaired/adjusted so that it dispenses at the proper concentration. Decontaminate or discard the contaminated food-contact surface. CDI or VR Required	7-204.11 - Train employees. Change product.
7-204.12, **P**		* Chemicals for washing treatment, storage, and processing fruits and vegetables	7-204.12 - Provide documentation. Discard the food. CDI or VR Required	7-204.12- Train employees. Change product.
7-204.13, **P**		* Boiler water additives criteria	7-204.13 - Discard the food. CDI Required	7-204.13- Train employees. Change product.
7-204-14, **P**		* Drying Agents used with sanitization	7-204.14- Rewash the surface that contacted the unapproved drying agent. CDI or VR Required	7-204.14- Train employees. Change product.
7-205.11, **P**		* Incidental food contact criteria	7-205.11 - Decontaminate the surfaces that contacted the unapproved lubricant. CDI or VR Required	7-205.11 - Train employees. Change product.
7-206.11, **P**		* Restricted use of pesticides	7-206.11 - Provide documentation. Remove pesticide from the facility. Decontaminate surfaces exposed to improperly used pesticides. CDI or VR Required	7-206.11 - Change product.
7-206.12, **P**		* Rodent bait stations	7-206.12 - Contact certified pest control operator to safely remove product and replace with approved bait station. CDI or VR Required	7-206.12 - Train employees. Inform the Pest Control Operator.
7-206.13, **P, C**		* Tracking powder used for pest control monitoring	7-206.13 - Decontaminate surfaces exposed to tracking powder pesticide. CDI or VR Required	7-206.13- Train employees. Inform the Pest Control Operator.
7-207.11, **P, Pf**		* Restriction and storage of medicines	7-207.11 (A) - Remove from facility. (B) Label and locate properly. CDI or VR Required	7-207.11- Train employees. Alter storage locations and methods.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
7-207.12, **P**	28	* Refrigerated medicine storage	7-207.12 – (A) Place into approved, labeled container. (B)Relocate container. CDI or VR Required	7-207.12- Alter storage locations and methods. Train employees.
7-208.11, **P, Pf**		* First aid storage	7-208.11 – (A) Properly label. (B) Place into an approved container. CDI or VR Required	7-208.11- Alter storage locations and methods. Train employees.
7-209.11, **C**		* Personal care storage	7-209.11-Separate personal care items. CDI or VR Required	7-209.11- Alter storage locations and methods. Train employees.
7-301.11, **P**		* Poisonous or toxic material separation	7-301.11 – (A) Separate the poisonous or toxic material by spacing or partitioning. (B) Relocate the poisonous or toxic material. CDI or VR Required	7-301.11 - Alter storage locations and methods. Train employees.
	Intervention: Demonstration of Knowledge by PIC Conformance with Approved Procedures:			
3-404.11 (A)(B), **P, Pf**	29	* Treating juice	3-404.11 (A) - PIC must provide documentation or discard the food. (B) - Properly label or discard the food. CDI or VR Required	3-404.11(A) - Follow local health department guidance. Obtain approved HACCP plan. (B) - Train employees to label properly.
3-502.11 (A-H), **Pf**		* Variance requirement	3-502.11 - (A)(B)(C)(D)(E)(F)(G)(H) - Discard the food. CDI or VR Required Follow local health department guidance. When necessary, contact the EH Regional Specialist or Variance Committee for guidance to obtain a variance.	3-502.11(A)(B)(C)(D)(E)(F)(G)(H) Follow local health department guidance. When necessary, contact the EH Regional Specialist or Variance Committee for guidance to obtain a variance.
3-502.12 (A)(B)(C)(D)(E), **P, Pf, C**		* Criteria for reduced oxygen packaging	3-502.12 (A)(B)(C)(D)(E) -Provide documentation or discard the food. CDI or VR Required Follow local health department guidance. When necessary, contact the EH Regional Specialist or Variance Committee for guidance to obtain a variance.	3-502.12(A) - Lab tests. Obtain documentation. (B) - Obtain approved HACCP plan. Obtain documentation. (C) - Train employees. (D) - Obtain approved HACCP plan. Train employees. (E) - Change source. Obtain approved HACCP plan. Train employees to properly label and discard.
4-204.110 (A)(B), **P, Pf**		* Molluscan shellfish tanks	4-204.110 (A) - Discontinue service of the food. Label tank properly. (B) - Discard the food. CDI or VR Required	4-204.110(A)(B) - Follow local health department guidance. When necessary, contact the Regional EH Specialist or Variance Committee for guidance to obtain a HACCP plan.
8-103.12 (A)(B), **P, Pf**		* Conformance with approved procedures.	8-103.12 (A) - Discard the food (B) - PIC must provide documentation or discard the food. CDI or VR Required Follow local health department guidance. When necessary, contact the EH Regional Specialist or Variance Committee for guidance to obtain a variance.	8-103.12(A) - Train employees. (B) Make records available. Obtain additional copies of records.
8-201.13 **C**		*When a HACCP plan is required	8-201.14 (A)(B)(C)(D)(E) - PIC must provide documentation or discard the food. CDI or VR Required	8-201.14(A)(B)(C)(D)(E) - Obtain a HACCP plan. Alter existing HACCP plan.
8-201.14 **Pf**		*Contents of a HACCP Plan	8-201.14 (A)(B)(C)(D)(E) - PIC must submit all content noted in A-G.	8-201.14(A)(B)(C)(D)(E) – Submit HACCP Plan to regulatory authority.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Prevention of Food Contamination			
7-204.12(A), **P** *****FDA Food Code under #28	42	Chemicals for Washing, Treatment, Storage and Processing Fruits and Vegetables	7-204.12(A) - Discard the food. CDI Required	7-204.12(A) - Educate food employees on chemical labeling and use.
	Utensils and Equipment			
4-501.113, **C** *FDA Food Code under #16	48	Warewashing facilities: installed, maintained and used; test strips.	4-501.113- Repair of equipment and repeat of sanitization step during inspection. Switch to manual washing if capacity allows rewash/sanitize dishes and utensils. Switch to single use utensils. CDI or VR	Repair/Replace equipment. Re-supply chemical stock. Develop an RCP with logs to verify kilopascals of the warewashing machine to ensure equipment is working correctly. Create approved SOP's for emergencies.

Section 11: KEY OF NC VIOLATION CODES FOR GOOD RETAIL PRACTICES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Safe Food and Water			
3-302.13(A)(B) **P**	30	Pasteurized eggs used where required.	3-302.13 (A) - Continue cooking or discard the food. (B) Restrict the offering of the food to meet 3-401.11(D)	3-302.13(A)(B) - Train employees
3-202.16 **P**	31	Water and ice from approved source.	3-202.16 - Change to approved water source.	3-202.16 - Change to approved water source.
5-101.11(A)(B) **P**			5-101.11 (A)(B) - Change to an approved water source or repair/maintain system according to LAW.	5-101.11(A)(B) - Change to an approved water source or repair/maintain system according to LAW.
5-102.11(A)(B) **P**			5-102.11(A)(B) - Change system or discontinue use.	5-102.11(A)(B) - Change water source.
5-102.12(A)(B) **P**			5-102.12 (A)(B) - Discontinue use.	5-102.12(A)(B) - Change water source.
5-102.13 **Pf**			5-102.13 - Immediately sample.	5-102.13 - Request sample. Maintain sampling schedule.
5-104.12 **Pf**			5-104.12-Begin using one of the approved alternative water supply methods.	5-104.12 - Obtain an approved water source.
8-103.11 (A)(B)(C) **Pf**	32	Variance obtained for specialized processing methods.	8-103.11 (A)(B)(C) - Supply required information.	8-103.11(A)(B)(C) - Follow local health department guidance. When necessary, contact the Regional EH Specialist or Variance Committee for guidance to obtain a HACCP plan.
	Food Temperature Control			
3-501.15 **Pf**	33	Proper cooling methods used; adequate equipment for temperature control.	3-501.15(A) - Change to other approved effective method.	3-501.15(A) - Train employees. Acquire equipment/utensils for cooling food.
4-301.11 **Pf**			4-301.11 - Provide sufficient equipment. Change food preparation methods.	4-301.11 - Acquire equipment for cooling food.
3-401.13 **Pf**	34	Plant food properly cooked for hot holding.	3-401.13 - Continue cooking process.	3-401.13 - Train employees.
3-501.13 **Pf**	35	Approved Thawing Method Used	3-501.13 - Use approved thawing methods.	3-501.13-Train Employees.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
4-203.11(A)(B) **Pf**	36	Thermometers provided and accurate.	4-203.11(A)(B) - Calibrate or discontinue use.	4-203.11(A)(B) - Repair or replace device.
4-203.12(A)(B) **Pf**			4-203.12(A)(B) - Calibrate or discontinue use.	4-203.12(A)(B) - Repair or replace device.
4-204-112 **Pf, C**			4-204.112 (A-D)-Provide an easily readable temperature measuring device in the warmest part of the refrigeration. 4-204.112(E) - Discontinue use.	4-204-112(A-E) - Replace device.
4-302.12(A)(B) **Pf**			4-302.12(A)(B) - Provide and make readily accessible.	4-302.12(A)(B) - Maintain provision and accessibility of devices.
4-502.11(B) **Pf**			4-502.11(B) - Calibrate or discontinue use.	4-502.11(B) - Maintain calibration. Replace if not able to calibrate.
	Food Identification			
3-202.17 **Pf**	37	Food properly labeled original container.	3-202.17- Provide documentation or discard.	3-202.17- Change supplier. Change procurement method.
3-602.11 **Pf, C**			3-602.11(B) – Provide updated label or remove from grab and go area. CDI or VR required for section (B)(5). (C) Label with manufacturer or processor label.	3-602.11(B) - Change labeling procedure.
	Prevention of Food Contamination			
2-403.11 **Pf**	38	Insects and rodents not present; no unauthorized animals.	2-403.11 - Wash hands.	2-403.11-Train employees.
6-501.111 **Pf,C**			6-501.111- Begin using pest control methods.	6-501.111- Begin a pest control plan. Alter the existing pest control plan.
6-501.115 **Pf,C**			6-501.115- Remove from premises.	6-501.115- Educate customers with signage, etc.
3-303.11 **P**	39	Contamination prevented during food preparation, storage and display.	3-303.11 - Discard the ice.	3-303.11 - Train employees.
3-306.11 **P**			3-306.11 -Protect or discard the food.	3-306.11- Train employees. Acquire protective equipment or utensils.
3-306.13 (B)(C), **P, Pf**			3-306.13 (B) - Remove from self-service or supply utensils and dispensers. (C) - Remove from self-service or begin monitoring.	3-306.13(B)(C) - Discontinue self-service or begin using protection methods.
6-404.11 **Pf**			6-404.11 - Segregate products or discard them.	6-404.11 - Create and designate a segregation area away from FUELSS.
2-302.11 (A)(B) **Pf**	40	Personal cleanliness.	2-302.11(A) - Properly maintain fingernails or stop working as a food employee. (B) - Put on gloves. Change gloves. Properly maintain fingernails. Stop working with exposed food.	2-302.11 (A)(B) - Train employees.
3-302.15 **Pf, C**	42	Washing fruits and vegetables.	3-302.15- Wash fruit and vegetables.	3.302.15- Educate food employees on washing fruit and vegetables.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
	Proper Use of Utensils			
4-502.12 **P**	45	Single-use and single- service articles; properly stored and used	4-502.12 - Provide approved utensils. Use approved utensils.	4-502.12 - Acquire approved utensils.
	Utensils and Equipment			
3-304.17 **P**	47	Equipment, food and non- food contact surfaces approved; cleanable, properly designed, constructed and used.	3-304.17- Obtain approved container for reuse purposes. Determine method for ensuring that containers were provided by the food establishment. Properly clean, sanitize, and inspect all returnables.	3-304.17- Review SOPs and train.
4-101.11 **P, C**			4-101.11- Provide documentation of safety or discontinue use.	4-101.11- Maintain documentation, discontinue use or replace.
4-101.13(A)(B) **P**			4-101.13(A)(B) - Provide documentation of safety or discontinue use.	4-101.13(A)(B) - Maintain documentation or replace
4-101.14(A) **P**			4-101.14(A) - Provide documentation of compliance or discontinue use.	4-101.14(A) - Maintain documentation or replace
4-101.15 **P**			4-101.15 - Provide documentation of compliance or discontinue use.	4-101.15 - Maintain documentation or replace
4-102.11 **P, C**			4-102.11– Provide documentation of compliance or discontinue use.	4-102.11- Maintain documentation or replace.
4-201.12 **P**			4-201.12 - Provide documentation of compliance or discontinue use.	4-201.12 - Maintain documentation or replace
4-202.11(A) **Pf**			4-202.11(A) - Discontinue use	4-202.11(A) - Replace
4-202.12(A) **Pf, C**			4-202.12(A) - Discontinue use	4-202.12(A) - Replace
4-204.13 **P, C**			4-204.13(E) - Discontinue use	4-204.13(E) - Replace
4-204.110 **P**			4-204.110(A) - Discontinue use for food.	4-204.110(A) - Discontinue use for food.
4-302.11 **Pf**			4-302.11 - Provide utensil or remove container of food.	4-302.11 - Acquire sufficient number of utensils or discontinue self-service.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
4-204.115 (A)(B) **Pf**	48	Warewashing facilities: installed, maintained and used; test strips.	4-204.115(A)(B) - Repair or discontinue use. CDI or VR Required	4-204.115(A)(B) - Repair or replace.
4-204.116 (A)(B), **Pf**			4-204.116(A)(B) - Repair or discontinue use. CDI or VR Required	4-204.116(A)(B) – Repair or replace.
4-204.117 (A)(B) **Pf**			4-204.117(A)(B) - Repair or discontinue use. CDI or VR Required	4-204.117(A)(B) - Repair or replace
4-301.12 (A)(B)(D)(E), **Pf**			4-301.12(A) - Use approved alternative manual warewashing equipment. Change to single-service items and use a 2-comp. If there is no way to manually warewash, stop food prep and service. (B) - Use approved alternative manual warewashing equipment. If there is no way to manually warewash, stop food prep and service. CDI or VR Required	4-301.12(A) - Install approved sink or obtain approved variance. (B)Install approved sink or obtain approved variance.
4-302.14 **Pf**			4-302.14 - Acquire test kit and train employees. CDI or VR Required	4-302.14 - Maintain sufficient supply of test kits.
4-501.17 **Pf**			4-501.17 - Provide wash solution. Suspend operation. CDI or VR Required	4-501.17 - Re-train employees. Stock more wash solution.
4-501.19 **Pf**			4-501.19 - Add hot water or remake the wash solution. CDI or VR Required	4-501.19 - Re-train employees. Temperature log.
4-501.110 (A)(B) **Pf**			4-501.110(A) - Adjust or repair equip. Use approved alternative manual warewash equipment. (B) - Adjust or repair equipment. Use approved alternative equipment. CDI or VR Required	4-501.110(A)and(B) - Increase frequency of temperature checks. Temperature log. Re-train employees. Replace equipment.
4-501.116 **Pf**			4-501.116- PIC shall obtain a test kit or other device to determine chemical sanitizer concentration. CDI or VR Required	4-501.116- Train staff to test warewashing equipment using test kit or other device.
	Physical Facilities			
5-103.11 (A)(B) **Pf**	50	Hot and cold water available; adequate pressure.	5-103.11 (A) – Repair, alter, change water source and/or system. (B) - Repair, alter, replace hot water generation and/or distribution system.	5-103.11(A)and(B) - Consult licensed plumber.
5-103.12 **Pf**			5-103.12 - Repair, alter, replace.	5-103.12 - Consult licensed plumber.
5-104.11(A)(B) **Pf**			5-104.11 (A) - Change water source. (B) - Provide approved water supply equipment.	5-104.11(A)and(B) - Consult licensed plumber. Consult municipality.

COMPLIANCE AND ENFORCEMENT STRATEGIES

Food Code Reference	Item No.	Foodborne Illness Risk Factors and Public Health Interventions	Short-term Compliance	Long-term Compliance
5-101.12 **P**	51	Plumbing installed; proper backflow devices.	5-101.12 - Flush and disinfect or discontinue use.	5-101.12 - Consult licensed plumber, municipality, or local Health Department.
5-201.11 **P**			5-201.11- Provide documentation or discontinue use.	5-201.11–Consult licensed plumber. Replace.
5-202.11(A) **P**			5-202.11(A)- Repair, alter, or discontinue use.	5-202.11(A) - Consult licensed plumber.
5-202.13 **P**			5-202.13 - Create air gap or discontinue use.	5-202.13 - Consult licensed plumber.
5-202.14 **P**			5-202.14 - Replace device or discontinue use.	5-202.14 - Consult licensed plumber.
5-203.14(A)(B) **P**			5-203.14(A) - Create air gap or discontinue use. (B) Install device or discontinue use.	5-203.14(A)and(B) - Consult licensed plumber.
5-205.12(A)(B) **P, Pf**			5-205.12(A) - Remove cross connection or discontinue use. (B) - Label piping or discontinue use.	5-205.12(A)and (B) - Consult licensed plumber.
5-205.13 **Pf**	51	Plumbing installed; proper backflow devices.	5-205.13 - Inspect. Service. Provide documentation.	5-205.13 - Inspection and service logs.
5-205.14(A)(B) **P**			5-205.14(A) - Maintain, clean, or discontinue use. (B)Clean.	5-205.14(A)(B) - Consult manufacturer. Cleaning log.
5-205.15(A) **P**			5-205.15(A) - Repair	5-205.15(A) - Consult licensed plumber.
5-301.11(A) **P**			5-301.11(A) - Provide documentation of safety, alter, or discontinue use.	5-301.11(A) - Replace
5-302.16(A) **P**			5-302.16(A) - Provide documentation of safety or discontinue use.	5-302.16(A) - Replace
5-303.11 **P**			5-303.11 - Install filter or discontinue use.	5-303.11 - Consult licensed plumber.
5-304.11 **P**			5-304.11 - Flush and sanitize or discontinue use.	5-304.11 - Consult licensed plumber.
5-304.14(A) **P**			5-304.14(A) - Stop unapproved use.	5-304.14(A) - Train employees.
5-402.11(A) **P**	52	Sewage and wastewater water properly disposed.	5-402.11(A) - Alter the connection.	5-402.11(A) - Consult licensed plumber
5-402.13 **P**			5-402.13 - Alter the design or repair.	5-402.13 - Consult licensed plumber
5-402.14 **Pf**			5-402.14 - Stop unapproved waste disposal.	5-402.14 - Consult municipality
5-403.11(A)(B) **P**			5-403.11 - Stop unapproved waste disposal	5-403.11 - Consult municipality or local Health Department.
6-302.11 **Pf**	53	Toilet facilities: properly constructed, supplied and cleaned.	6-302.11 - Provide toilet tissue.	6-302.11 - Stock extra toilet tissue. Toilet room check log.
6-202.111 **P**	55	Physical facilities installed, maintained and clean.	6-202.111 - Discontinue use of the unapproved room or area.	6-202.111 - Consult with Plan Review.
6-501.15 **Pf**			6-501.15-Clean contaminated sinks.	6-501.15-Train employees.

Section 12: LINKS

15A NCAC 18A .2600
2017 NC Food Code, Effective October 1, 2021
2017 NC Marking Instructions, Effective October 1, 2021
ANSI Approved Educational Courses
Allergens
Cold Holding Label
Consumer Advisory - Shellfish
Cooling Procedure
Date Marking
Embargo Tag
Employee Health Policy
FDA Retail Food Regulatory Program Standards
Handwash Sign
Handwashing Procedures
Hot Holding Label
How to Pursue a Class I Misdemeanor
Illegal Food Vendor Example
Intent vs Immediate Suspensions Scenarios
Jurisdiction Chart
NC Food Establishment Inspection Report
Notice of Termination of Embargo
Prevent Cross-Contamination
Public Health Remedies at a Glance, Jill Moore, Institute of Government
Reciprocity Questionnaire
Refrigerator and Freezer Storage Order
Reheating Label
Standard 6 File Worksheet
Standardized Key Crosswalk to the 2017 FDA Food Code (Standard 6)
Voluntary Disposal Form (Product Disposition Form)
Vomit and Diarrhea Cleanup Policy
When to Escalate Points

Section 13: RISK CONTROL PLAN SAMPLES

Approved Source
Cold Hold
Contaminated Equipment
Cooling
Date Marking
Hot Holding
Inadequate Cook
Personal Hygiene
Reheat
Species Storage
Fillable Risk Control Plan

COMPLIANCE AND ENFORCEMENT STRATEGIES

Section 14: VARIANCE AND HACCP

Guidance for requesting a variance
Request for Variance
Variance Decision Tree

Section 15: QUESTIONS AND ANSWERS

Jurisdiction Chart

1. What is a regulated vs non-regulated activity?
   The types of establishments that prepare and serve food and drink regulated by the State of North Carolina are determined by statutes, rules, and interagency agreements. The following chart illustrates the food safety of the N.C. Department of Health and Human Services (NCDHHS), Food Protection Branch. Establishments or activities exempt from NCDHHS regulation are, by statute, regulated by the N.C. Department of Agriculture and Consumer Services (NCDA&CS). This chart is not intended to be a comprehensive list of establishments or activities. Jurisdiction Chart
2. Who has regulatory authority for the retail sale of food and drink?
   §130A-248 requires the preparation and retail sale of drink and food (including retail sales of meat and poultry products) to be regulated by the North Carolina Department of Health & Human Services (NCDHHS) using rules adopted by the Commission for Public Health (15A NCAC 18A .2600). The enforcement of the statutes and rules is conducted by the Department through authorized public health officials (Environmental Health Specialists) located within each local public health department. Local Environmental Health Specialists issue permits for food establishments and conduct routine inspections of their operations to help ensure that safe food is being served.

Interpretation and Enforcement of §130A 250 (7)

1. What are exempt food sales?
   This section addresses issues involving §130A 250 (7), a statute that allows some food and drink sales to be exempt from regulation. Local health departments have experienced issues involving the abuse of the exemption. These abuses include:
   - Food sales by individuals or organizations that do not meet the legal definition of the exemption;
   - Food sales that exceed two consecutive days once per month
   - Food sales by individuals that do not genuinely represent the organization that meets the legal definition of the exemption.

2. How can I confirm that an organization is exempt under §130A 250 (7)?
   Search the database of corporations (including non-profits) on the NC Secretary of State website. This database confirms the status of non-profit organizations, such as churches, civic groups, and relief organizations. You may also call the Secretary of State's office at (919) 807- 2000. To verify that an organization is exempt from federal income tax under the Internal Revenue Code, confirm that the organization has received 501(c)(3) approval or similar exemption from the Internal Revenue Service. To receive approval, the not-for-profit (i.e., nonprofit) organization must be organized and operated exclusively for one or more exempt purposes. IRS database is here.
   - To verify political committees registered with the North Carolina Board of Elections, you can search the online database.
   - To verify if an establishment is exempt and has a mixed beverage or wine shop permit, visit the ABC Permits website.

3. Can I require information or an information collection form regarding an exempt food sales event?
   It is important for local environmental health programs to collect information on an exempt event for traceback and investigative purposes. If a foodborne illness outbreak is linked to the event, the type of information that will be needed for the investigation includes:
   - The organizer's name and contact information, tax-exempt organization associated with the event
   - Location(s) and date(s) of the event, the types of food served (menu)

   The local environmental health program should have a standard protocol for both regulated and exempt food sales event information collection forms. The local environmental health program should require advance notification. Use the same time frame you would use for regulated temporary events.

4. How can I know if the person really represents the exempt organization?

To verify the validity of the requested information, the person seeking the exemption should submit:

- Official documentation of the tax-exempt status
- Letter from organization incorporator, board member or other executive stating the location, dates of the fundraiser, date of the previous fundraiser and statement to the fact that the proprietor handling the sale is acting solely as an employee and that all proceeds are collected by the organization
- A food service permit if a coventurer or caterer is used

5. How can I know if the exemption has already been used for the month?

Check with other local environmental health programs for information regarding past exemption usage. The environmental health listserv can be used for communicating information regarding specific events or organizations. In the future, there are plans to develop a statewide database that counties may research for exemption usage.

Illegal Food & Drink Sales

1. What should I do if I encounter illegal food or drink sales?

The following steps will assist you with addressing the situation:

- Verify that the food or drink is regulated under §130A-248. Be sure that the food or drink does not fall under the exemptions listed under §130A-250.
- Obtain identifying information, such as name, address, and telephone numbers. Gather documentation, such as photographs, receipts, and product temperatures.
- Contact the appropriate division of the NCDA&CS: Meat and Poultry Inspection Service or Food and Drug Division
- Obtain voluntary disposal of the food and drink products if possible. Observe food or drink being denatured. Complete the Product Disposition Form, thoroughly noting quantities and identifying information of the discarded food or drink. Cite 106-129 (adulterated) or 106-130 (misbranded); consult with your regional EHS and/or NCDA&CS to determine the appropriate status.
- If voluntary disposal cannot be obtained, proceed with embargo. Consult with your regional EHS (or their superiors) before embargo. Cite 106-129 (adulterated) or 106-130 (misbranded); consult with your regional EHS and/or NCDA&CS to determine the appropriate status. Affix embargo tag.
- Issue a Violation Notice. Example Violation Notice. Obtain signature of responsible person.

2. Can embargo authority be used for non-permitted (illegal) food and drink sales?

Yes. §130A-21 allows the Secretary of the N.C. Department of Environment and Natural Resources or a local health director to exercise embargo authority concerning food or drink that is subject to regulation by the NCDHHS. §130A-248(b) requires all establishments that serve food or drink for pay to receive a permit or transitional permit from the NCDHHS prior to operating. Exceptions are listed in §130A-250. Therefore, the sale of food or drink for pay without a permit is subject to regulation by the NCDHHS and subject to embargo authority.

Embargo and Product Disposition - §130A-21(a)

1. What is the origin of our authority?

The ability to exercise embargo authority is granted to the Secretary of the NC Department of Health and Human Services (NCDHHS) or a local health director by §130A-21. Embargo action can be taken by a local health director only after consultation with NCDHHS regional environmental health specialists, or the Division of Environmental Health director or the director's designee. Embargo authority is not delegated to individual environmental health specialists in local health departments. §130A-21 references §106-125, the statute that grants embargo authority to the NC Department of Agriculture and Consumer Services (NCDA&CS) and requires immediate notification to NCDA&CS when embargo action is taken by NCDHHS.

2. What types of establishments are subject to our embargo authority?

NCDHHS's embargo authority applies to an establishment that is subject to regulation by NCDHHS or that is subject to rules adopted by the Commission for Public Health, or that is the subject of a communicable disease investigation under §130A-144. Therefore, NCDHHS is authorized to use embargo action within any establishment that is inspected by the Department. The NCDHHS's authority does not apply to an establishment regulated by NCDA&CS unless the establishment is only partially regulated by NCDA&CS and then public health's embargo authority extends to the rest of the establishment.

3. **Are foods and drinks prepared in facilities located in other states subject to embargo?**

Prepared foods and drinks originating in food service establishments outside of the regulatory jurisdiction of NC are from an unapproved source since access to and inspection of the food service establishment cannot be obtained. Foods prepared in out-of-state food service establishments and subsequently packaged can be considered as originating from an approved source only if prior approval has been granted through the Departments of Agriculture of both states. Foods from unapproved sources are subject to embargo action. A helpful Embargo Flow Chart is here.

4. **What criteria must a food meet to be eligible for embargo action?**

To take embargo action on a food or drink item, the food or drink must be either adulterated or misbranded. These terms are the same terms used by the NCDA&CS for embargo purposes.

Adulterated**:** Adulterated is defined within §106-129. The following are examples of issues that would deem a food or drink to be adulterated but are not intended to be a comprehensive definition:

- The food or drink contains a poisonous or deleterious substance which may render it injurious to health;
- The food or drink consists in whole or in part of a diseased, contaminated, filthy, putrid or decomposed substance, or if it is otherwise unfit for food;
- The food or drink has been produced, prepared, packed or held under insanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered diseased, unwholesome or injurious to health;
- The food or drink is the product of a diseased animal or an animal which has died otherwise than by slaughter, or that has been fed upon the uncooked offal from a slaughterhouse.

Misbranded**:** Misbranded refers to food or drink that is labeled improperly, fraudulently, or does not meet the labeling standards within §106-139 and 106-139.1. NCDHHS should not take embargo action on foods or drink based upon misbranding. Instead, the Food and Drug Division of the NCDA&CS should be contacted immediately here.

Time/Temperature Abuse: Prior to taking embargo action based upon time and temperature abuse, it must be clearly established that the potentially hazardous food is adulterated. If the potentially hazardous food has been in the temperature danger zone for longer than four hours, then documentation of the time and temperature of the food both at the beginning and end of the time will help to establish adulteration. Consultation with the Food and Drug Division of NCDA&CS may also be necessary since many factors contribute to adulteration due to time/temperature abuse. In some cases, product samples may need to be analyzed to determine adulteration.

5. **When should the Product Disposition Form be completed?**

The Product Disposition Form should be completed when an embargo action is taken or when an embargo action would be taken but the establishment chooses to voluntarily dispose of the potentially adulterated food. The appropriate sections of the form should be completed, including the signature of the official (embargo) or responsible person (voluntary disposal).

6. **What type of documentation should be completed when embargo action is taken?**

Whenever embargo actions are taken, an effort should be made to collect as much information regarding the event as possible. Documentation consists of:

Product Disposition Form(s): In addition to basic demographic information, Product Disposition Forms should be used to capture identifying information regarding the food, such as the type of food, quantity (weight, measure, or count), brand name, and lot number. The location of the embargoed food should also be recorded to ensure that the food has not been relocated in the future. It is permissible to draw a sketch of the location if needed.

Photographs: Photographs of the food should be taken to record the conditions under which the food was deemed adulterated or misbranded. Examples of conditions that should be captured include the temperature reading on a food thermometer while in the embargoed food, product identifying information (lot number, brand), size relationships, and location of the embargoed products.

Notes: A detailed record of the circumstances involved in the embargo event should be kept for future reference. The type of information that should be recorded includes the names of all persons involved and their role in the event, dates of all correspondence and visits, facts of the event, and any future actions that were discussed.

7. What is a suitable area for the storage of embargoed food?

A suitable area for the storage of embargoed food will depend upon the circumstances under which the food was embargoed. If the embargoed food is in a permitted food service establishment, then the food should be segregated from other food items and clearly tagged and labeled as embargoed food. If not, the person may know someone, such as the owner of a food service establishment or the organizer of the event at which the food was embargoed, that would agree to store the food. In any circumstance, embargoed food must be stored in an area that is readily accessible to the public health official with embargo authority upon request. If the food has been disturbed or altered or if the person responsible for the food fails to produce or provide access to it, then they can be held in contempt of court. In no circumstance should the food be stored within a private residence.

Embargo & Foodborne Illness Investigations

1. What is the appropriate course of action when investigating a foodborne illness outbreak?

The control of the spread of the illness should be the first consideration when conducting a field investigation of a foodborne illness outbreak. If the implicated food is still available for consumption, steps should be taken to prevent the food from being served. Voluntary disposal may be the appropriate action. However, consider the need for obtaining food samples before disposal. Embargo may be another option.

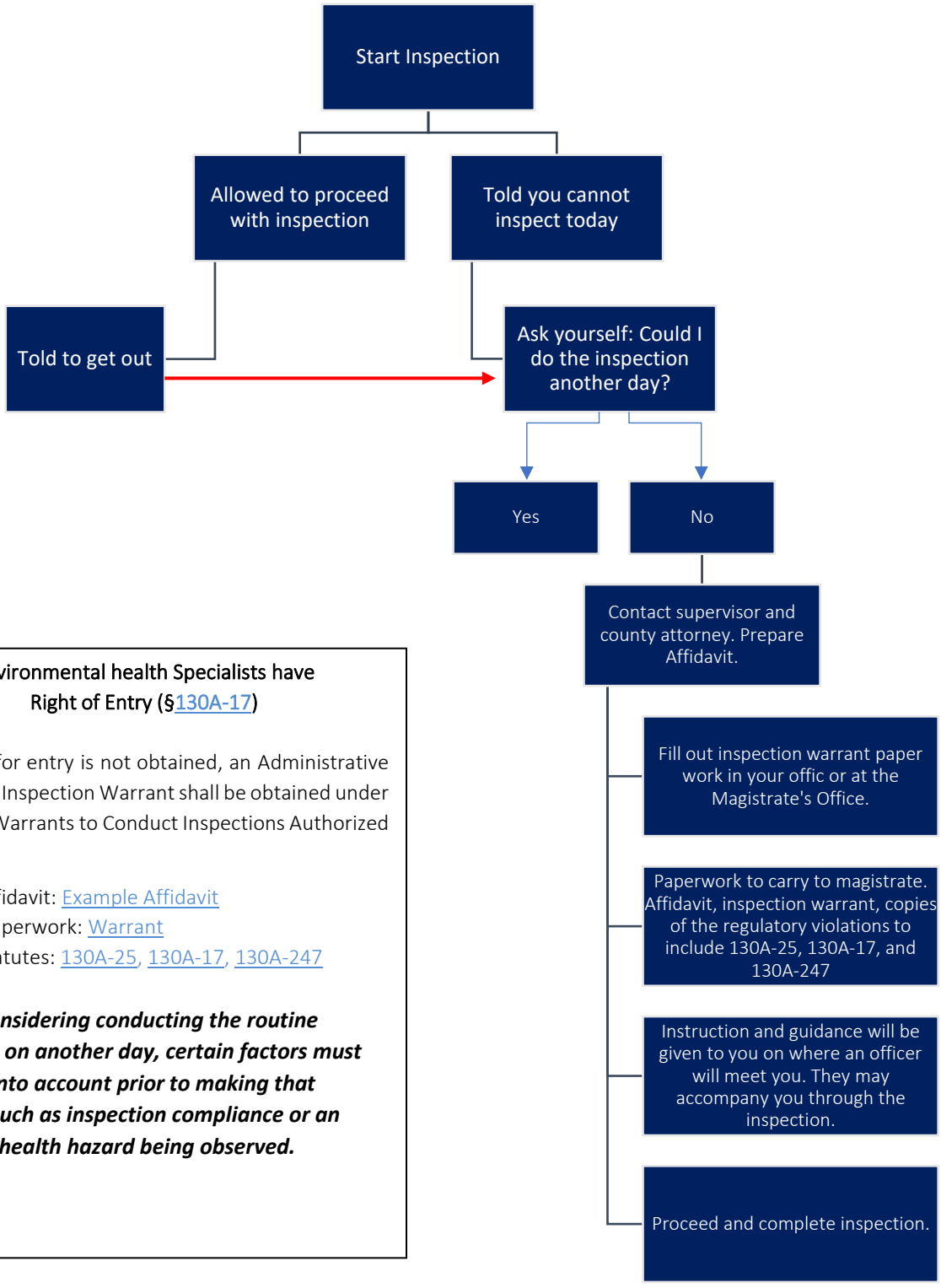
2. What should be done with food involved with a foodborne illness outbreak investigation?

Food suspected of causing a foodborne illness outbreak may be needed for pathogen analysis. Consultation should be taken with the Communicable Disease Branch of the Division of Public Health, Department of Health and Human Services to determine if food samples are needed. If samples are needed, steps should be taken to obtain samples of the food voluntarily. However, embargo action may be warranted to ensure access to the food for sampling and that the food is not prematurely destroyed.

3. What should be done if intentional contamination of food is suspected?

The intentional contamination of food is a criminal act and becomes the investigative jurisdiction of law enforcement. The local law enforcement agency should be contacted immediately. In a product tampering incident, the product, packaging, storage location, and substance introduced during tampering may all be considered evidence. These items have the potential to provide significant forensic leads in the case and may be introduced into a court of law. A chain-of-custody documenting their collection, packaging, and transport is required. Anyone in contact with this evidence may be called upon to testify regarding their actions. As a result, it is important that these items are not handled or disturbed by first responders. Any responding agency should avoid contact with the evidence until law enforcement develops an evidence collection plan. If any items are handled and/or disturbed prior to being collected as evidence, every effort should be made to document all who had contact with the evidence and how the evidence was handled. Time and temperature abuse can lead to the contamination of the food, including the growth of harmful microorganisms. These microorganisms can lead to an increased risk of foodborne illnesses and long-term health effects, including death. The statutes and rules pertaining to the sale of food and drinks are designed to promote safe food preparation practices that reduce the risk of foodborne illnesses.

Obtaining an Inspection Warrant When Denied Entry or Instructed to Leave Premises



Environmental health Specialists have Right of Entry (§130A-17)

If consent for entry is not obtained, an Administrative Search and Inspection Warrant shall be obtained under §15-27.2 (Warrants to Conduct Inspections Authorized by Law).

Prepare Affidavit: Example Affidavit
Warrant Paperwork: Warrant
General Statutes: 130A-25, 130A-17, 130A-247

Note: If considering conducting the routine inspection on another day, certain factors must be taken into account prior to making that decision, such as inspection compliance or an imminent health hazard being observed.

Section 16: EMERGENCY SITUATIONS

Water Supply Emergency Types

Contamination

Occasionally, water supplies are contaminated or are suspected of being contaminated with microorganisms or chemicals due to a break in a water main or other damage to the distribution system. When contamination of a public water supply is suspected, the water utility operator or the Public Water Supply Section may issue an advisory or notice concerning use of the water supply. A low system pressure of less than 20 psi, system power loss, flooding of the system, identification of sanitary defects or persistent total coliform presence can result in a "**Boil Water Advisory**" issued by the N. C. Public Water Supply Section and/or the owner of the water source.

If a **NOTICE** is issued due to the water testing positive for *E. coli* or other contamination, the establishment shall not operate until the water supply is safe. This occurrence is considered an **Imminent Health Hazard**. If the affected establishment is a foodservice establishment and it does not voluntarily close, the permit will be suspended. Licensing agencies will be notified for establishments where the local health department does not hold a permit. See emergency response manual for guidance on handling equipment, food etc.

If an **ADVISORY** is issued due to pending test results or other unconfirmed issues from a water main break or system maintenance, the establishment may remain open for operations, but may want to take certain precautions. A **Notice of Intent to Suspend** or **Revoke Permit** may be issued depending on cause and/or severity of the source of the contamination. More guidance is available in the emergency response manual.

If the water system is regulated by the Public Water Supply Section, section staff may issue a "Do Not Drink the Water" notice if the health risk is deemed unacceptable.

Loss of Water

Water supply can be lost due to problems with the water source, such as drought emergencies, or problems with the treatment and distribution systems, such as floods, power outages, and damaged pipes. If a regulated facility loses its primary water source, it is important to determine the cause and possible duration of the outage. Repair and maintenance of the distribution system, which can be completed in a few hours, may only require an alternative source of drinking water. Long-term water losses will require closure of food establishments (imminent health hazard) unless a pre-approved water emergency plan has been approved. Institutions and other care facilities are required per 15A NCAC 18A.1313 to notify the local health department and switch to an alternative water supply for flushing toilets, bathing, handwashing, cooking, dishwashing, cleaning and other purposes when the water supply is interrupted for longer than four hours.

Water Emergencies – Permit Actions at a Glance

Water Supply Intent to Suspend Scenarios

- Confirmed Total Coliform
- Letter from Division of Epidemiology stating water contains elements above the state or federal standards (no imminent hazard)
- Owner fails to comply with conditions for the operation of a well (e.g. CO, Chlorinator).
- Hot water available is not sufficient volume to sustain operation

Water Supply Immediate Suspension

- Confirmed Fecal Coliform
- Letter from Division of Epidemiology stating water contains elements that constitute an imminent hazard
- Lack of potable water under pressure in an establishment
- No hot water and no steps being taken to remediate the situation

COMPLIANCE AND ENFORCEMENT STRATEGIES

Hurricane Emergencies

8-404.11 Ceasing Operations and Reporting

8-404.12 Resumption of Operations

- Loss of utilities: Gas, Electricity
- Flooding: Water, Food contamination, wastewater
- Water Emergencies

Food

Emergency Preparedness Manual

Electricity

Water

- Food temperature modeling CFP Emergency Food Modeling Flow Chart*
- Imminent health hazard -EHS/Health Director
- Voluntary disposal/Embargo
- Permit suspension verses voluntarily closure
- CFP Emergency Guidance

*Modeling chart guidelines are to be followed using definite information. If no proof can be provided showing how long food has been temperature abused, it must be discarded. Examples of 'proof' include data logger readings, temperature logs, etc.

- Advisories and notice
- Alternative water sources
- Permitting action suspension or voluntary closure
- Resumption of operations
- Operating like a TFE

* Follow your local county and NCDHHS Guidance when determining compliance. In the event of disaster recovery needs contact the NCDHHS Emergency Preparedness Coordinator for further assistance.

Charter

Environmental Health Division
Specialized Process Committee

ARTICLE I: COMMITTEE NAME

The name of the committee shall be the Environmental Health Division Specialized Process Committee.

ARTICLE II: MISSION

The Environmental Health Division Specialized Process Committee serves as the coordinating body, inclusive of staff from various levels within the Division. The Specialized Process Committee is owned and driven by both frontline staff and management. The Environmental Health Division Specialized Process Committee has been charged to operate by the Environmental Health Division Director. The Committee ensures that MCPH meets requirements of Standard 3: Inspection Program Based On HACCP Principles of the Voluntary National Retail Food Regulatory Program Standards (RPS) to improve efficiency and consistency within the Department by streamlining the process of receiving, reviewing, and approving specialized process requests. The Committee will disseminate information and educate all staff on specialized processes. This ensures collaboration and effective communication between staff and industry.

ARTICLE III: MEMBERSHIP

The Committee will be composed of nine (9) members. Eight (8) Environmental Health staff persons will serve as members, with the addition of one (1) assigned Advisor. Membership representation from across the Environmental Health Division will be ensured by the following composition requirements:

- No more than two staff on a given team shall be a Committee member. This does not include a supervisor.
- Members on the Committee shall represent staff from all positions including supervisor, plans examiner, senior environmental health specialist, and environmental health specialist from the Food and Facilities (FFS) and Planning and Support Services Programs (PASS).
- The Committee shall include at least one Supervisor.
- At least four (4) of the members shall be in a non-supervisory position.
- No member shall be involved in any disciplinary action due to poor job performance.
- In the absence of a Supervisor or Advisor, a Program Manager from FFS or PASS can be included to assist in any decision-making.
- If a member steps down, the committee will adjust the quorum until the position is filled. If a long-term vacancy occurs, the Advisor will consult with the Program Managers.

Committee members shall serve a two (2) year term, which may be shortened upon request of the member, or extended at the discretion of the Committee. Situations in which terms are extended depend upon the nature of current projects being led by that member. Terms for existing members shall be staggered to ensure there is a smooth transition as new members join the team. Existing members will act as coaches to new members and transfer information and expertise before the end of their term.

The Committee will solicit membership interest before the expiration of the term of each member. Staff may self-nominate and must be approved for appointment by their direct Supervisor and Program Manager. Members are eligible to serve consecutive terms. If more than one eligible staff person expresses interest, the current members of the Committee shall vote to make the final selection. Members requesting to serve consecutive terms will not be included in the voting process. If no one nominates themselves, then the Committee will ask for peer nominations. The Committee Co-Chairs must ensure the team maintains a wide distribution of representation and is mindful of disruptions to business operations.

Committee members are responsible for:

- Participating in workgroups via in-person, email response or otherwise requested to carry out project tasks
- Attending all Committee meetings
- Reviewing and approving locally submitted specialized process plans
- Reviewing Variance/HACCP approval requests for food safety and completion before submission to the NCDHHS Variance Committee
- Providing educational opportunities to staff in FFS and PASS as necessary or designated by Program Manager or Committee Co-Chair
- Facilitating a workgroup as necessary

ARTICLE IV: EXECUTIVE BOARD

The Executive Board members will consist of two (2) Co-Chairs, a Secretary, an NCDHHS Variance Committee member, and an Advisor. Final executive board position appointments must be approved by the Committee member's direct Supervisor and Program Manager. All Executive Board positions shall serve a two (2) year term, which may be shortened upon request of the member and unplanned circumstances. Their functional roles are as follows:

1. The Co-Chairs are responsible for:
    - Preparing and distributing meeting agendas and supporting information
    - Providing Committee agenda structure and content
    - Calling each meeting to order
    - Leading discussions; keeping the conversation in order of the agenda
    - Adjourning meetings
    - Approving and distributing meeting minutes and action items to Committee members
    - Soliciting guidance from and distributing specific project information to the Advisor
    - Maintaining the MCPH Specialized Process Committee OneDrive
    - Only one Co-Chair is required to attend meetings. The individuals selected for the Co-Chair positions must hold FDA Standardization. A Program Manager cannot serve as a Co-Chair.

2. The Secretary is responsible for:
    - Taking attendance and notes during meetings
    - Uploading approved meeting minutes to the Specialized Process Committee shared folder on OneDrive
    - Serving as co-chair of the Communications workgroup
    - Managing tasks as delegated by Co-Chairs

3. The NCDHHS Variance Committee member is responsible for:

- Keeping the Committee up to date on NCDHHS Variance Committee decisions; sharing minutes
- Communicating Committee questions to the NCDHHS Variance Committee via email. The member must copy the advisor and co-chairs in all communication
- Being a liaison between Mecklenburg County and the NCDHHS Variance Committee

4. The Advisor is responsible for:
    - Training Committee members on applicable methods and tools
    - Acting as the subject matter expert
    - Acting as the liaison to obtain approval from and disseminating information to the applicable Program Managers and/or Environmental Health Division Director at required decision points

ARTICLE V: MEETINGS

Meetings will be held no less than every other month but may be held more frequently if needed.

- Committee meetings shall have detailed agendas shared with all members at least three days before the meeting.
- Committee members shall review work accomplished by workgroups.
- Committee members shall review plans and projects.
- Meeting minutes shall include attendance, action items, and summaries.
- A meeting with the applicable Program Managers and/or Environmental Health Division Director will be conducted at least quarterly as needed or upon request. This meeting will be used to report activities and gather feedback and approval.

Attendance

- Every member must make a concerted effort to attend all Committee meetings and workgroup meetings. Members must notify a member of the executive board if there is an unavoidable conflict.
- The presence of not less than five (5) of the members shall constitute a quorum to allow for voting and conducting the business of the Committee.
- A member shall notify an Executive Board member when they cannot attend a meeting. Virtual attendance may be granted based on circumstances at the discretion of the Executive Board.
- Members acknowledge that more than two (2) unexcused absences may result in the loss of membership on the Committee. The Executive Board will review these situations and determine the outcome for said member.

ARTICLE VI: WORKGROUPS

Workgroups will be created based on needs determined by and voted on by the Committee. Workgroup members can consist of any Environmental Health Division staff and do not have to currently be on the Committee. Each workgroup must have an assigned Committee member to co-chair the workgroup.

- Recruitment for workgroups may be conducted via email.
- Any Food, Lodging, and Institution authorized staff may volunteer to be on a workgroup.
- Staff shall be in good standing with their work plan goals and objectives before joining a workgroup.
- Staff shall have prior approval from their direct Supervisor with notification to the designated Program Manager before volunteering for a workgroup.
- Workgroups shall meet as frequently as needed based on their scope of work and volume of tasks.
- Each workgroup co-chair will maintain and manage meeting minutes, ensure decisions are returned to the full committee for a vote, and resources are updated and maintained on the Specialized Process Committee OneDrive.

The following shall be standing workgroups:

- Communication
- Education

ARTICLE VII: VOTING

Co-Chair and Secretary positions shall be voted upon by Committee members via ballot or electronic voting using Microsoft Forms. Voting will be maintained and managed by the Advisor, as terms for members holding these positions expire. Members may nominate themselves for these positions. Members serving in these positions must do so voluntarily.

The Advisor is a non-voting member except in situations where a majority decision cannot be reached. In these situations, the Advisor will discuss with Program Managers to make the deciding vote. The incoming Advisor shall be appointed by the previous Advisor. If the Advisor is unavailable for an extended period, a Program Manager may step in to assist.

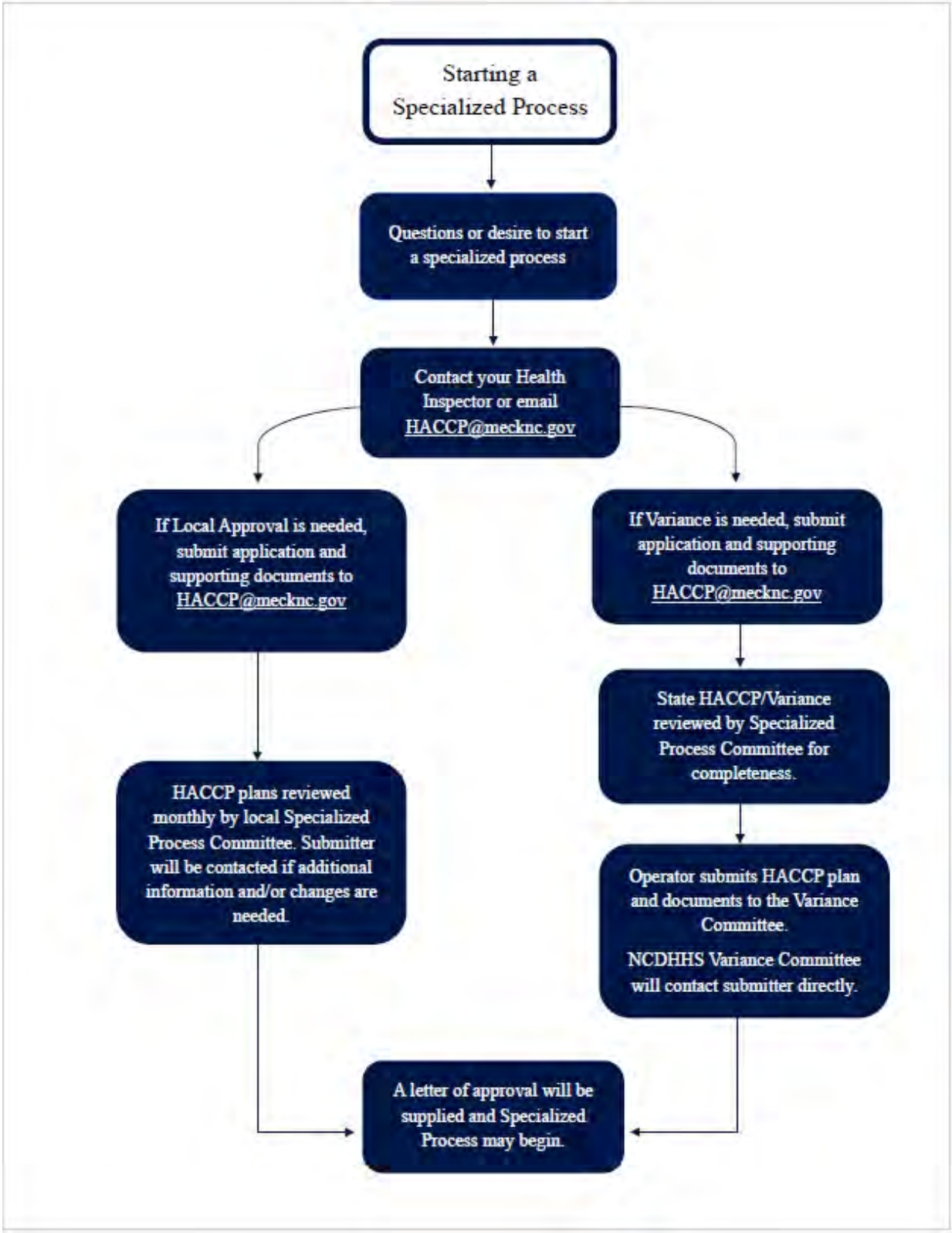
At all meetings, except for the election of the Executive Board, all votes may be cast by voice or e-vote. A quorum shall be required for voting to take place. Before a topic is voted upon, the Committee Co-Chairs will ensure all perspectives, ideas, and objections have been thoroughly assessed.

- Voting may take place in person or virtually.
- Workgroups may vote within their group to bring topics to the Committee for a final vote.
- Meeting agendas shall specify when major decisions are scheduled and supporting information shall be distributed before a vote is conducted.
- The following items shall be voted upon:
    - Creation and dissolution of workgroups
    - Amendments to the charter
    - Recommendations, solutions, or interventions
    - Approvals of submitted specialized process plans
    - Other topics as determined by the Executive Board

All decisions shall be forwarded to the applicable Environmental Health Program Managers and/or Division Director for final approval.

Mecklenburg County Environmental Health

Specialized Process Committee Resources



Mecklenburg County Health Department

Environmental Health Division

HACCP/Variance Process Decisions

Last Revision 7/1/2024

Reference NC Food Code 3-502.11 and 3-502.12 for specific requirements

PROCESS	HACCP	VARIANCE	NOTES	ALTERNATIVE METHOD
Vacuum packaging raw meat/poultry/vegetables (held ≤41F for ≤30 days)	Yes	No		
Vacuum packaging raw meat at a chain establishment (held ≤41F for ≤30 days)	Yes- STATE	No	Specialized Process Committee will route the plan to the state.	
Vacuum packaging raw seafood (held frozen before, during, and after processing)	Yes	No	There can be no added ingredients to the bag.	Using 10K bags - only pertains to raw seafood with no added ingredients.
Vacuum packaging or Cook-Chill of cooked foods (held at ≤41F for ≤7 days)	Yes	Yes	Cooked seafood products will not be approved for any type of vacuum packaging locally or by the State Variance Committee.	Remove from packaging within 48 hours of packaging.
Vacuum packaging cheese (held ≤41F for ≤30 days)	Yes	No	No soft cheese; Cheese must meet CFR Standards of Identity	
Vacuum Packaging Meat/Poultry product cured at a food processing plant regulated by USDA	Yes	No		
Vacuum packaging, Cook-Chill, or Sous-Vide of raw or cooked food (held at ≤41F for ≤48 hours and properly labeled) - 3-502.12(F)	No	No	Cooked seafood products will not be approved for any type of vacuum packaging locally or by the State Variance Committee.	
Cook-Chill (cooled to 34F and held ≤34F for ≤30 days)	Yes	No		
Cook-Chill (cooled to 41F and held ≤41F for ≤7 days)	Yes	No		
Cook-Chill (cooled to 41F and used within 48 hours) - 3-502-12(F)	No	No		
Cook-Chill at a chain establishment	Yes- STATE	No	Specialized Process Committee will route the State Variance Committee.	

HACCP/Variance Process Decisions				
PROCESS	**HACCP**	**VARIANCE**	**NOTES**	**ALTERNATIVE METHOD**
Sous-Vide (final cook temperature met and then cooled to 41F and held ≤41F for ≤7 days or held ≤34F for ≤30 days)	Yes	No		Never seal the bag. (ex: secure the bag to side of bath so the opening doesn't sink into the water)
Sous-Vide at a chain establishment	Yes- STATE	No	Specialized Process Committee will route the State Variance Committee.	
Sous-Vide (final cook temperature NOT met and then cooled to 41F and held ≤41F for ≤7 days or held ≤34F for ≤30 days)	Yes	Yes		
Curing using a commercially packaged nitrite or nitrate, following the manufacturer's instructions, and holding at ≤41F	No	No	Recipe must be approved by inspector before facility can begin process. Date marking still applies if it's a RTE product. Amend permit.	
Curing to extend the shelf life (TCS food held beyond 7 days)	Yes	Yes		
Fermentation of milk to make yogurt	Yes	Yes	Must use a State Variance Committee approved recipe.	Purchase commercially produced yogurt.
Fermentation of kimchi	Yes	Yes	Must use a State Variance Committee approved recipe.	Ferment at ≤41F. Hold at ≤41F for ≤7 days.
Pickling TCS foods and holding ≤41F for more than 7 days	Yes	Yes	This includes adding a hot brine to a non-TCS food such as raw cucumbers.	Hold product ≤41F for ≤7 days and date mark.
Pickling non-TCS foods	No	No	Example: Adding cold brine to raw cucumbers. No refrigeration or date marking required.	Do not use hot brine
Acidification of sushi rice or other food to render non-TCS	Yes	Yes		TPHC
Sprouting of seeds or beans	Yes	Yes	Requires that sprouts be washed in a tumbler in 20,000 ppm hypochlorite.	Buy sprouts from a regulated supplier
Smoking food for preservation (hot)	Yes	Yes	Cold smoking is permitted as long as entire process is ≤41F.	Smoking to final cook temperature and serve, or cool and hold at ≤41F for ≤7 days
Molluscan shellfish life-support system	Yes	Yes		
Custom processing of animals	Yes	Yes		
Other processes in facilities that are *NOT* Specialized Processes				
PROCESS	**HACCP**	**VARIANCE**	**NOTES**	**ALTERNATIVE METHOD**
Dry aging of beef (held ≤41F)	No	No		
Non-continuous cooking	No	No	EHS approval required before facility can begin this process. Use non-continous cooking application.	

ENVIRONMENTAL HEALTH DIVISION
GUIDANCE FOR REQUESTING SPECIALIZED PROCESS APPROVALS

When is a Variance or HACCP Plan Required?

Some types of food or food processing will require a variance from NC Department of Health and Human Services, and some will require approval by the local regulatory authority. Many specialized processes require a Hazard Analysis Critical Control Point (HACCP) Plan to be submitted.

What Types of Processes Require a HACCP Plan for Local Approval?

Section 3-502.12 states that a Food Establishment shall obtain approval from the Regulatory Authority before:

1. Potentially Hazardous Food (Time/Temperature Control for Safety Food) that is packaged using a Reduced Oxygen Packaging (ROP) method and is maintained at 41°F or less and meets at least one of the following criteria:
   - Has a water activity (Aw) of 0.91 or less;
   - Has a pH of 4.6 or less;
   - Is a Meat or Poultry product cured at a Food Processing Plant regulated by the USDA using substances specified in 9 CFR 424.21, *Use of Food Ingredients and Sources or Radiation*, and is received in an intact package; or
   - Is a Food with a high level of competing organisms, such as raw Meat, raw Poultry, or raw vegetables.
2. Fish that is frozen before, during, and after packaging using a ROP method;
3. Food that is prepared and packaged using a cook-chill or sous vide method;
4. Specific cheeses that are packaged using a ROP method;
5. Unpackaged juice prepared on the premises in a Food Establishment for service or sale that serves a Highly Susceptible Population.

What Types of Food and/or Methods Require a State Variance?

Section 3-502.11 states that a Food Establishment shall obtain a variance from the Regulatory Authority as specified in Sections 8-103.10 and 8-103.11 before:

1. Smoking food as a method of food preservation rather than a method of flavor enhancement;
2. Curing food;
3. Using food additives or adding components such as vinegar to address pH:
   - As a method of food preservation rather than as a method of flavor enhancement, or
   - To render a food so that it is not potentially hazardous (Time/Temperature Control of Safety Food);
4. Packaging food using a ROP method except where the growth of and toxin formation by *Clostridium botulinum* and the growth of *Listeria monocytogenes* are controlled as specified under Section 3-502.12;
5. Operating a molluscan shellfish life-support system display tank used to store or display shellfish that are offered for human consumption;

6. Custom processing animals that are for personal use as food and not for sale or service in a Food Establishment;
7. Preparing food by another method that is determined by the Regulatory Authority to require a variance;
8. Sprouting seeds or beans; or
9. Certain raw or undercooked animal foods as described in Paragraph 3-401.11(D).

How Does my Establishment Apply for a Local Approval?

1. Complete the Environmental Health Division's Local HACCP Approval Request Application.
2. Submit the application, HACCP Plan, and supporting documentation to HACCP@mecknc.gov.
3. The Mecklenburg County Environmental Health Specialized Process Committee will review during the monthly meeting.
4. Once approved, a letter of approval will be provided, and the specialized process may begin.

How Does My Establishment Apply for a State Variance?

1. Complete the NCDHHS "Request for a Variance" Application.
2. Submit the application, HACCP Plan, and supporting documentation to Mecklenburg County Environmental Health Specialized Process Committee via HACCP@mecknc.gov.
3. Mecklenburg County Environmental Health Specialized Process Committee will conduct a brief review of the HACCP plan and application for completeness.
4. When the review is complete, the Mecklenburg County Environmental Health Specialized Process Committee will communicate recommended changes and direct the facility to submit all documentation to:

   NCDHHS Environmental Health Section Food Protection Program/ NC Variance Committee
   1632 Mail Service Center
   Raleigh, NC 27699-1632
   ncvariancecommittee@dhhs.nc.gov

Resources

1. Association of Food and Drug Officials (AFDO) HACCP templates: https://www.afdo.org/haccp-plan-review/resources/
2. U.S. Food & Drug (FDA): https://www.fda.gov/food/hazard-analysis-critical-control-point-haccp/retail-food-service-haccp
3. NCDHHS Variance Committee: https://ehs.dph.ncdhhs.gov/faf/food/correspondence.htm

Mecklenburg County Health Department

ENVIRONMENTAL HEALTH DIVISION
LOCAL HACCP APPROVAL REQUEST

NORTH CAROLINA RULES GOVERNING THE FOOD PROTECTION AND SANITATION OF FOOD ESTABLISHMENTS

☐ **INITIAL PLAN SUBMISSION** ☐ **REVISION TO APPROVED PLAN**

DATE SUBMITTED: _____

ESTABLISHMENT INFORMATION

Name of Establishment:

Physical Address:

City: Zip Code:

Permit Holder (ex. LLC or corporation):

OWNER/POINT OF CONTACT INFORMATION

Owner or Owner's Representative:

Billing/Mailing Address:

City & State: Zip Code:

Telephone: E-mail Address:

ADDITIONAL REQUIRED INFORMATION

Is this a chain facility? ☐ **YES** ☐ **NO**

Do you have more than one location? ☐ **YES** ☐ **NO**

If yes, which locations would this approval apply to?

Type of Local HACCP Approval requested:	**Type of State Variance Approval requested:**
☐ Vacuum Packaging Raw Meats	☐ Vacuum Packaging Cooked Foods
☐ Vacuum Packaging Raw Seafood	☐ Sous-Vide (not listed in local HACCP approval)
☐ Vacuum Packaging Cheese	☐ Curing to Extend Shelf Life
☐ Cook-Chill (cooled to 34˚F and held ≤34˚F for ≤30 days)	☐ Fermentation
☐ Cook-Chill (cooled to 41˚F and held ≤41˚F for ≤7 days)	☐ Pickling to Extend Shelf Life
☐ Sous-Vide (final cook temperature met and then cooled to 41˚F and held ≤41˚F for ≤7 days or held ≤34˚F for ≤30days)	☐ Acidification to Render Non-TCS
	☐ Sprouting
	☐ Smoking for Preservation
	☐ Molluscan Shellfish Life Support System
	☐ Custom Processing
	☐ Other: _____

HACCP PLAN

Have you included all required contents of a Hazard Analysis Critical Control Point (HACCP) Plan? ☐ **YES** ☐ **NO**

- Types of Time/Temperature Control for Safety (TCS) foods that are to be controlled under the HACCP plan.
- A flow diagram by specific food or category type identifying critical control points and providing information on the following:
    - Ingredients, materials, and equipment used in the preparation of the food
    - Formulations or recipes that describe methods and procedural control measures that address the food safety concerns involved.
- Food employee and supervisory training plan that addresses the food safety issues of concern.
- Standard operating procedures for the plan identifying:
    - Each Critical Control Point (CCP)
    - The critical limits for each CCP
    - The method and frequency for monitoring and controlling each CCP by the food employee designated by the person in charge (PIC)
    - The method and frequency for the PIC to routinely verify that the food employee is following standard operating procedures and monitoring CCPs
    - Corrective action to be taken by the PIC if the critical limits for each CCP are not met
    - Records to be maintained by the PIC to demonstrate that the HACCP plan is properly operated and managed

LOCAL HACCP PLAN APPROVAL AGREEMENT

Once the HACCP Plan is approved by the MCHD, the Regulatory Authority (RA) will verify the plan is being followed as part of the ongoing inspection process. If the HACCP Plan is not being followed, approval may be revoked by the MCHD, and all operations associated with the HACCP Approval shall cease. After the deficiencies have been corrected the permit holder may apply for another approval.

Approved Local HACCP Plans are final, and no changes or modifications may occur without prior review and approval by this Department. Compliance with approved HACCP Plans will be monitored by the RA. Due to technological advancements and changing public health concerns, approved HACCP Plans will be subject to periodic review by the MCHD Specialized Process Committee. It is the responsibility of the establishment to follow the procedures approved by the MCHD Specialized Process Committee and to notify the RA immediately if there is to be any change made in the approved process.

Monitoring records must be maintained as specified in the HACCP approval and be available upon request from the RA during routine inspections or any other time the request is made by the RA.

A copy of the HACCP approval letter and plan must be maintained onsite and conveniently located, such that it is available for review by appropriate food employees and the RA during routine inspections or any other time the request is made by the RA.

If approved, this plan is only approved for the location noted on the approval letter. Using an MCHD approval letter for any other location is not permitted. HACCP plans approved for a single location of a chain establishment are only valid for that location. If more than one location of a chain establishment is requesting approval, then plans must be approved by the State process.

STATEMENT AND SIGNATURE

I hereby certify the information provided within this application is accurate and I understand that any deviation without prior approval from the Department may nullify the Local HACCP approval. I understand this application will be returned to me if incomplete and will delay further processing. I have read and understand the Local HACCP Plan Approval Agreement.

Signature: _____

Title: _____ **Date**: _____

MECKLENBURG COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH** 3205 FREEDOM DRIVE SUITE 8000 CHARLOTTE, NC 28208	**SUBMIT APPLICATION AND SUPPORTING DOCUMENTATION TO:** MCHD SPECIALIZED PROCESS COMMITTEE **HACCP@MeckNC.gov**

If there are any questions, please contact us at (980)-314-1620.

ACTION BY THE DEPARTMENT *(IN-OFFICE USE)*

Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**
Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**
Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**
Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**
Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**
Date Received: _____ Notified: _____ ☐ **Approved** ☐ **Disapproved** ☐ **Need More Information**

The request will be monitored by (EHS Lead): _____

Final Action Date: _____ Date Entered and Scanned to Database: _____

Comments if necessary: _____

_____

_____

_____

_____

_____

_____

_____ _____

MCHD Representative Signature **Date**



Appendix E

Part III: Baseline and Program Assessment
Uniform Quality Assurance (QA)

Content includes:

- **E1: EHF08 Quality Assurance Policy**
- **E2: Plan Review and Permitting QA Tools**
- **E3: NCDHHS QA Crosswalk with Standard 4 Quality Elements**
- **E4: Quality Assurance Dashboard**
- **E5: Field Quality Assurance**
- **E6: File Quality Assurance**
- **E7: Field Quality Assurance Marking Instructions**

Mecklenburg County Health Department
Food and Facilities Sanitation Policies and Procedures Manual

Environmental Health Division **EHF-08**
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Quality Assurance

Origination:	March 2006
Reviewed:	June 2006, June 2007, June 2009, June 2010, October 2011 October 2012, August 2017, August 2023
Revised:	October 2010, May 2013, June 2014, April 2015, July 2016, August 2018, August 2019, August 2020, August 2021, August 2022, August 2024, **August 2025**
References:	NCGS 130A-41; 10A NCAC 46 .0203

POLICY: Program Management will implement an on-going quality assurance program that evaluates inspection content to ensure inspection quality, inspection frequency and uniformity among regulatory staff. QA will be established and maintained in compliance with NC DHHS standards. Quality assurance with be completed in accordance with procedures.

PURPOSE: To ensure uniformity among regulatory staff in the interpretation of laws, regulations, program policies and compliance/enforcement procedures.

Policy Assigned To: Stephen Graham

Approved by:

Chrystal Swinger, REHS
Environmental Health Director

Amber Daniels, REHS
Program Manager, Planning and Support Services

Stephen Graham, REHS
Program Manager, Food & Facilities Sanitation

PROCEDURE:

I. Inspection staff will be trained in the knowledge, skills, and ability to perform their duties as measured by successful completion of the NC DHHS (North Carolina Department of Health and Human Services) authorization process.

II. Program supervisors/manager will assess and determine each individual inspector's ability to address the following performance areas by conducting a field review utilizing a standardized assessment tool and marking instructions (See Appendices A, B, and C or approved electronic software):
   A. Confirm accurate demographics of the establishment;
   B. Review establishment file for permit conditions, previous inspection reports, complaints on file, and if applicable, required HACCP plans or variances;
   C. Demonstrate a knowledge of the laws, rules, and regulations required for the establishment type;
   D. Use a risk-based methodology to correctly assess compliance with regulations related to employee practices and management procedures and obtain immediate corrective action when appropriate;
   E. Verify correction of out of compliance observations identified during previous inspection;
   F. Assess Good Retail Practices/Facility Sanitation Practices;
   G. Complete an inspection form that is accurate, grammatically correct and concise;
   H. Correctly use inspection equipment; and
   I. Utilize effective communication skills.

III. **Field reviews:** Will be completed for inspection staff at the following frequency once they have received a DHHS Food, Lodging, and Institutions authorization:

Position	Quality Assurance Expectations
PASS Program – Specific Positions	
EHS – Shared Kitchen	• Will be evaluated 2 out of 4 quarters/calendar year in a food service establishment • If a standardization or re-standardization is completed in a calendar year, the inspections related to the process will count as one field assessment as long as one field assessment is completed during the ~~fiscal~~ calendar year. *Note: Staff that complete all training requirements and are transferred to the Shared Kitchen Team will receive a field QA within 3 months of transfer.*
Senior EHS – Training/Shared Kitchen	• Will be evaluated 2 out of 4 quarters/calendar year in a food service establishment. • If a standardization or re-standardization is completed in a ~~fiscal~~ calendar year, the inspections related to the process will count as one field assessment as long as one field assessment is completed during the ~~fiscal~~ calendar year.
Senior EHS – Permitting	• Will be evaluated 2 out of 4 quarters/calendar year in a food service establishment. • Will be evaluated 1 out of the 4 quarters/calendar year on permitting duties. • If a standardization or re-standardization is completed in a ~~fiscal~~ calendar year, the inspections related to the process will count as one field assessment as long as one field assessment is completed during the ~~fiscal~~ calendar year.
Plans Examiner	• Will be evaluated 1 out of 4 quarters/calendar year in a food service establishment. Will be evaluated 1 out of the 4 quarters/calendar year on Plan Review duties (PE Peer QA or Construction Final)

FFS Program – Specific Positions	
EHS and Senior EHS – Food Service Inspections	• Will be evaluated 2 out of 4 quarters/calendar year in a food service establishment. • If a standardization or re-standardization is completed in a calendar year, the inspections related to the process will count as one field assessment as long as one field assessment is completed during the calendar year. *Note: Staff that complete all training requirements and are transferred to a food FFS Team will receive a field QA within 3 months of transfer.*
EHS and Senior EHS – Childcare and Institutions	• Will be evaluated 1 out of 4 quarters/calendar year at a Child Care Center or Nursing Home. • Will be evaluated at a food service establishment for an inspection 2 of the 4 quarters/calendar year. • If a field ES assigned to child care and institution inspections completes FDA standardization, they will receive at least 1 field assessment at a food service establishment and 1 field assessment at a child care center or nursing home. *Note: Staff that complete all training requirements and are transferred to the Childcare and Institutions Team will receive a QA within 3 months of transfer.*
PASS and FFS Program	
Supervisors	• Will be evaluated twice in a calendar year in a food service establishment. • If a standardization or re-standardization is completed in a calendar year, the inspections related to the process will count as one field assessment as long as one field assessment is completed during the calendar year.
Program Managers	If food service inspections are completed, they will be evaluated at two food service establishments when scheduled by NC DHHS. NC DHHS may also complete file reviews for the Program Managers. If a standardization or re-standardization is completed in a calendar year, NC DHHS will determine if additional field assessments and file reviews are required.
NOTE: Every effort should be made to conduct QA required at different times of the year for all parties. If scheduling conflicts, fluctuating amounts of direct reports, standardization, or otherwise, prevent different quarter field QA, it will be deemed acceptable to conduct QAs in the same quarter to meet QA completion.	

IV. **File Review:** Program supervisors and managers will conduct file review of fieldwork documentation. Assessment of staff will ensure accuracy of cited violations, that current DHHS marking instructions are followed and that appropriate corrective actions are taken.

A. Four records will be reviewed per inspector each calendar year using a standardized assessment tool and marking instructions.
B. Out of the four record reviews, two are to be selected at random and two are completed on establishments surveyed during field QA assessments using approved electronic software. However, the supervisor may elect to select four random establishments vs. evaluating the files of the establishments viewed during field QA.
C. Plan Review and permitting staff will be evaluated on two food service inspection files and two permit and plan review files.

V. **Ride-Behind Evaluations:** Program supervisors and management may also complete ride-behind inspections after inspections have been conducted when required by a program manager or the director.

VI. Results of file reviews will be compiled utilizing CDP IMS QA database on or before the 12th day after the start of each quarter. The Program Manager will report the composite results to the Division Director and Health Department Quality Improvement staff. Composite results of file reviews will be presented at the first FFS (Food and Facilities Sanitation) program meeting following the completion of the reviews each quarter or via email if a meeting cannot occur.

VII. File and field review reports will be shared with the individual being reviewed within 12 working days of the review. Immediately after each review, the evaluator will verbally share any recommended changes with the individual being reviewed.

VIII. **Staff Transitioning from Training 2.0 to new team:** Field reviews and file reviews required during the calendar year may be prorated based upon the length of time staff are active in the field and have completed training with Planning and Support Services.

Authorization Time	File Review	Field Review
1 Month or Less remaining in the calendar year	Requires no additional file review	Requires no additional field Review
6 months or less remaining in the calendar year	Requires two file reviews	Requires one field review

Greater than 6 months remaining in the calendar year	Requires full file reviews	Requires one field review

A. ES interns working with the training teams are evaluated above NC DHHS QA standards. Upon transfer to a full-time team, a comprehensive report will be provided after the completion of the training program to the assigned supervisor and new program manager. Staff will receive a Field Quality Assurance within 3 months of transfer by the new team supervisor.

IX. Program Manager or Environmental Health Analyst will generate and provide reports monthly to all staff to assess staff and program data for compliance with mandated state facility inspection frequencies. The report will incorporate the following per NC DHHS:

A. All category IV establishments, conducting a specialized food process or serving Highly Susceptible Populations, shall be inspected at 100% compliance.

B. All other establishments shall miss no more than one grading period per calendar year with category IV establishments taking priority. When missing only one inspection per FY is not possible, category IV establishments shall still be prioritized above category III; category III prioritized above category II; category I will take lowest priority. *Ex: Category IV establishments shall be inspected 2X/year and receive an education visit in lieu of category III, II, or I establishments inspected at 100% compliance.*

C. Factors, such as risk factor violations documented on previous inspections, length of time since completion of last inspection, and frequency of complaints from the public, shall be taken into consideration when determining the priority of inspections. Facilities of higher risk frequency or history of non-compliance should take priority over those of lower risk frequency or better compliance.

X. All inspection staff will receive a formal review and will have an IDP (Individual Development Plan) prepared by their program Supervisor pointing out their strengths and areas that need improvement at midyear and at the end of the reporting year. Program Supervisors will take appropriate corrective action to ensure all staff are performing the functions of their job appropriately.

XI. Scoring of Field Assessments and Use of Compliance Totals: Scoring shall be documented on the Field Assessment form provided in the workbook. Additional criteria may be assessed separately, if desired by the FLI program. The score of the field assessment is represented on the form as follows:

A. ≥85% Acceptable
B. 70% - 84% Needs Improvement
C. <70% Unacceptable

XII. Remediation: When an ES's field or file QA assessment totals are:

A. **< 70%** - Immediate remediation is required and additional assessments shall be completed to verify improvement. Documentation of the remediation plan and results shall be provided to the Program Manager and Environmental Health Regional Specialist.

B. **70% - 84%** - Remediation will be required to improve weaknesses post training program completion. Additional assessments will be performed if deemed necessary by the Supervisor, Program Manager, or Environmental Health Regional Specialist.

C.

Remediation shall be enacted through additional fieldwork and/or coursework which includes, but is not limited to, the following:

(a) Fieldwork with QA leader or training designee
(b) Food Code Refresher/RBI Course
(c) ORAU/IAFP listed courses
(d) Online Courses (Developed online ppts with exam proctored through OET, how to assess HACCP in the field, proper documentation, how to take permitting action, food science, understanding parasite destruction, etc.)
(e) Centralized Intern Training

XIII. REHS Informal Review Request: A REHS may request a meeting to review any portion of the Quality Assurance assessment. This review should be done with the supervisor or director of the program and may include the Environmental Health Regional Specialist. A review may be requested for any area of disagreement related to the assessment.

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Plan Review and Permitting Quality Assurance

Plan Review Evaluation Checklist					
Facility Name:		PE Name:			
Project Number:					
		Date:			
		Evaluator:			

Items Evaluated	IN	OUT	NA	Comments
Plan Submission				
Ensures complete application received				
Ensures proposed menu received				
Ensures all specifications sheets received				
Verifies floor plan showing location of equipment with corresponding equipment schedule				
Plan Review				
Compares equipment with spec sheets				
Reviews menu for specialized processes/foods				
Verifies water heater sized for sufficient capacity				
Reviews plan for adequate food prep space				
Ensures adequate food preparation sinks				
Reviews plan for adequate storage refrigeration				
Reviews plan for adequate cold holding equipment				
Reviews plan for adequate hot holding equipment				
Reviews plan for adequate cooking equipment				
Confirms equipment meets certification and meets parts 4-1 and 4-2 of the Food Code				
Verifies adequate equipment for utensil washing				
Examines process flow through kitchen for effectiveness and prevention of cross contamination				
Verifies adequate clean and soiled utensil storage space				
Verifies adequate dry storage space				
Ensures equipment properly protects food on display				
Confirms adequate and accessible handsinks				
Examines plan for adequate waste and refuge				
Good Retail Practices				
Physical Facilities have approved finishes				
Electronic Files				
Names e-file in proper format NAME/PROJECT #				
Provides copy of application				
Provides copy of menu				
Provides a copy of approved plan set with comments				
Notes				
General Plan Review Evaluation				
Personal areas for growth				

Unacceptable <70% + items missing/incorrect		
Needs improvement 70-84% 5-7 items missing/incorrect		
Acceptable ≥85% 4 or less items missing/incorrect		

QA Construction Final of a Food Service Facility

Facility Name

Facility Address

EHS

Date of Visit

Evaluator

Senior EHS is evaluated on overall completion and thoroughness to the items listed below as part of a construction final. QA is to be conducted at the first site visit in preparation for a business to receive permit to sell food to the public. Reviewer will note IN/OUT/NA as a reflection of the inspector not the facility. OUTs will require documentation of what deficiency was noted.

1. Equipment on approved plan is installed according to plan. Modifications may not hinder the facility from operating safely and within the rule requirements. IN ☐ OUT ☐ NA ☐

2. Detailed menu review including how the food will be processed is compared to the required and installed equipment capacity. Evaluation results confirm compliance with rules or allowable modifications are made to reach compliance. IN ☐ OUT ☐ NA ☐

3. Explanation and guidance is given regarding TPHC; CA; or special processes via menu review.
   IN ☐ OUT ☐ NA ☐

4. Equipment spec sheets match as submitted in plan review or are deemed equivalent.
IN ☐ OUT ☐ NA ☐

5. Verification of holding temperatures in all refrigerators and freezers.
IN ☐ OUT ☐ NA ☐

6. Food & non-food contact surfaces approved, cleanable & clean, properly designed, constructed.
   IN ☐ OUT ☐

7. Fixed equipment sealed to the floor or at least 6 inches' clearance between floor and equipment.
   IN ☐ OUT ☐

8. Fixed equipment spaced to allow cleaning along sides of the equipment.
   IN ☐ OUT ☐

9. Food shields, display cases provide protection at customer self-serve bars.
   IN ☐ OUT ☐ NA ☐

10. Ware-washing facilities operating properly. IN ☐ OUT ☐
    (readable data plate affixed; temperature measure gauge and pressure gauge for High temp machines)

11. All storage spaces have approved equipment for use and 6-inch clearance from the floor.
    IN ☐ OUT ☐

12. Approved water system; wastewater system. IN ☐ OUT ☐
    (adequate pressure; temperature; backflow devices; PVB where required;

13. Restrooms equipped. IN ☐ OUT ☐
(finishes; functionality)

14. Plumbing fixtures. IN ☐ OUT ☐
(Self-metered faucets 15 sec; backflow devices; air gaps/brakes;)

15. Verification of the water heater function and capacity via point of use temperature. IN ☐ OUT ☐

16. Openings to the outside are in compliance with self-closure or other means. IN ☐ OUT ☐

17. Floors, walls, ceilings finishes verified. IN ☐ OUT ☐
(nonabsorbent as applicable, no piping obstructions, junctures coved; sealed condensate lines sleeved in walk-in cooler)

18. Mop sink and bulk facility waste areas. IN ☐ OUT ☐

19. Lighting requirements verified. IN ☐ OUT ☐
    a. 10-foot candles 30 inches above floor; walk-in, dry food storage
    b. 20-foot candles consumer self-service, reach-in, handwashing, ware-washing, equipment and utensil storage, toilet rooms
    c. 50-foot candles: food preparation areas where employees are working with food or utensils such as knives, slicers, grinders, saws

20. At minimum the following job aids are shared with the facility representative. IN ☐ OUT ☐
    EHP (appropriate translations); Hand wash and no smoking decals

21. Explanation and guidance are provided for CFPM requirement. IN ☐ OUT ☐

22. Documentation submitted for permanent file. IN ☐ OUT ☐
    (accurate and complete information including a signed permit with necessary permit conditions; final menu approved; application; water heater information)

Permitting File Review QA

Instructions: The purpose of this document is to ensure consistent permitting according to department SOPs. This review form is used to analyze permit files to ensure all the following applicable components are included. Boxes left blank are considered in compliance. Components circled or marked "X" are identified as missing or improvement needed.

Facility Name: Click or tap here to enter text.
QA Date:
EHS Name:
Reviewed on:

- ☐ Meets Naming Rules
- ☐ Owner listed with secretary of state
- ☐ Complete contact info for owner/operator
- ☐ Correctly assigned to appropriate territory
- ☐ Last permitted facility in location on deleted status (H)
- ☐ Full address submitted
- ☐ Conditions clear, correct, and applicable
- ☐ Conditions without spelling or grammar errors
- ☐ Current Risk Category
- ☐ Signature(s) present
- ☐ Facility demographics correct
- ☐ E grid entered in CDP
- ☐ Hours of Operation entered in CDP
- ☐ Lat and Long in permit
- ☐ Application, Water Calculation, and Menu attached
- ☐ S/Rs created for Initial Inspection/Track Transitional

Comments:

MECKLENBURG COUNTY
North Carolina

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QA Crosswalk with Standard 4 Quality Elements

Retail Program Standards Quality Element	NC DHHS Quality Assurance Connection	Qualifier and Justification (if applicable)
1. Has required equipment and forms to conduct the inspection.	3. REHS properly equipped	
2. Reviews the contents of the establishment file, including the previous inspection report, reported complaints on file, and, if applicable, required HACCP Plans or documents supporting the issuance of a variance.	1. Reviews (1-3) previous inspections 2. Reviews permit conditions, TPHC, variance/HACCP	
3. Verifies that the establishment is in the proper risk category and that the required inspection frequency is being met. Informs the supervisor when the establishment is not in the proper risk category or when the required frequency is not met.	49. Risk category and risk frequency verified	
4. Provides identification as a regulatory official to the person in charge and states the purpose of the visit	4. Properly identifies him/herself	
5. Interprets and applies the jurisdiction's laws, rules, policies, procedures, and regulations required for conducting retail food establishment inspections.	11. Verifies Food Certification Manager; duties 1 12. Employee health 2,3 13. Good Hygienic Practices 4,5 14. Handwashing 6,8 15. No bare hand contact 7 16. Approved Sources-9,10,11,12,15,30 17. Food storage and protection 13,37,12,31 18. Cleaning & sanitizing food contact surfaces 14 19. Cooking 16 20. Reheat 17 21. Cooling Parameters 18 22. Hot Holding 19 23. Cold Holding 20 24. Datemarking 21 25. TPHC 22 26. Consumer advisory & required pasteurized foods 27. Chemicals 25, 26 28. Recognizes HSP requirements 24 29. Recognizes Variance/HACCP 30 30. Verifies HACCP plan 27 31. Cooling Methods 31 32. Recognizes plant food cooking 32 33. Thawing Methods 33 34. Thermometers available and accurate	**Qualifier:** 20 out of 24 marked correctly **Justification:** 20 out of 24 equates to compliance of 83 % which is greater than 75 % for the quality element requirements. In addition, if 4 of these items are marked OUT of compliance under the NCDHHS QA form it would yield a 92% compliance rate which exceeds the minimum of 85%.

Retail Program Standards Quality Element	NC DHHS Quality Assurance Connection	Qualifier and Justification (if applicable)
6. Uses a risk-based inspection methodology to conduct the inspection.	5. Menu review 8. Surveys facility; prioritizing risk factors	
7. Accurately determines the compliance status of each risk factor and Food Code intervention (i.e., IN compliance, OUT of compliance, Not Observed, or Not Applicable).	11. Verifies Food Certification Manager; duties 1 12. Employee health 2,3 13. Good Hygienic Practices 4,5 14. Handwashing 6,8 15. No bare hand contact 7 16. Approved Sources-9,10,11,12,15,30 17. Food storage and protection 13,37,12,31 18. Cleaning & sanitizing food contact surfaces 14 19. Cooking 16 20. Reheat 17 21. Cooling Parameters 18 22. Hot Holding 19 23. Cold Holding 20 24. Datemarking 21 25. TPHC 22 26. Consumer advisory & required pasteurized foods 27. Chemicals 25, 26 28. Recognizes HSP requirements 24 29. Recognizes Variance/HACCP 30 30. Verifies HACCP plan 27 31. Cooling Methods 31 32. Recognizes plant food cooking 32 33. Thawing Methods 33 34. Thermometers available and accurate	**Qualifier:** 20 out of 24 marked correctly **Justification:** 20 out of 24 equates to compliance of 83 % which is greater than 75 % for the quality element requirements. In addition, if 4 of these items are marked OUT of compliance under the NCDHHS QA form it would yield a 92% compliance rate which exceeds the minimum of 85%.
8. Obtains corrective action for out-of-compliance risk factors and Food Code interventions in accordance with the jurisdiction's policies.	45. Corrective Action Achieved, CDI noted	
9. Discuss options for the long-term control of risk factors with establishment mangers, when the same out-of-control risk factor occurs on consecutive inspections, in accordance with the jurisdiction's policies. 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.	48. Options for long-term control of risk factors explored	

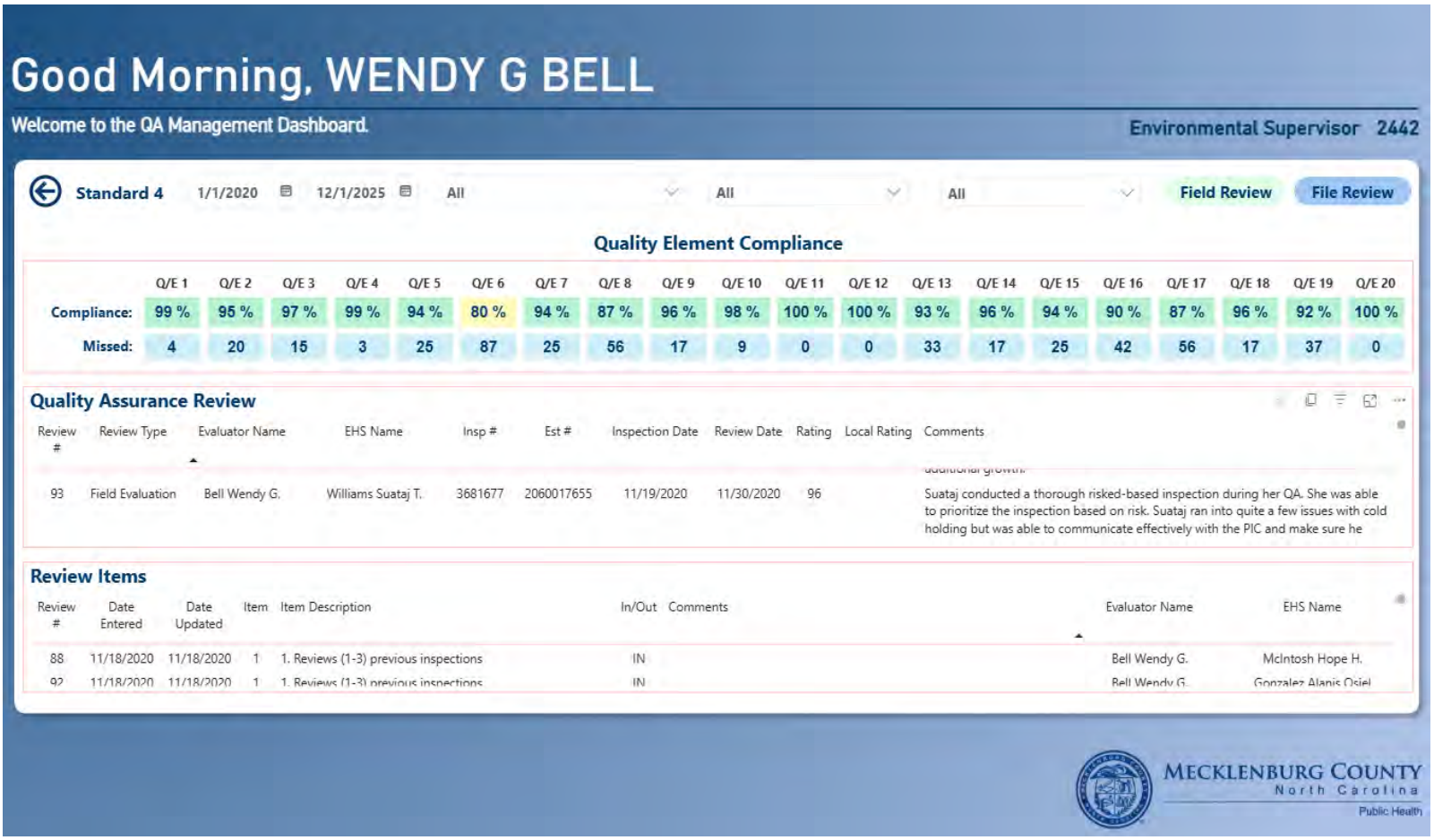
Retail Program Standards Quality Element	NC DHHS Quality Assurance Connection	Qualifier and Justification (if applicable)
10. Verifies correction of out-of-compliance observations identified during the previous inspection. In addition, follows through with compliance and enforcement in accordance with the jurisdiction's policies.	47. Enforcement Action properly taken 50. Correction of previous risk factor violations achieved	
11. Conducts an exit interview that explains the out-of-compliance observations, corrective actions, and timeframes for correction, in accordance with the jurisdiction's policies.	51. Exit interview conducted, and paperwork provided	
12. Provides the inspection report and, when necessary, cross-referenced documents, to the person in charge or permit holder, in accordance with the jurisdiction's policies.	51. Exit interview conducted, and paperwork provide.	
13. Demonstrates proper sanitary practices as expected from a food service employee.	41. EHS washes hands as needed 42. Properly uses equipment	
14. Completes the inspection form per the jurisdiction's policies (i.e. observations, public health reasons, applicable code reference, compliance dates).	52. Inspection form documentation clear and complete	
15. Documents the compliance status of each risk factor and intervention (IN, OUT, NA, NO)	11. Verifies Food Certification Manager; duties 1 12. Employee health 2,3 13. Good Hygienic Practices 4,5 14. Handwashing 6,8 15. No bare hand contact 7 16. Approved Sources-9,10,11,12,15,30 17. Food storage and protection 13,37,12,31 18. Cleaning & sanitizing food contact surfaces 14 19. Cooking 16 20. Reheat 17 21. Cooling Parameters 18 22. Hot Holding 19 23. Cold Holding 20 24. Datemarking 21 25. TPHC 22 26. Consumer advisory & required pasteurized foods 27. Chemicals 25, 26 28. Recognizes HSP requirements 24 29. Recognizes Variance/HACCP 30 30. Verifies HACCP plan 27 31. Cooling Methods 31 32. Recognizes plant food cooking 32 33. Thawing Methods 33 34. Thermometers available and accurate	**Qualifier:** 20 out of 24 marked correctly **Justification:** 20 out of 24 equates to a compliance rate of 83%, which is greater than 75% for the quality element requirements. In addition, if 4 of these items are marked OUT of compliance on the NCDHHS QA form, it would yield a 92% compliance rate, which exceeds the minimum of 85%.

Retail Program Standards Quality Element	NC DHHS Quality Assurance Connection	Qualifier and Justification (if applicable)
16. Cites the proper code provisions for risk factors and Food code interventions, in accordance with the jurisdiction's policies.	43. Proper code citation and Item number marked	
17. Documents corrective action for out-of-compliance risk factors and Food code interventions in accordance with the jurisdiction's policies.	45. Corrective Action Achieved, CDI noted	
18. Documents that options for the long-term control of risk factors were discussed with establishment managers when the same out-of-control risk factor occurs 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.	48. Options for long-term control of risk factors explored	
19. Compliance or regulatory documents (i.e. exhibits, attachments, sample forms) are accurately completed, appropriately cross-referenced within the inspection report, and included with the inspection report, in accordance with the jurisdiction's policies.	43. Proper code citation and Item number marked 44. Item properly marked as a repeat violation 45. Corrective Action Achieved, CDI noted 46. Verification Required, properly documented 47. Enforcement Action properly taken	**Qualifier:** 1 out of 5 marked correctly **Justification:** 1 out of 5 equates to compliance of 80%, which is greater than 75 % for the quality element requirements. In addition, if 4 of these items are marked OUT of compliance under the NCDHHS QA form, it would yield a 92% compliance rate, which exceeds the minimum of 85%.
20. Files reports and other documentation in a timely manner, in accordance with the jurisdiction's policies.	53. Paperwork filed properly and in a timely manner	

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QA Dashboard



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Field Quality Assurance

Form Instructions: 1) Only review a food service establishment that had at least one out of control CDC Risk Factor or Food Code Intervention documented on any of the two previous inspection reports (e.g. Unsafe Source, Inadequate Cooking, Improper Holding Temperatures(Hot or Cold), Time/Temperature Parameters not Met (Time as a control, date marking rapid cooling), Bare Hand Contact with Ready to Eat Food, Poor Personal Hygiene, Contaminated Food Contact Surface & Equipment, Consumer Advisory (when required), Demonstration of Knowledge by PIC, Employee Health). 2) Evaluator will place a "1" under IN, OUT, or NA based on the marking instructions in this document. 3) Instruction item #1 does not apply to institution & Child Care facility inspections. 4) Evaluator will mark "OUT" if "IN" compliance status was not obtained per each items marking instructions.

Establishment Name:	**EHS Name:**	
	RS#:	
ID#:	**Inspection Date:**	
	Review Date:	
	Evaluator:	

Review Items

Items Evaluated	IN	OUT	N/A	Marking Instructions
1. Reviews (1-3) previous inspections				IN/OUT This item is marked IN/OUT based on the REHS's review of previous inspections prior to conducting the inspection. The review is to identify past risk factor violations, repeat violations and other items of concern such as use of TPHC, consumer advisory, variance and/or HACCP, and service to highly susceptible populations. NA This item is marked NA if the REHS is doing an inspection on a newly permitted establishment that does not have previous inspections to review.
2. Awareness of permit, permit conditions, and supporting documents				IN/OUT This item is marked IN/OUT based on the REHS's awareness of the file documents including the permit, permit conditions, and other relevant documentation. If the REHS attempts to review file paperwork, regardless of what is available, this item should be marked IN. Items to review include, but are not limited to: the permit, permit conditions, menu, TPHC, variance and/or HACCP plans, non-continuous cooking processes, and onsite wastewater and water supply documentation. NA Marking this is not an option for this item.
3. REHS properly equipped				IN/OUT This item is marked IN/OUT based on the REHS's access to equipment needed to conduct a risk-based inspection. To be marked IN compliance, the REHS must have: a calibrated thin-probe thermometer, chemical test strips, maximum-registering thermometer or temperature-indicating strips, alcohol swabs (or use facility sanitizer), and flashlight. The REHS must have access to applicable rules, marking instructions, inspection forms (or working field client), comment addenda, suspension/revocation forms, embargo/product disposition forms, and grade cards. NA Marking this is not an option for this item.
4. Properly identifies themselves				IN/OUT This item is marked IN/OUT based on how the REHS provides identification when entering the facility. To be marked IN compliance, the REHS must state their name, name of their department, and purpose of the visit clearly BEFORE entering the kitchen or other non-public areas of facility. The REHS must gain consent from a food service employee before entry. There may be varying levels of formality to this, but if there is acknowledgement of consent, this item should be marked IN. NA Marking this is not an option for this item.
5. Menu review				IN/OUT This item is marked IN/OUT based on the adequacy of the REHS review of the menu during the inspection. The REHS must review products or procedures to identify items that may be cooled, served raw/undercooked or prepared using a specialized process. The REHS must inquire about process changes and additional food items not listed on the menu. NA Marking this is not an option for this item.
6. Ask PIC to accompany during inspection				IN/OUT This item is marked IN/OUT based on how the REHS asks the person in charge (PIC) to accompany them during the inspection. If no employee is identified as the person in charge, the REHS shall invite an employee to accompany them on the inspection. This item should NOT be marked OUT if the invitation is declined. NA Marking this is not an option for this item.
7. Verifies ownership, demographics				IN/OUT This item is marked IN/OUT based on how the REHS verifies or updates (if necessary) the ownership and demographic information with the PIC or owner during the inspection. NA Marking this is not an option for this item.
8. Surveys facility; prioritizing risk factors				IN/OUT This item is marked IN/OUT based on how the REHS initially surveys the food establishment to determine which of the 5 FDA foodborne illness risk factors (improper holding temperatures, inadequate cooking, contaminated equipment, food from unsafe sources, and poor personal hygiene) should be prioritized. The REHS must prioritize dynamic over static processes. The REHS must ask open-ended questions regarding receiving, reheating, cooking and cooling during the survey (RRCC). NA Marking this is not an option for this item.
9. Appropriate Attire/Complies with facilities policies				IN/OUT This item is marked IN/OUT based on the REHS adhering to all applicable county or department dress codes and dressing in a professional manner. The REHS must meet the requirements of a food employee in Chapter 2 of the NC Food Code (e.g. not working when sick, clean outer clothing, effective hair restraint, no jewelry on hands or wrist except for a plain band, no artificial or painted fingernails unless single-use gloves are worn). If requested, the REHS must respectfully comply with additional policies/procedures required of the facility. NA Marking this is not an option for this item.

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10. Professional Rapport				IN/OUT This item is marked IN/OUT based on how the REHS maintains a professional demeanor throughout the inspection. The REHS must communicate in clear and effective language and provide reasonable solutions to violations observed. Examples of behaviors that would result in this item being marked OUT include, but are not limited to using unprofessional language, inappropriate duration of inspection, speaking unprofessionally to the PIC or other staff, yelling or raising voice in a disrespectful manner, making derogatory remarks, or displaying cultural insensitivity. NA Marking this is not an option for this item.
11. PIC presence, demonstration, duties, and certification (Grade Sheet #1 & #2)				IN/OUT This item is marked IN/OUT based on how the REHS verifies PIC presence and certification as a Food Protection Manager, assesses demonstration of knowledge, and evaluates compliance with PIC duties listed in the NC Food Code. The REHS is expected to ask enough questions to assess the active managerial control within the facility. NA Marking this is not an option for this item.
12. Employee Health; verifies vomit & diarrhea plan (Grade Sheet #3, #4, & #5)				IN/OUT This item is marked IN/OUT based on how the REHS assesses the employee health policy and the vomit & diarrheal event clean-up plan of the facility. The REHS must ask questions of the policy (e.g. reportable symptoms/illnesses, reinstatement of restricted/excluded employees, etc.) and verify that proper exclusion and restriction are in place at the time of inspection (no visible infected cuts, and no employees with vomiting, diarrhea present at time of inspection). The REHS shall verify how employees are informed of the establishment's employee health policy (e.g. use of form 1-B, evidence of training, use of placards/training cards, etc.) and is encouraged to interview a random food employee to ensure they have been adequately informed of the requirements listed in the establishment's employee health policy. The REHS must confirm the establishment has a written vomit & diarrheal event clean-up plan that meets the requirements in 2-501.11. The REHS must communicate proper corrective actions when necessary. NA Marking this is not an option for this item.
13. Good Hygienic Practices (Grade Sheet #6 & #7)				IN/OUT This item is marked IN/OUT based on the REHS's assessment of Food Employee's hygienic practices such as eating, tasting, drinking, or tobacco use in unapproved areas of the kitchen, and ensures no Food Employee is observed with eye, nose, and/or mouth discharge. NA Marking this is not an option for this item.
14. Handwashing (Grade Sheet #8 & #10)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates handwashing in the facility. The REHS must actively watch employees during preparation and cleaning activities, determine when handwashing is required by the rules, and seek correction when improper handwashing takes place. All handwashing sinks in the facility must be evaluated for proper maintenance including accessibility, soap/hand drying method availability and appropriate signage. NA Marking this is not an option for this item.
15. No Bare Hand Contact (Grade Sheet #9)				IN/OUT This item is marked IN/OUT based on the REHS's interpretation and application of the rules that apply to bare hand contact of food. The REHS must determine if RTE food that was observed being touched with bare hands will be heated to =145°F or served with no further processing. The REHS must seek correction from employees when improper bare hand contact of food is observed. NA Marking this is not an option for this item.
16. Approved Sources (Grade Sheet #11, #12, #13, #14 & #17)				IN/OUT This item is marked IN/OUT based on how the REHS discusses/evaluates sources of food during the inspection, including receiving temperatures, shellstock identification requirements, parasite destruction record requirements, and the disposition of returned food by customers. The REHS is expected to seek an appropriate corrective action when food is suspected to be adulterated or unsafe. NA Marking this is not an option for this item.
17. Food Storage and Protection (Grade Sheet #15 & #39)				IN/OUT This item is marked IN/OUT based on how the REHS assesses cross contamination and food protection concerns during food handling, preparation, and storage (e.g. refrigeration, dry storage and others including customer self-service areas). The REHS must address and correct if necessary improper use of single-use gloves (e.g. changes in tasks that results in contamination, gloves that are torn and reused, etc.) and utensils/equipment as vehicles to contamination. The REHS must recognize improperly stored food (e.g. raw food above RTE food and/or unwashed produce, food uncovered except during cooling, unprotected food in customer self-service areas with no monitoring, etc.). NA Marking this is not an option for this item.

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18. Cleaning & Sanitizing Food Contact Surfaces (Grade Sheet #16)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates the cleaning and sanitizing of utensils and food-contact surfaces. The REHS shall discuss/evaluate procedures (including frequency) for cleaning, check sanitizer concentrations and efficacies (hot water temperature/chemical concentration) of dish machines where applicable, and verify proper procedures for utensil and equipment cleaning and sanitizing operations. The REHS must communicate proper corrective actions when necessary. NA Marking this is not an option for this item.
19. Cooking (Grade Sheet #18)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates cooking processes during the inspection. If cooking is occurring, the REHS must return to the cook line to verify cook temperatures as they continue with other risk factors. To be marked IN compliance, the REHS is expected to measure a representative sample of foods that are in the process of cooking. The REHS must ask open-ended questions to determine cooking is occurring, communicate correct final cook temperatures to the employees and the PIC, and must follow through with providing information on proper corrective action when necessary. This item would be OUT if the REHS refers to a reheating temperature as a cooking temperature or assesses a cooked-to-order food for a final cook temperature and does not recognize the difference. NA This item is marked NA when, during menu review, it is determined that no true cooking is occurring in the facility, OR, at the end of the inspection, there has been no cooking in the facility and no opportunity for the REHS to evaluate final cook temperatures.
20. Reheating (Grade Sheet #19)				IN/OUT This item is marked IN/OUT based on how the REHS assesses reheating of food for hot holding. The REHS must demonstrate knowledge of the proper critical limit based on the type (commercially packaged food vs. establishment pre-cooked/cooled food heated to hot hold) of reheating occurring. The REHS must demonstrate knowledge of the difference between cooking and reheating, ask open-ended questions to determine if reheating is occurring and determine the type of reheating taking place. The REHS must identify and communicate proper corrective actions when necessary. The REHS is OUT of compliance if they require an unnecessary corrective action on a food reheated for immediate service. NA This item is marked NA when, during menu review, it is determined that no reheating is occurring in the facility OR, at the end of the inspection, there has been no reheating in the facility and no opportunity for the REHS to evaluate reheat temperatures.
21. Cooling Parameters (Grade Sheet #20)				IN/OUT This item is marked IN/OUT based on how the REHS assesses and correctly interprets the cooling time and temperature parameters that lead to a temperature violation for cooling. The REHS, through questioning, must determine early in the inspection if cooling (e.g. cook/cool, ambient cooling, cooling after preparation) is taking place, so at least (2) temperatures of the food can be measured to calculate a cooling rate and determine cooling compliance. The cooling calculation(s) should be used as a tool to help the REHS determine compliance with cooling. The REHS, through questioning, must be able to determine when the time/temperature parameters of cooling have not been met to communicate appropriate corrective actions. NA This item is marked NA when, during menu review, it is determined that no cooling is occurring in the facility OR, at the end of the inspection, there has been no cooling in the facility and no opportunity for the REHS to evaluate cooling temperatures.
22. Hot Holding (Grade Sheet #21)				IN/OUT This item is marked IN/OUT based on how the REHS assesses hot holding temperatures in the facility. The REHS must demonstrate proper technique in assessing hot holding temperatures and must take temperatures of an appropriate representative sample of hot held foods during the inspection, accurately identify items that are out of compliance, and communicate appropriate corrective actions with the PIC when necessary. NA This item is marked NA when, during menu review, it is determined that no hot holding is occurring in the facility OR, at the end of the inspection, there has been no hot holding in the facility and no opportunity for the REHS to evaluate hot holding temperatures.

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23. Cold Holding (Grade Sheet #22)				IN/OUT This item is marked IN/OUT based on how the REHS assesses cold holding temperatures in the facility. The REHS must demonstrate proper technique in assessing cold holding temperatures and must take temperatures of an appropriate representative sample of cold foods during the inspection, accurately identify items that are out of compliance, and communicate appropriate corrective actions with the PIC. NA This item is marked NA when, during menu review, it is determined that no cold holding is occurring in the facility OR, at the end of the inspection, there has been no cold holding in the facility and no opportunity for the REHS to evaluate cold holding temperatures.
24. Date Marking (Grade Sheet #23)				IN/OUT This item is marked IN/OUT based on how the REHS assesses the date marking system used in the facility. Through discussion of the establishment's date marking system, the REHS must be able to accurately identify foods that require date marking, preparation/expiration dates, length of time allowed for date marking, foods that are exempt from date marking, and be able to communicate appropriate corrective actions with the PIC when necessary. NA This item is marked NA when, during menu review, it is determined that there are no items within the facility that require date marking.
25. Time as a Public Health Control (Grade Sheet #24)				IN/OUT This item is marked IN/OUT based on how the REHS identifies foods that are being held using time as a public health control (TPHC). The REHS must ask appropriate questions to determine if foods are held using TPHC. The REHS must understand that written TPHC procedures do not need to be pre-approved. If TPHC is being utilized, the REHS must complete a field review of the written TPHC procedures provided. The REHS must also be able to communicate proper corrective actions when necessary. NA This item is marked NA when, during menu review, it is determined that there are no items within the facility that are held using TPHC.
26. Consumer Advisory/Pasteurized Foods (Grade Sheet #25 & #30)				IN/OUT This item is marked IN/OUT based on how the REHS identifies foods that are being served raw or undercooked. The REHS is expected to ask open-ended questions to make sure the facility understands when a consumer advisory is required. The REHS must assess current consumer advisories that are present to ensure they are complete (disclosure/reminder). When menus do not include consumer advisories for items that are undercooked or contain raw ingredients, the REHS must be able to validate the presence of pasteurized foods and ensure that all requirements are met to serve these foods without a consumer advisory. The REHS must also be able to communicate proper corrective actions when necessary. NA This item should not be marked NA. If the REHS asks appropriate questions and accurately determines that no consumer advisory is needed, the REHS should be marked IN.
27. Additives; chemicals (Grade Sheet #27 & #28)				IN/OUT This item is marked IN/OUT based on how the REHS identifies and/or assesses food additives (e.g. food colorings, sulfites, nitrites/nitrates, etc.) and chemical use and storage during the inspection. The REHS must properly enforce rules regarding chemical bottle labels, storage to prevent contamination (including medications), and appropriately discuss sanitizers or other chemicals that exceed the tolerance levels allowed by the CFR. The REHS must also be able to communicate proper corrective actions when necessary. NA Marking this is not an option for this item.
28. Recognizes HSP requirements (Grade Sheet #26)				IN/OUT This item is marked IN/OUT based on how the REHS identifies a highly susceptible population (HSP) and properly applies the definition. The REHS must ask questions to determine if the HSP complies with provisions (e.g. juice, eggs, offering of raw/undercooked foods and raw seed sprouts, re-service of food) listed in 3-801. 11. The REHS must also be able to communicate proper corrective actions when necessary. NA This item is marked NA when, during menu review, it is determined this facility does not meet the definition of serving a highly susceptible population.

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29. Variance/HACCP (Grade Sheet #29)				IN/OUT This item is marked IN/OUT based on how the REHS assesses whether specialized processes are occurring in the facility. The REHS is expected to ask open-ended questions and be able to identify equipment that is indicative of a specialized process (e.g. vacuum sealer, immersion circulator, pH meters, starter cultures, pink salt, etc.). The REHS must also be able to properly communicate when a HACCP plan without a variance is needed, when a variance is required, and communicate proper corrective actions when necessary. NA This item should not be marked NA. If REHS asks appropriate questions and accurately determines that no specialized processes are taking place, the REHS should be marked IN.
30. HACCP Plan (Grade Sheet #32)				IN/OUT This item is marked IN/OUT based on how the REHS determines the need of a HACCP plan for processes conducted in the facility and if the REHS properly reviews food operations and available records (e.g. HACCP plan components – CCPs, CLs, monitoring, corrective actions, etc.) for compliance. The REHS is expected to communicate proper corrective actions when necessary. NA This item is marked NA when, during menu review, it is determined there is no HACCP plan implemented in this facility.
31. Cooling Methods (Grade Sheet #33)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates cooling methods used in the facility, determines adequacy and communicates proper corrective actions (when necessary). The REHS must calculate cooling rates as part of their evaluation of cooling methods used in the establishment. The REHS must be able to determine if a facility's existing equipment provides adequate capacity for cooling , heating and holding. NA This item should not be marked NA. If REHS asks appropriate questions and accurately determines that no cooling is taking place, the REHS should be marked IN.
32. Recognizes plant food cooking (Grade Sheet #34)				IN/OUT This item is marked IN/OUT based on how the REHS identifies and assesses plant food cooking in the facility. The REHS must communicate proper corrective actions when necessary. NA This item is marked NA when, during menu review, it is determined there is no plant food cooking occurring in the facility OR, at the end of the inspection, there has been no plant food cooking in the facility and no opportunity for the REHS to evaluate.
33. Thawing Methods (Grade Sheet #35)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates methods of thawing used during the inspection. The REHS must provide clear information on approved thawing methods and communicate corrective actions when necessary. Adequate discussion of thawing practices when thawing is not occurring at the time of the inspection should result in the REHS being marked IN. NA This item is marked NA when, during menu and facility review, it is determined thawing does not occur in the facility.
34. Thermometers available and accurate (Grade Sheet #36)				IN/OUT This item is marked IN/OUT based on how the REHS evaluates thermometers in use at the time of inspection. The REHS is expected to check air temperature thermometers on holding units and assess the accuracy and functionality (e.g. probe type based on type of food served, intended use, etc.) of thermometers provided. The REHS must communicate proper corrective actions when necessary. NA Marking this is not an option for this item.
35. Water and Ice From Approved Sources (Grade Sheet #31)				IN/OUT This item is marked IN/OUT based on how the REHS assesses the water supply used in the facility. The REHS is expected to verify whether the water supply is a community or non-community system. If applicable, the REHS must verify that construction and sampling requirements have been met for wells being used by the facility. The REHS is expected to seek correction for "priority" and "priority foundation" violations when necessary. NA Marking this is not an option for this item.
36. Food labeling, original container (Grade Sheet #37)				IN/OUT This item is marked IN/OUT based on how the REHS identifies and verifies that required food labels are correct. The REHS must check bulk/working containers of food, customer self-service packaged foods, and "grab and go". When packaged foods require labeling, the REHS must follow State guidance regarding required ingredient and allergen information, understand which items require immediate correction or follow-up (items that are P, Pf) and provide accurate information on corrective actions for these items if found to be out of compliance. The REHS must verify that shellstock is being stored in its original container. The REHS must verify foods are accurately identified and honestly presented while in storage, display or service. NA Marking this is not an option for this item.

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37. Prevention of Contamination (Grade Sheet #38, #40, #41 & #42)				IN/OUT This item is marked IN/OUT based on how the REHS assesses pest control measures and presence of insects within the facility, personal cleanliness of employees, wiping cloth use/storage, and proper washing of fruits and vegetables. The REHS is expected to seek correction for “priority” and “priority foundation” violations when necessary. NA Marking this is not an option for this item.
38. Proper Use of Utensils (Grade Sheet #43, #44, #45 & #46)				IN/OUT This item is marked IN/OUT based on how the REHS addresses the storage and handling of clean utensils including in-use utensils, air drying, linen, single-service and single-use articles. The REHS appropriately identifies the use-limitations of cloth and slash-resistant gloves. NA Marking this is not an option for this item.
39. Utensils and Equipment (Grade Sheet #47, #48 & #49)				IN/OUT This item is marked IN/OUT based on how the REHS addresses repair, materials/design/construction (e.g. properly certified/classified or 4-1/4-2 or equivalent), and intended-use of utensils and equipment. The REHS must verify warewashing facilities are maintained and operational, test strips are present in the facility and cleanliness of non-food contact surfaces. The REHS is expected to seek correction for “priority” and “priority foundation” violations when necessary. NA Marking this is not an option for this item.
40. Physical Facilities Grade Sheet #50, #51, #52, #53, #54, #55 & #56)				IN/OUT This item is marked IN/OUT based on how the REHS addresses water availability, the plumbing system including backflow prevention devices, toilet facilities, refuse and waste disposal facilities, and physical facilities during an inspection. The REHS must address improper storage of employee belongings and lighting deficiencies. The REHS is expected to seek correction for “priority” and “priority foundation” violations when necessary. NA Marking this is not an option for this item.
41. EHS washes hands as needed				IN/OUT This item is marked IN/OUT based on how the REHS washes their hands during the inspection, following the requirements of when to wash and how to wash as specified in Chapter 2 of the NC Food Code. NA Marking this is not an option for this item.
42. Properly Uses Equipment				IN/OUT This item is marked IN/OUT based on how the REHS uses equipment required to complete an inspection. The REHS must clean and sanitize their thermometer properly before use and between foods (where required) to prevent cross-contamination, use chemical test strips according to instructions, verify operation of a hot water sanitizing dish machine (when applicable) by use of a maximum-registering thermometer or temperature indicating strips, and use a flashlight and light meter when necessary. NA Marking this is not an option for this item.
43. Proper Code Citation and Item Number Marked				IN/OUT This item is marked IN/OUT based on the violations that are observed during the inspection and how the REHS documents the code section that is violated on the inspection form. The REHS must use marking instructions to correctly identify corresponding items on the grade sheet and properly document all risk factor violations as either IN, OUT, NO, or NA. The REHS must record corresponding temperatures to support markings of the inspection report. NA Marking this is not an option for this item.
44. Item properly marked as a repeat violation				IN/OUT This item is marked IN/OUT based on how the REHS uses the information in the previous inspection form to verify a violation as a repeat violation. The REHS must clearly communicate the implications of repeat violations to the PIC and properly document by marking the “R” column on the inspection report for that corresponding item number. NA This item is marked NA when, after reviewing previous inspections, there are no repeat violations from the previous inspection.
45. Corrective Action Achieved, CDI noted				IN/OUT This item is marked IN/OUT based on how the REHS determines when corrective action is required (based on P or Pf designation). The REHS must recognize what qualifies as true correction during inspection, provide clear language explaining how correction was achieved, and mark the column for “CDI” on the inspection report for that corresponding item number. NA This item is marked NA when, after completing the inspection, there are no violations which require verification of correction through CDI.

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46. Verification required properly documented				IN/OUT This item is marked IN/OUT based on how the REHS recognizes when corrective action has not been achieved during the inspection and is required based on the severity of the violation (P or Pf). The REHS must clearly communicate the expectations of correction with the PIC, both verbally and on the inspection report, document in the correct column on the inspection report that verification is required ("VR") and provide a follow-up date that is within 72 hours for Priority violations and 10 calendar days for Priority foundation violations. NA This item is marked NA when, after completing the inspection, there are no violations which require verification of correction with a return visit or VR.
47. Enforcement Action properly taken				IN/OUT This item is marked IN/OUT based on how the REHS recognizes a pattern of non-compliance of a risk factor violation within the facility. The REHS must use inspection history to determine which enforcement action is most appropriate. The REHS must choose whether it is appropriate to issue an intent to suspend or immediate suspension. The REHS must provide proper and clear documentation of enforcement action and must clearly communicate with PIC what is being required and the consequences if compliance is not achieved. NA This item is marked NA when, after completing the inspection, there are no violations which require enforcement action.
48. Options for long-term control of risk factors explored				IN/OUT This item is marked IN/OUT based on how the REHS recognizes a pattern of non-compliance of a risk factor violation within a facility. The REHS must use inspection history to determine which risk factor violations need to be brought into compliance. The REHS must discuss with the PIC these options, which may include, but are not limited to: risk control plans, standard operating procedures, changes to equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP Plans. The REHS must provide proper and clear documentation of risk factor violations needing long-term control and must clearly communicate with the PIC what options are most appropriate and a time frame for implementing the options chosen. NA This item is marked NA when, after completing the inspection, there are no violations that demonstrate a history of non-compliance for risk factor violations.
49. Risk category and risk frequency verified				IN/OUT This item is marked IN/OUT based on how the REHS assesses the risk category of the facility as required by the rules and risk categorization chart. The risk category shall be determined by asking open-ended questions regarding menu and food preparation processes. When the risk category is not correct, the REHS must follow program policy to have risk category updated. NA Marking this is not an option for this item.
50. Correction of previous risk factor violations achieved				IN/OUT This item is marked IN/OUT based on how the REHS determines which risk factor violations were previously out of compliance and checks to make sure that these violations have been corrected. The REHS must review the previous inspection report(s) and intentionally focus time on discussing previous out-of-control risk factors to be marked IN. The REHS must inform the PIC when any previous out-of-control risk factors have not been corrected. NA Marking this is not an option for this item.
51. Exit interview conducted, and paperwork provided				IN/OUT This item is marked IN/OUT based on how the REHS conducts an exit interview and provides paperwork to the PIC. The REHS must invite the PIC to an exit interview to discuss inspection findings, including risk factors that were out of compliance, whether correction was achieved, and what the expectations are for verification visits, if applicable. The REHS is expected to communicate clearly, ask to make sure the PIC understands the inspection report and answer any questions raised by the PIC. The REHS must also provide either by paper copy or electronically, a copy of the inspection report before leaving the facility. If providing an electronic copy of the inspection report, the REHS must ensure that the PIC has received it and can view it before leaving the establishment to be marked IN. If an exit interview is requested and the PIC declines, the REHS should still be marked IN. NA Marking this is not an option for this item.

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Items Evaluated	IN	OUT	N/A	Marking Instructions
52. Inspection documentation clear and complete				IN/OUT This item is marked IN/OUT based on the clarity and completion of the inspection form, including demographic information, risk category, time in/time out, temperatures observed and required signatures. The REHS must, for every violation, list the appropriate code citation, a short description of the rule, and a statement of what was observed. For risk factor violations, the REHS must also document what corrective action was taken, or whether a verification visit will be required. If the inspection is handwritten, it must be legible, and all inspection reports should be free of spelling errors to be marked IN. NA Marking this is not an option for this item.
53. Paperwork filed properly and in a timely manner				IN/OUT This item is marked IN/OUT based on how the REHS files the inspection report into a database or filing system according to county or department policy. In absence of a county or department policy, they must be entered within 5 business days of the inspection. NA Marking this is not an option for this item.

Overall Rating of EHS	
Unacceptable <70%	
Needs Improvement 70-84%	
Acceptable ≥85%	

Form Instructions: 1) Only review a food service establishment that had at least one out of control CDC Risk Factor or Food Code Intervention documented on any of the two previous inspection reports (e.g. Unsafe Source, Inadequate Cooking, Improper Holding Temperatures(Hot or Cold), Time/Temperature Parameters not Met (Time as a control, date marking rapid cooling), Bare Hand Contact with Ready to Eat Food, Poor Personal Hygiene, Contaminated Food Contact Surface & Equipment, Consumer Advisory (when required), Demonstration of Knowledge by PIC, Employee Health). 2) Evaluator will place a "1" under IN, OUT, or NA based on the marking instructions in this document. 3) Instruction item #1 does not apply to Institution & Child Care facility inspections. 4) Evaluator will mark "OUT" if "IN" compliance status was not obtained per each items marking instructions.

Establishment Name:	**EHS Name:**	
	RS#:	
ID#:	**Inspection Date:**	
	Review Date:	
	Evaluator:	

GENERAL COMMENTS

LOCAL Review Comments

Items Marked Out	Comments

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

File Quality Assurance

Form Instructions: 1) Only review a food service establishment that had at least one out of control CDC Risk Factor or Food Code Intervention documented on any of the two previous inspection reports (e.g. Unsafe Source, Inadequate Cooking, Improper Holding Temperatures(Hot or Cold), Time/Temperature Parameters not Met (Time as a control, date marking rapid cooling), Bare Hand Contact with Ready to Eat Food, Poor Personal Hygiene, Contaminated Food Contact Surface & Equipment, Consumer Advisory (when required), Demonstration of Knowledge by PIC, Employee Health). 2) Evaluator will place a "1" under IN, OUT, or NA based on the marking instructions in this document. 3) Instruction Item #1 does not apply to Institution & Child Care facility inspections. 4) Evaluator will mark "OUT" if "IN" compliance status was not obtained per each items marking instructions.

Establishment Name:	**EHS Name:**	
	RS#:	
ID#:	**Inspection Date:**	
	Review Date:	
	Evaluator:	

Review Items

Items Evaluated	IN	OUT	N/A	Marking Instructions
1. Long term enforcement actions appropriately taken for P and Pf violations. Verification visits documented when required.				Mark "IN" if Verification Visit made within the required time frame as per NC Food Code and documented in the file. Mark "IN" if appropriate enforcement actions are taken for continuous P and Pf violations and appropriate form used (EX. Immediate Suspension, Intent to Suspend, NOV, Risk Control Plan, Training provided, etc) NA only if a verification was not required per code or if no P and Pf violations are observed during the record review. All Deductions are based on .2661 and internal procedures when applicable.
2. Temperature chart reflects a representative sample taken for IN/OUT markings of 12, 18, 19, 21, and 22				Marked "IN" if EHS documents a sufficient amount of food temperatures.
3. Review of previous inspection indicates that repeat violations are documented and points escalated appropriately & Half, full & zero deductions appropriate and total deductions accurate on inspection report.				Mark "IN" if EHS reviewed past inspection findings and acted on repeated or unresolved violations. Violations must be marked as "REPEAT" if they have not been corrected. Per DHHS a repeat violation occurs when the same code violation under a particular item number was cited on the last inspection report and is observed again during the inspection being reviewed. All Deductions are based on .2661 and internal procedures when applicable.
4. IN, OUT, NA, NO appropriately documented properly documented per DHHS Marking Instructions				Mark "IN" if EHS correctly documented the compliance status of each risk factor and intervention (i.e. IN compliance, OUT of compliance, Not Observed, or Not Applicable) through observation and investigation. (Compare to previous documentation in establishment file to evaluate consistency and ensure EHS is following marking instructions, etc.).
5. NC Food Code section is correctly cited per the NC Marking Instructions & Comments Clear and Adequate.				Mark "IN" if EHS cited the proper code provision for FBI risk factors and public health interventions. Provided public health significance and description of where the violation was observed, the corrective action (or VR required documented), and a brief description of the citation being violated. (Evaluate if the proper NC Food Code is cited and is properly placed on the inspection form.).
6. A specific Corrective Action is documented for any CDI noted for Priority or Priority Foundation violations				Mark "IN" if EHS obtained and documented appropriate on-site corrective actions, follow-up corrective actions, or if an enforcement action was taken for out-of-control risk factors and interventions at the time of inspection as appropriate to the type of violation. Corrective actions can include Regulatory Actions (Warning Letters, Requiring a Verification Visit, Permit Suspension or Intent to Suspend Actions, etc) or Voluntary Actions (CDI, voluntary destruction of products, issuing a risk control plan, and providing remedial training during the inspection, Verify by using subsequent inspection reports and written documentation in the facility files (Onbase and CDP).
7. Establishment Demographics Correct				Mark "IN" if the Inspection Date/Time, Establishment Name, Purpose of Visit, Waste & Water, Permittee, Physical/Mailing Address, ID Number, Status Code, Risk Category are verified as accurate and correct.
8. PIC Signature on inspection form and EHS Signature on inspection form				Mark "IN" if PIC's and EHS signature is present on the inspection form
9. Good Retail Practices Code Citations Properly Documented & Comments Clear and Adequate				Mark "IN" if Good Retail Practice violations are correctly cited. Findings, observations and discussions are accurately recorded.
10. Overall Interpretation of Laws, Regulations, and Policies				Mark "IN" if EHS interpreted and applied laws, regulations, policies and procedures accurately and correctly. (Evaluate if the EHS interprets state regulations, policies and procedures correctly and accurately.)

Form Instructions: 1) Only review a food service establishment that had at least one out of control CDC Risk Factor or Food Code Intervention documented on any of the two previous inspection reports (e.g. Unsafe Source, Inadequate Cooking, Improper Holding Temperatures(Hot or Cold), Time/Temperature Parameters not Met (Time as a control, date marking rapid cooling), Bare Hand Contact with Ready to Eat Food, Poor Personal Hygiene, Contaminated Food Contact Surface & Equipment, Consumer Advisory (when required), Demonstration of Knowledge by PIC, Employee Health). 2) Evaluator will place a "1" under IN, OUT, or NA based on the marking instructions in this document. 3) Instruction item #1 does not apply to Institution & Child Care facility inspections. 4) Evaluator will mark "OUT" if "IN" compliance status was not obtained per each items marking instructions.

Establishment Name:	**EHS Name:**	
	RS#:	
ID#:	**Inspection Date:**	
	Review Date:	
	Evaluator:	

Review Items

Items Evaluated	IN	OUT	N/A	Marking Instructions
11. Program File Review				Mark IN if the file complies with the following: 1) Current permit, including transitional conversion. A permit shall be properly made and written with clear and concise conditions (when necessary), 2) File has at least a letter from the County stating the plans were reviewed and were approved. Supplemental information such as an application, a menu and the set of plans are recommended, but are not required if adequate information is kept for approval, 3) If water or wastewater is conveyed through an on-site system, a copy of the operations permit shall be maintained. Records of water sampling and remediation (when required) are documented, 4) Inspection and re-inspection forms are present. If an inspection was completed and the form is missing from the file, this item is OUT. This item shall not be OUT based on compliance with inspection frequency, 5) The program shall maintain a complaint log and keep a copy of the complaint and response in the paper or digital file. The complaint form should document appropriate resolutions and/or actions and adhere to the complaint policy adopted by Environmental Health, 6) If an establishment has a variance approval, the letter shall be stored in the file.

Overall Rating of EHS Review:	
Action Required < 80%	
No Action Required ≥80%	

Mecklenburg County Environmental Health

Field Quality Assurance Marking Instructions

Version 1.2
October 11, 2021

NC QA Field Assessment MARKING INSTRUCTIONS

Uniform Retail Food Program Inspections

REHS Field Assessment

STATUS OF OBSERVATIONS:

IN/OUT Item is found in or out of compliance (**appropriate** compliance marking must be based on the description under each item number). This refers to the performance of the REHS during the inspection and is not related to the compliance status of the facility found during the inspection. The descriptions below should be used in conjunction with the NC Food Code marking instructions to determine performance compliance.

NA Not applicable (**NA** marking is made when the data item is NOT part of the REHS's assessment of the food service establishment.)

REHS: Registered Environmental Health Specialist (includes intern)

Prior to Inspection

1. Reviews (1-3) previous inspections

IN/OUT This item is marked **IN/OUT** based on the REHS's review of previous inspections prior to conducting the inspection. The review is to identify past risk factor violations, repeat violations and other items of concern such as use of TPHC, consumer advisory, variance and/or HACCP, and service to highly susceptible populations.

NA This item is marked **NA** if the REHS is doing an inspection on a newly permitted establishment that does not have previous inspections to review.

2. Awareness of permit conditions and supporting documents

IN/OUT This item is marked **IN/OUT** based on the REHS's awareness of the file documents including the permit, permit conditions, and other relevant documentation. If the REHS attempts to review file paperwork, regardless of what is available, this item should be marked IN. Items to review include, but are not limited to: the permit, permit conditions, menu, TPHC, variance and/or HACCP plans, non-continuous cooking processes, and onsite wastewater and water supply documentation.

NA Marking this is not an option for this item.

3. REHS properly equipped

IN/OUT This item is marked **IN/OUT** based on the REHS's access to equipment needed to conduct a risk-based inspection. To be marked **IN** compliance, the REHS must have: a calibrated thin-probe thermometer, chemical test strips, maximum-registering thermometer or temperature-indicating strips, alcohol swabs (or use facility sanitizer), and flashlight. The REHS must have access to applicable rules, marking instructions, inspection forms (or working field client), comment addenda, suspension/revocation

forms, embargo/product disposition forms, and grade cards.

NA Marking this is not an option for this item.

Conducting the Inspection

4. Properly identifies themselves

IN/OUT This item is marked **IN/OUT** based on how the REHS provides identification when entering the facility. To be marked **IN** compliance, the REHS must state their name, name of their department, and purpose of the visit clearly BEFORE entering the kitchen or other non-public areas of facility. The REHS must gain consent from a food service employee before entry. There may be varying levels of formality to this, but if there is acknowledgement of consent, this item should be marked **IN**.

NA Marking this is not an option for this item.

5. Menu Review

IN/OUT This item is marked **IN/OUT** based on the adequacy of the REHS's review of the menu during the inspection. The REHS must review products or procedures, identify items that may be cooled, served raw/undercooked or prepared using a specialized process. The REHS must inquire about process changes and additional food items not listed within the menu.

NA Marking this is not an option for this item.

6. Ask PIC to accompany during inspection

IN/OUT This item is marked **IN/OUT** based on how the REHS asks the person in charge (PIC) to accompany them during the inspection. If no employee is identified as the person in charge, the REHS shall invite an employee to accompany them on the inspection. This item should NOT be marked **OUT** if the invitation is declined.

NA Marking this is not an option for this item.

7. Verifies ownership, demographics

IN/OUT This item is marked **IN/OUT** based on how the REHS verifies or updates (if necessary) the ownership and demographic information with the PIC or owner during the inspection.

NA This item would be marked **NA** if the facility is known to be owned by a government entity (catered elderly nutrition site, public school lunchrooms, etc.).

8. Surveys facility; prioritizing risk factors

IN/OUT This item is marked **IN/OUT** based on how the REHS initially surveys the food establishment to determine which of the 5 FDA foodborne illness risk factors (improper holding temperatures, inadequate cooking, contaminated equipment, food from unsafe sources, and poor personal hygiene) should be prioritized. The REHS should identify any active preparation and should give priority to: bare hand contact/handwashing

violations, personal hygiene, receiving, reheating, cooking temperatures, and cooling items. This item shall be marked **OUT** if the REHS prioritizes static (not likely to change over time) over dynamic (likely to change quickly) processes or fails to ask open-ended questions regarding receiving, reheating, cooking and cooling during the survey.

NA Marking this is not an option for this item.

9. Appropriate Attire/Complies with facilities policies

IN/OUT This item is marked **IN/OUT** based on the REHS adhering to all applicable county or department dress codes and dressing in a professional manner. The REHS must meet the requirements of a food employee in Chapter 2 of the NC Food Code (e.g. not working when sick, clean outer clothing, effective hair restraint, no jewelry on hands or wrist except for a plain band, no artificial or painted fingernails unless single-use gloves are worn). If requested, the REHS must respectfully comply with additional policies/procedures required of the facility.

NA Marking this is not an option for this item.

10. Professional Rapport

IN/OUT This item is marked **IN/OUT** based on how the REHS maintains a professional demeanor throughout the inspection. The REHS must communicate in clear and effective language and provide reasonable solutions to violations observed. Examples of behaviors that would result in this item being marked **OUT** include, but are not limited to using unprofessional language, speaking unprofessionally to the PIC or other staff, yelling or raising voice in a disrespectful manner, making derogatory remarks, or displaying cultural insensitivity.

NA Marking this is not an option for this item.

Risk Factors/Public Health Interventions

11. Verifies demonstration, PIC duties, certification (Grade Sheet #1 & #2)

IN/OUT This item is marked **IN/OUT** based on how the REHS verifies the PIC is an ANSI-accredited Certified Food Protection Manager, assesses demonstration of knowledge per 2-102.11, and evaluates compliance with PIC duties listed in 2-103.11 of the NC Food Code. The REHS is expected to ask enough questions to assess the active managerial control within the facility.

NA Marking this is not an option for this item.

12. Employee Health; verifies vomit & diarrhea plan (Grade Sheet #3. #4, & #5)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses the employee health policy and the vomit & diarrheal event clean-up plan of the facility. The REHS must ask questions of the policy (e.g. reportable symptoms/illnesses, reinstatement of restricted/excluded employees, etc.) and verify that proper exclusion and restriction are in place at the time of inspection (no visible infected cuts, and no employees with vomiting, diarrhea present at time of inspection). The REHS shall verify how employees are informed of the establishment's employee health policy (e.g. use of form 1-B,

evidence of training, use of placards/training cards, etc.) and is encouraged to interview a random food employee to ensure they have been adequately informed of the requirements listed in the establishment's employee health policy. The REHS must confirm the establishment has a written vomit & diarrheal event clean-up plan that meets the requirements in 2-501.11. The REHS must communicate proper corrective actions when necessary.

NA Marking this is not an option for this item.

13. Good Hygienic Practices (Grade Sheet #6 & #7)

IN/OUT This item is marked **IN/OUT** based on the REHS's assessment of Food Employee's hygienic practices such as eating, tasting, drinking, or tobacco use in unapproved areas of the kitchen, and ensures no Food Employee is observed with eye, nose, and/or mouth discharge.

NA Marking this is not an option for this item.

14. Handwashing (Grade Sheet #8 & #10)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates handwashing in the facility. The REHS must actively watch employees during preparation and cleaning activities, determine when handwashing is required by the rules, and seek correction when improper handwashing takes place. All handwashing sinks in the facility must be evaluated for proper maintenance including accessibility, soap/hand drying method availability and appropriate signage.

NA Marking this is not an option for this item.

15. No Bare Hand Contact (Grade Sheet #9)

IN/OUT This item is marked **IN/OUT** based on the REHS's interpretation and application of the rules that apply to bare hand contact of food. The REHS must determine if RTE food that was observed being touched with bare hands will be heated to ≥145°F or served with no further processing. The REHS must seek correction from employees when improper bare hand contact of food is observed.

NA Marking this is not an option for this item.

16. Approved Sources (Grade Sheet #11, #12, #13, #14 & #17)

IN/OUT This item is marked **IN/OUT** based on how the REHS discusses/evaluates sources of food during the inspection, including receiving temperatures, shellstock identification requirements, parasite destruction record requirements, and the disposition of returned food by customers. The REHS is expected to seek an appropriate corrective action when food is suspected to be adulterated or unsafe.

NA Marking this is not an option for this item.

17. Food Storage and Protection (Grade Sheet #15 & #39)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses cross contamination

and food protection concerns during food handling, preparation, and storage (e.g. refrigeration, dry storage and others including customer self-service areas). The REHS must address and correct if necessary improper use of single-use gloves (e.g. changes in tasks that results in contamination, gloves that are torn and reused, etc.) and utensils/equipment as vehicles to contamination. The REHS must recognize improperly stored food (e.g. raw food above RTE food and/or unwashed produce, food uncovered except during cooling, unprotected food in customer self-service areas with no monitoring, etc.).

NA Marking this is not an option for this item.

18. Cleaning & Sanitizing Food Contact Surfaces (Grade Sheet #16)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates the cleaning and sanitizing of utensils and food-contact surfaces. The REHS shall discuss/evaluate procedures (including frequency) for cleaning, check sanitizer concentrations and efficacies (hot water temperature/chemical concentration) of dish machines where applicable, and verify proper procedures for utensil and equipment cleaning and sanitizing operations. The REHS must communicate proper corrective actions when necessary.

NA Marking this is not an option for this item.

19. Cooking (Grade Sheet #18)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates cooking processes during the inspection. If cooking is occurring, the REHS must return to the cook line to verify cook temperatures as they continue with other risk factors. To be marked **IN** compliance, the REHS is expected to measure a representative sample of foods that are in the process of cooking. The REHS must ask open-ended questions to determine cooking is occurring, communicate correct final cook temperatures to the employees and the PIC, and must follow through with providing information on proper corrective action when necessary. This item would be **OUT** if the REHS refers to a reheating temperature as a cooking temperature or assesses a cooked-to-order food for a final cook temperature and does not recognize the difference.

NA This item is marked **NA** when, during menu review, it is determined that no true cooking is occurring in the facility, OR, at the end of the inspection, there has been no cooking in the facility and no opportunity for the REHS to evaluate final cook temperatures.

20. Reheating (Grade Sheet #19)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses reheating of food for hot holding. The REHS must demonstrate knowledge of the proper critical limit based on the type (commercially packaged food vs. establishment pre-cooked/cooled food heated to hot hold) of reheating occurring. The REHS must demonstrate knowledge of the difference between cooking and reheating, ask open-ended questions to determine if reheating is occurring and determine the type of reheating taking place. The REHS must identify and communicate proper corrective actions when necessary. The REHS is **OUT** of compliance if they require an unnecessary corrective action on a food reheated for immediate service.

NA This item is marked **NA** when, during menu review, it is determined that no reheating is occurring in the facility OR, at the end of the inspection, there has been no reheating in the facility and no opportunity for the REHS to evaluate reheat temperatures.

21. Cooling Parameters (Grade Sheet #20)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses and correctly interprets the cooling time and temperature parameters that lead to a temperature violation for cooling. The REHS, through questioning, must determine early in the inspection if cooling (e.g. cook/cool, ambient cooling, cooling after preparation) is taking place, so at least (2) temperatures of the food can be measured to calculate a cooling rate and determine cooling compliance. The cooling calculation(s) should be used as a tool to help the REHS determine compliance with cooling. The REHS, through questioning, must be able to determine when the time/temperature parameters of cooling have not been met to communicate appropriate corrective actions.

NA This item is marked **NA** when, during menu review, it is determined that no cooling is occurring in the facility OR, at the end of the inspection, there has been no cooling in the facility and no opportunity for the REHS to evaluate cooling temperatures.

22. Hot Holding (Grade Sheet #21)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses hot holding temperatures in the facility. The REHS must demonstrate proper technique in assessing hot holding temperatures and must take temperatures of an appropriate representative sample of hot held foods during the inspection, accurately identify items that are out of compliance, and communicate appropriate corrective actions with the PIC when necessary.

NA This item is marked **NA** when, during menu review, it is determined that no hot holding is occurring in the facility OR, at the end of the inspection, there has been no hot holding in the facility and no opportunity for the REHS to evaluate hot holding temperatures.

23. Cold Holding (Grade Sheet #22)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses cold holding temperatures in the facility. The REHS must demonstrate proper technique in assessing cold holding temperatures and must take temperatures of an appropriate representative sample of cold foods during the inspection, accurately identify items that are out of compliance, and communicate appropriate corrective actions with the PIC.

NA This item is marked **NA** when, during menu review, it is determined that no cold holding is occurring in the facility OR, at the end of the inspection, there has been no cold holding in the facility and no opportunity for the REHS to evaluate cold holding temperatures.

24. Date Marking (Grade Sheet #23)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses the date marking system used in the facility. Through discussion of the establishment's date marking system, the REHS must be able to accurately identify foods that require date marking,

preparation/expiration dates, length of time allowed for date marking, foods that are exempt from date marking, and be able to communicate appropriate corrective actions with the PIC when necessary.

NA This item is marked **NA** when, during menu review, it is determined that there are no items within the facility that require date marking.

25. Time as a Public Health Control (Grade Sheet #24)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies foods that are being held using time as a public health control (TPHC). The REHS must ask appropriate questions to determine if foods are held using TPHC. The REHS must understand that written TPHC procedures do not need to be pre-approved. If TPHC is being utilized, the REHS must complete a field review of the written TPHC procedures provided. The REHS must also be able to communicate proper corrective actions when necessary.

NA This item is marked **NA** when, during menu review, it is determined that there are no items within the facility that are held using TPHC.

26. Consumer Advisory/Pasteurized Foods (Grade Sheet #25 & #30)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies foods that are being served raw or undercooked. The REHS is expected to ask open-ended questions to make sure the facility understands when a consumer advisory is required. The REHS must assess current consumer advisories that are present to ensure they are complete (disclosure/reminder). When menus do not include consumer advisories for items that are undercooked or contain raw ingredients, the REHS must be able to validate the presence of pasteurized foods and ensure that all requirements are met to serve these foods without a consumer advisory. The REHS must also be able to communicate proper corrective actions when necessary.

NA This item should not be marked **NA**. If the REHS asks appropriate questions and accurately determines that no consumer advisory is needed, the REHS should be marked **IN**.

27. Additives; chemicals (Grade Sheet #27 & #28)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies and/or addresses food additives used in the facility, as well as assesses chemical use and storage during the inspection. The REHS must properly enforce rules regarding chemical bottle labels, storage to prevent contamination (including medications), and appropriately discuss sanitizers or other chemicals that exceed the tolerance levels allowed by the CFR. The REHS must also be able to communicate proper corrective actions when necessary. The REHS must inquire about the use of food additives (e.g. food colorings, sulfites, nitrites/nitrates, etc.) in the establishment to be considered IN compliance.

NA Marking this is not an option for this item.

28. Recognizes HSP requirements (Grade Sheet #26)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies a highly susceptible population (HSP) and properly applies the definition. The REHS must ask questions to

determine if the HSP complies with provisions (e.g. juice, eggs, offering of raw/undercooked foods and raw seed sprouts, re-service of food) listed in 3-801.11. The REHS must also be able to communicate proper corrective actions when necessary.

NA This item is marked **NA** when, during menu review, it is determined this facility does not meet the definition of serving a highly susceptible population.

29. Recognizes Variance/HACCP (Grade Sheet #30)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses whether specialized processes are occurring in the facility. The REHS is expected to ask open-ended questions and be able to identify equipment that is indicative of a specialized process (e.g. vacuum sealer, immersion circulator, pH meters, starter cultures, pink salt, etc.). The REHS must also be able to properly communicate when a HACCP plan without a variance is needed, when a variance is required, and communicate proper corrective actions when necessary.

NA This item should not be marked **NA**. If REHS asks appropriate questions and accurately determines that no specialized processes are taking place, the REHS should be marked **IN**.

30. Verifies HACCP Plan (Grade Sheet #32)

IN/OUT This item is marked **IN/OUT** based on how the REHS determines the need of a HACCP plan for processes conducted in the facility and if the REHS properly reviews food operations and available records (e.g. HACCP plan components – CCPs, CLs, monitoring, corrective actions, etc.) for compliance. The REHS is expected to communicate proper corrective actions when necessary.

NA This item is marked **NA** when, during menu review, it is determined there is no HACCP plan implemented in this facility.

Food Temperature Control

31. Cooling Methods (Grade Sheet #33)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates cooling methods used in the facility, determines adequacy and communicates proper corrective actions (when necessary). The REHS must calculate cooling rates as part of their evaluation of cooling methods used in the establishment. The REHS must be able to determine if a facility's existing equipment provides adequate capacity for cooling, heating and holding.

NA This item should not be marked **NA**. If REHS asks appropriate questions and accurately determines that no cooling is taking place, the REHS should be marked **IN**.

32. Recognizes plant food cooking (Grade Sheet #34)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies and assesses plant food cooking in the facility. The REHS must communicate proper corrective actions when necessary.

NA This item is marked **NA** when, during menu review, it is determined there is no plant food cooking occurring in the facility OR, at the end of the inspection, there has been no plant food cooking in the facility and no opportunity for the REHS to evaluate.

33. Thawing Methods (Grade Sheet #35)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates methods of thawing used during the inspection. The REHS must provide clear information on approved thawing methods and communicate corrective actions when necessary. Adequate discussion of thawing practices when thawing is not occurring should result in the REHS being marked **IN**.

NA This item is marked **NA** when, during menu and facility review, it is determined there is no thawing occurring in the facility.

34. Thermometers available and accurate (Grade Sheet #36)

IN/OUT This item is marked **IN/OUT** based on how the REHS evaluates thermometers in use at the time of inspection. The REHS is expected to check air temperature thermometers on holding units and assess the accuracy (i.e. ~ 32°F in ice bath or ~ 212°F in boiling water) and functionality (e.g. probe type based on type of food served, intended use, etc.) of thermometers provided. The REHS must communicate proper corrective actions when necessary.

NA Marking this is not an option for this item.

Good Retail Practices

35. Water and Ice From Approved Sources (Grade Sheet #31)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses the water supply used in the facility. The REHS is expected to verify whether the water supply is a community or non-community system. If applicable, the REHS must verify that construction and sampling requirements have been met for wells being used by the facility. The REHS is expected to seek correction for “priority” and “priority foundation” violations when necessary.

NA Marking this is not an option for this item.

36. Food labeling, original container (Grade Sheet #37)

IN/OUT This item is marked **IN/OUT** based on how the REHS identifies and verifies that required food labels are correct. The REHS must check bulk/working containers of food, customer self-service packaged foods, and “grab and go”. When packaged foods require labeling, the REHS must follow State guidance regarding required ingredient and allergen information, understand which items require immediate correction or follow-up (items that are P, Pf) and provide accurate information on corrective actions for these items if found to be out of compliance. The REHS must verify that shellstock is being stored in its original container. The REHS must verify foods are accurately identified and honestly presented while in storage, display or service.

NA Marking this is not an option for this item.

37. Prevention of Contamination (Grade Sheet #38, #40, #41 & #42)

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses pest control (e.g. discussion needed regarding application methods, frequency of use, contracts, etc.) and insects within the facility, personal cleanliness of employees, wiping cloth use/storage, and proper washing of fruits and vegetables. The REHS is expected to seek correction for "priority" and "priority foundation" violations when necessary.

NA Marking this is not an option for this item.

38. Proper Use of Utensils (Grade Sheet #43, #44, #45 & #46)

IN/OUT This item is marked **IN/OUT** based on how the REHS addresses the storage and handling of clean utensils including in-use utensils, air drying, linen, single-service and single-use articles. The REHS appropriately identifies the use-limitations of cloth and slash-resistant gloves.

NA Marking this is not an option for this item.

39. Utensils and Equipment (Grade Sheet #47, #48 & #49)

IN/OUT This item is marked **IN/OUT** based on how the REHS addresses repair, materials/design/construction (e.g. properly certified/classified or 4-1/4-2 or equivalent), and intended-use of utensils and equipment. The REHS must verify warewashing facilities are maintained and operational, test strips are present in the facility and cleanliness of non-food contact surfaces. The REHS is expected to seek correction for "priority" and "priority foundation" violations when necessary.

NA Marking this is not an option for this item.

40. Physical Facilities Grade Sheet #50, #51, #52, #53, #54, #55 & #56)

IN/OUT This item is marked **IN/OUT** based on how the REHS addresses water availability, the plumbing system including backflow prevention devices, toilet facilities, refuse and waste disposal facilities, and physical facilities during an inspection. The REHS must address improper storage of employee belongings and lighting deficiencies. The REHS is expected to seek correction for "priority" and "priority foundation" violations when necessary.

NA Marking this is not an option for this item.

Setting Example

41. EHS washes hands as needed

IN/OUT This item is marked **IN/OUT** based on how the REHS washes their hands during the inspection, following the requirements of when to wash and how to wash as specified in Chapter 2 of the NC Food Code.

NA Marking this is not an option for this item.

42. Properly Uses Equipment

IN/OUT This item is marked **IN/OUT** based on how the REHS uses equipment required to complete an inspection. The REHS must clean and sanitize their thermometer properly before use and between foods (where required) to prevent cross-contamination, use chemical test strips according to instructions, verify operation of a hot water sanitizing dish machine (when applicable) by use of a maximum-registering thermometer or temperature indicating strips, and use a flashlight and light meter when necessary.

NA Marking this is not an option for this item.

Paperwork

43. Proper Code Citation and Item Number Marked

IN/OUT This item is marked **IN/OUT** based on the violations that are observed during the inspection and how the REHS documents the code section that is violated on the inspection form. The REHS must use marking instructions to correctly identify corresponding items on the grade sheet and properly document all risk factor violations as either IN, OUT, NO, or NA. The REHS must record corresponding temperatures to support markings of the inspection report.

NA Marking this is not an option for this item.

44. Item properly marked as a repeat violation

IN/OUT This item is marked **IN/OUT** based on how the REHS uses the information in the previous inspection form to verify a violation as a repeat violation. The REHS must clearly communicate the implications of repeat violations to the PIC and properly document by marking the “R” column on the inspection report for that corresponding item number.

NA This item is marked **NA** when, after reviewing previous inspections, there are no repeat violations from the previous inspection.

45. Corrective Action Achieved, CDI noted

IN/OUT This item is marked **IN/OUT** based on how the REHS determines when corrective action is required (based on P or Pf designation). The REHS must recognize what qualifies as true correction during inspection, provide clear language explaining how correction was achieved, and mark the column for “CDI” on the inspection report for that corresponding item number.

NA This item is marked **NA** when, after completing the inspection, there are no violations which require verification of correction through CDI.

46. Verification required properly documented

IN/OUT This item is marked **IN/OUT** based on how the REHS recognizes when corrective action has not been achieved during the inspection and is required based on the severity of the violation (P or Pf). The REHS must clearly communicate the expectations of correction with the PIC, both verbally and on the inspection report, document in the

correct column on the inspection report that verification is required ("VR") and provide a follow-up date that is within 72 hours (i.e. 3 calendar days) for Priority violations and 10 calendar days for Priority foundation violations.

NA This item is marked **NA** when, after completing the inspection, there are no violations which require verification of correction with a return visit or VR.

47. Enforcement Action properly taken

IN/OUT This item is marked **IN/OUT** based on how the REHS recognizes a pattern of non-compliance of a risk factor violation within the facility. The REHS must use inspection history to determine which enforcement action is most appropriate. The REHS must choose whether it is appropriate to issue an intent to suspend or immediate suspension. The REHS must provide proper and clear documentation of enforcement action and must clearly communicate with PIC what is being required and the consequences if compliance is not achieved.

NA This item is marked **NA** when, after completing the inspection, there are no violations which require enforcement action.

48. Options for long-term control of risk factors explored

IN/OUT This item is marked **IN/OUT** based on how the REHS recognizes a pattern of non-compliance of a risk factor violation within a facility. The REHS must use inspection history to determine which risk factor violations need to be brought into compliance. The REHS must discuss with the PIC these options, which may include, but are not limited to: risk control plans, standard operating procedures, changes to equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP Plans. The REHS must provide proper and clear documentation of risk factor violations needing long-term control and must clearly communicate with the PIC what options are most appropriate and a time frame for implementing the options chosen.

NA This item is marked **NA** when, after completing the inspection, there are no violations that demonstrate a history of non-compliance for risk factor violations.

49. Risk category and risk frequency verified

IN/OUT This item is marked **IN/OUT** based on how the REHS assesses the risk category of the facility as required by the rules and risk categorization chart. The risk category shall be determined by asking open-ended questions regarding menu and food preparation processes. When the risk category is not correct, the REHS must follow program policy to have risk category updated.

NA Marking this is not an option for this item.

50. Correction of previous risk factor violations achieved

IN/OUT This item is marked **IN/OUT** based on how the REHS determines which risk factor violations were previously out of compliance and checks to make sure that these violations have been corrected. The REHS must review the previous inspection report(s) and intentionally focus time on discussing previous out-of-control risk factors to be marked **IN**. The REHS must inform the PIC when any previous out-of-control risk

factors have not been corrected.

NA Marking this is not an option for this item.

51. Exit interview conducted, and paperwork provided

IN/OUT This item is marked **IN/OUT** based on how the REHS conducts an exit interview and provides paperwork to the PIC. The REHS must invite the PIC to an exit interview to discuss inspection findings, including risk factors that were out of compliance, whether correction was achieved, and what the expectations are for verification visits, if applicable. The REHS is expected to communicate clearly, ask to make sure the PIC understands the inspection report and answer any questions raised by the PIC. The REHS must also provide either by paper copy or electronically, a copy of the inspection report before leaving the facility. If providing an electronic copy of the inspection report, the REHS must ensure that the PIC has received it and can view it before leaving the establishment to be marked **IN**. If an exit interview is requested and the PIC declines, the REHS should still be marked **IN**.

NA Marking this is not an option for this item.

52. Inspection documentation clear and complete

IN/OUT This item is marked **IN/OUT** based on the clarity and completion of the inspection form, including demographical information, risk category, time in/time out, temperatures observed and required signatures. The REHS must, for every violation, list the appropriate code citation, a short description of the rule, and a statement of what was observed. For risk factor violations, the REHS must also document what corrective action was taken, or whether a verification visit will be required. If the inspection is handwritten, it must be legible, and all inspection reports should be free of spelling errors to be marked **IN**.

NA Marking this is not an option for this item.

53. Paperwork filed properly and in a timely manner

IN/OUT This item is marked **IN/OUT** based on how the REHS files the inspection report into a database or filing system according to county or department policy. In absence of a county or department policy, they must be entered within 5 business days of the inspection.

NA Marking this is not an option for this item.

20 Quality Elements Explanation

Uniform Retail Food Program Inspections

REHS Field Assessment

The 20 Quality Elements of an Inspection that are outlined in the FDA Retail Program Standards (Standard 4) are based on the observations made and documented on the field assessment form. These items will be auto-populated based on the observations made and will be determined by the following criteria:

I. Has required equipment and forms to conduct the inspection

IN This item is marked **IN** if #3 on the field assessment *REHS properly equippe*d is marked **IN**

OUT This item is marked **OUT** if #3 on the field assessment is marked **OUT**

II. Reviews the contents of the establishment file, including the previous inspection report, reported complaints on file, and if applicable, required HACCP plans or documents supporting the issuance of a variance.

IN This item is marked **IN** if #1 on the field assessment *Reviews (1-3) previous inspections* and #2 *Reviews permit conditions, TPHS, variance/HACCP* are both marked **IN**

OUT This item is marked **OUT** if either #1 or #2 on the field assessment is marked **OUT**

III. Verifies that the establishment is in the proper risk category and that the required inspection frequency is being met. Informs the supervisor when the establishment is not in the proper risk category or when the required frequency is not met.

IN This item is marked **IN** if #49 on the field assessment *Risk category and risk frequency verified* is marked **IN**

OUT This item is marked **OUT** if #49 on the field assessment is marked **OUT**

IV. Provides identification as a regulatory official to the person in the charge and states the purpose of the visit

IN This item is marked **IN** if #4 on the field assessment *Properly Identifies himself/herself* is marked **IN**

OUT This item is marked **OUT** if #4 on the field assessment is marked **OUT**

V. Interprets and applies the jurisdiction's laws, rules, policies, procedures, and regulations required for conducting retail food establishment inspections

IN This item is marked **IN** if all the risk factor/processes and food temperature control items, #11 - #34 on the field assessment, are marked **IN**

OUT This item is marked **OUT** if any item #11 - #34 on the field assessment is marked **OUT**

VI. Uses a risk-based inspection methodology to conduct the inspection

IN This item is marked **IN** if #5 on the field assessment *Menu review* and #8 *Surveys facility; prioritizing risk factors* are both marked **IN**

OUT This item is marked **OUT** if either #5 or #8 on the field assessment is marked **OUT**

VII. Accurately determines the compliance status of each risk factor and Food Code intervention (i.e. IN compliance, OUT of compliance, Not Observed, or Not Applicable)

IN This item is marked **IN** if all the risk factor/processes and food temperature control items, #11 - #34 on the field assessment, are marked **IN**

OUT This item is marked **OUT** if any item #11 - #34 on the field assessment is marked **OUT**

VIII. Obtains corrective action for out of compliance risk factors and Food Code interventions in accordance with the jurisdiction's policies

IN This item is marked **IN** if #45 on the field assessment *Corrective action achieved, CDI noted* is marked **IN**

OUT This item is marked **OUT** if #45 on the field assessment is marked **OUT**

IX. Discusses options for the long-term controls of risk factors with establishment managers, when the same out of control risk factor occurs on consecutive inspections, in accordance with the jurisdiction's policies.

IN This item is marked **IN** if #48 on the field assessment *Options for long term control of risk factors explored* is marked **IN**

OUT This item is marked **OUT** if #48 on the field assessment is marked **OUT**

X. Verifies correction of out of compliance observations identified during the previous inspection. In addition, follows through with compliance and enforcement in accordance with the jurisdiction's policies.

IN This item is marked **IN** if #47 on the field assessment *Enforcement Action properly taken* and #50 *Correction of previous risk factor violations achieved* are both marked **IN**

OUT This item is marked **OUT** if either #47 or #50 on the field assessment is marked **OUT**

XI. Conducts an exit interview that explains the out of compliance observations, corrective actions, and time frames for correction, in accordance with the jurisdictions policies

IN This item is marked **IN** if #51 on the field assessment *Exit interview conducted and paperwork provided* is marked **IN**

OUT This item is marked **OUT** if #51 on the field assessment is marked **OUT**

XII. Provides the inspection report and, when necessary, cross referenced documents to the person in charge or permit holder, in accordance with the jurisdiction's policies

IN This item is marked **IN** if #51 on the field assessment *Exit interview conducted and paperwork provided* is marked **IN**

OUT This item is marked **OUT** if #51 on the field assessment is marked **OUT**

XIII. Demonstrates proper sanitary practices as expected from a food service employee

IN This item is marked **IN** if #41 on the field assessment *EHS washes hands as needed* and #42 *Properly uses equipment* are both marked **IN**

OUT This item is marked **OUT** if either #41 or #42 on the field assessment is marked **OUT**

XIV. Completes the inspection form per the jurisdiction's policies (IE observations, public health reasons, applicable code reference, compliance dates.)

IN This item is marked **IN** if #52 on the field assessment *Inspection form documentation clear and complete* is marked **IN**

OUT This item is marked **OUT** if #52 on the field assessment is marked **OUT**

XV. Documents the compliance status of each risk factor and intervention (IN, OUT, NA, NO)

IN This item is marked **IN** if all the risk factor/processes and food temperature control items, #11 - #34, and #43 *Proper code citation and item number marked* on the field assessment, are marked **IN**

OUT This item is marked **OUT** if any item #11 - #34 or #43 on the field assessment is marked **OUT**

XVI. Cites the proper code provisions for risk factors and Food Code interventions in accordance with the jurisdiction's policies

IN This item is marked **IN** if #43 *Proper code citation and item number marked* on the field assessment is marked **IN**

OUT This item is marked **OUT** if #43 on the field assessment is marked **OUT**

XVII. Documents corrective action for out of compliance risk factors and Food Code interventions in accordance with the jurisdiction's policies.

IN This item is marked **IN** if #45 *Corrective action achieved, CDI noted* on the field assessment is marked **IN**

OUT This item is marked **OUT** if #45 on the field assessment is marked **OUT**

XVIII. Documents that options for the long-term control of risk factors were discussed with establishment managers when the same out of control risk factor occurs on consecutive inspections.

IN This item is marked **IN** if #48 on the field assessment *Options for long term control of risk factors explored* is marked **IN**

OUT This item is marked **OUT** if #48 on the field assessment is marked **OUT**

XIX. Compliance or regulatory documents (IE exhibits, attachments, sample forms) are accurately completed, appropriately cross-referenced within the inspection report, and included with the inspection report in accordance with the jurisdiction's policies.

IN This item is marked **IN** if all the items, #43 - #46, on the field assessment are marked **IN**

OUT This item is marked **OUT** if any item #43 - #46 on the field assessment is marked **OUT**

XX. Files reports and other documentation in a timely manner, in accordance with the jurisdiction's policies.

IN This item is marked **IN** if #53 on the field assessment *Paperwork filed properly and in a timely manner* is marked **IN**

OUT This item is marked **OUT** if #53 on the field assessment is marked **OUT**

Form Instructions: 1) Only review a food service establishment that had at least one out of control CDC Risk Factor or Food Code Intervention documented on any of the two previous inspection reports (e.g. Unsafe Source, Inadequate Cooking, Improper Holding Temperatures(Hot or Cold), Time/Temperature Parameters not Met (Time as a control, date marking rapid cooling), Bare Hand Contact with Ready to Eat Food, Poor Personal Hygiene, Contaminated Food Contact Surface & Equipment, Consumer Advisory (when required), Demonstration of Knowledge by PIC, Employee Health). 2) Evaluator will place a "1" under IN, OUT, or NA based on the marking instructions in this document. 3) Instruction item #1 does not apply to Institution & Child Care facility inspections. 4) Evaluator will mark "OUT" if "IN" compliance status was not obtained per each items marking instructions.

Establishment Name:	**EHS Name:**	
	RS#:	
ID#:	**Inspection Date:**	
	Review Date:	
	Evaluator:	

GENERAL COMMENTS

LOCAL Review Comments

Items Marked Out	Comments

LOCAL Review Comments

Items Marked Out	Comments



Appendix F

Part III: Baseline and Program Assessment Foodborne Illness and Emergency Response

Content includes:

- **F1: Environmental Health Complaint List at a Glance**
- **F2: EHF02 – General Complaint and Service Request Investigations Policy**
- **F3: EHF03 – After Hours Response**
- **F4: Investigative Expectations**
- **F5: EHF08 – Foodborne Illness Policy**

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Types of Requests

Type of Service Request	Response Time
Foodborne Illness Complaints	
Confirmed Foodborne Illness	• Category 4: More than one physician and/or laboratory confirmed case of foodborne illness in restaurant patrons or one or more physician and/or laboratory confirmed cases of foodborne illness in food service workers. (Same Day) • Category 3: Single physician and/or laboratory confirmed case of foodborne illness in a restaurant patron (i.e. CD Referral). (End of Next Business Day Unless Otherwise Instructed)
Unconfirmed Foodborne Illness	• Category 2: More than one unrelated case of illness reported with symptoms generally associated with a foodborne illness and with a common point of origin. (End of Next Business Day) • Category 1: Single unconfirmed case of illness in a patron or foodservice worker with symptoms generally associated with a foodborne illness and attributed to a food service facility. (Response required within 3 working days)
Other Request with On-site Response within 7 Days	
• Adulterated Food • Animal on Premises • Bad Food Handling • Grade Card Not Posted • Illegal Operations • Improper Handwashing • Insanitary Conditions – Interior or Exterior • Insects/Rodents • Interrupted utilities • No Hair Restraints • Odor Problems • Undercooked Foods • Hot water Violations • Fire Call Response • Initial Inspections • New Ownership Request • Re-Evaluation Request (Re-grade) • Track Transitionals • Plan Review (Various)	

Mecklenburg County Health Department
Food and Facilities Sanitation Policies and Procedures Manual

Environmental Health Division **EHF-02**
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General Complaint and Service Request Investigations

Origin: February 1999
Reviewed: March 2006, June 2006, June 2007, June 2008, June 2009, June 2010, June 2016, November 2017
Revised: March 2006, June 2006, September 2009, September 2010, January 2011, May 2013, June 2014, April 2015, July 2016, August 2018, August 2019, August 2020, August 2021, August 2022, August 2023, August 2024, **August 2025**
References: NCGS 130A-41; 10A NCAC 46 .0213

POLICY: A service request will be generated when the Department receives a complaint or service request related to lead poisoning and prevention, food service, lodging, school, institution, child care facility, public pool or spa, tattoo artist, or other entities regulated by the Environmental Health Division of the Mecklenburg County Health Department. Complaints and service requests will be investigated, and corrective actions implemented in the case of substantiated requests in accordance with procedures. Complaints or service requests that do not fall into an area regulated or addressed under State or local Environmental Health rules will be referred to the appropriate agency or investigated per the direction of Public Health management. If no agency is listed, the caller will be referred to 311. Employees will respond to requests and complaints in accordance with complaint and service request procedures.

PURPOSE: To ensure a consistent and complete response to and investigation of service requests and general complaints from the public regarding permitted food, lodging, school, institutional, childcare facilities, public swimming pools and spas, tattoo artists, and lead paint poisoning and prevention.

General Complaint and Service Request Investigations

Policy Assigned To: Stephen Graham

Approved by:

Chrystal Swinger, REHS
Environmental Health Director

Jeremy Michael, REHS
Program Manager, GWS/PEHS

Amber Daniels, REHS
Program Manager, Planning and Support Services Sanitation

Stephen Graham, REHS
Program Manager, Food & Facilities

General Complaint and Service Request Investigations

PROCEDURES:

I. Service requests and complaints received by the Division are to be responded to, onsite, within 7 calendar days of receipt with more serious complaints, such as foodborne, vector-borne, or waterborne illness complaints, receiving same-day or next-day service. (Compliance with the 7-day response requirement will be deemed met if 90% of requests are responded to within the required timeframe.) The complaint information must be entered into the complaint database immediately so as to avoid a delay in assignment to the Environmental staff. Exceptions to the 7 calendar day response requirements may include the following:

a. S01 – Administrative Request
b. S02 – Assigned Inspection
c. S03 – Construction Final
d. S05 – Educational Presentation
e. S07 – Initial Inspection
f. S11 – Re-Evaluation
g. S13 **–** Track Transitional Permit
h. S17 – Plan Review, In House
i. S18 - Track Approved Construction
j. S22 – Renewal Inspection
k. S99 - Other Service

II. In some cases, an exception to onsite response can be made as noted in Appendix B. For complaints that are clearly outside of this Department's jurisdiction; it will be considered sufficient for the ES (Environmental Health Specialist) to respond by a phone call to the facility to discuss the potential consequences of the practices, or to the complainant to refer them to the appropriate agency or party to investigate their complaint.

III. A complaint is generated when a member of the public calls with specific concerns about a permitted facility or illegal activities that would fall under this Department's jurisdiction. When a complaint is received, it will be

assigned a complaint category code by an ASA (Administrative Support Assistant) and entered into the inspection database for investigation on the same day that the complaint or service request is received. If the ASA has questions as to which category a complaint belongs, he/she should contact the Administrative Support Supervisor or in the absence of the Administrative Support Supervisor, an Environmental Supervisor or Program Manager. Upon entry of the complaint, an email will be automatically generated to the ES. ES will monitor their service request log daily during normal workdays. The ES must take the following actions regarding the complaint.

a. If additional information is needed to clarify the complaint, an attempt will be made to contact the complainant by telephone prior to the investigation, but an on-site visit will not be delayed within the required seven-day time frame, where applicable.
    i. Service request code MC-PRA1 (Pre-Response Action (Non-Productive) will be used to document this activity regardless of whether ES speaks with the complainant or not.
b. The ES will investigate the complaint using, at minimum, the contents of the service request as a general guide. ES will confirm or deny the complaint and educate available workers within the facility as to proper procedures according to the rules. Encourage best practice in addition, where applicable.
c. Details relative to a complaint investigation, including dates, a record of phone calls, corrective actions warranted, the name of onsite contacts during visits, and referrals to other agencies, will be documented by the ES as they occur.
    i. Service request activity code MC-SRA (SR Action (Service Request) will be used to document these activities.
d. Corrective actions shall be verified in cases of valid complaints and confirmed outbreaks of illness and documented accordingly.
    i. If NC Food Code violations related to the complaint investigation are observed, the ES will document the observations on either an official inspection report or a visit sheet in addition to the service request record.
        1. When compliance issues are observed during the investigation, a copy of the visit sheet or inspection report will be left with the person in charge.
e. Any laboratory investigation reports will be attached to the service request.

f. When contact cannot be made with the complainant, the ES must provide notification via, phone voicemail, email or posted mail indicating that our investigation has been completed and provide information on how the complainant can contact the ES for the results, if an address was provided.
g. After investigating a complaint, attempts must be made to contact the complainant (except anonymous caller) via a phone call or email and advise them of findings and actions taken. The results of an investigation may be left vial voicemail or email as long as it does not contain confidential as referenced in Health Department Administrative Policy- Confidentiality and HIPPA protected information.
h. When closing the complaint, all attempts and/or contacts with the requestor to reveal the results of the investigation must be documented.
i. Requests for which no further action is required must be closed in the complaint database by indicating by checking the appropriate boxes that the request has been resolved and that the complainant has been notified.
    i. Resolved ?: This box is checked when the last activity is entered for the service request.
    ii. Notified?: This box is checked when the last activity is entered for the service request, even if the complaint is anonymous.
    iii. Unsubstantiated?: This box is checked when the last activity is entered for the service request and the ES is certain a complaint made on a facility was not factual. If, the request is not a complaint or if the ES believes a violation may have occurred this box will not be checked.
j. In cases where the complainant is dissatisfied with the actions taken by the ES, the ES shall notify their immediate supervisor, and the supervisor will contact the complainant to determine their expectations. The supervisor and Program Manager will determine whether additional action is required or warranted. If additional action is warranted, the ES and complainant will be advised. If additional action is not warranted, the Program Manager will contact the complainant to discuss the Health Department's action taken and the limits of authority.
k. In cases where the complainant is still dissatisfied with the services received, the Program Manager will advise the complainant that the

issue will be referred to the Environmental Health Director for final disposition.

l. Service request record entry into CDP IMS must be completed in a timely manner on the day of the action, but no later than the next business day.

Appendix A - Complaint Referral Guide

Type of Complaint	What to Do?
Abandoned/Junk Cars	▪ City: refer to Code Enforcement at 311. ▪ County: refer to Residential Technical Services at 311.
Animals	▪ Domestic or aggressive: refer to Animal Control at 311. ▪ If nuisance wildlife, see WILDLIFE. ▪ Dead animals in City only: refer to 311. ▪ Dead animals in unincorporated areas if in road or right of way NCDOT 919-715-7000
Animals Bites	▪ Refer to Animal Control at 311.
Asbestos	▪ Refer to Air Quality at 311.

General Complaint and Service Request Investigations

Bakery (in-home)	• Baking cakes, pies, cookies only: refer to NC Department of Agriculture and Consumer Services (919) 733-7366.
Barber Shop	• Refer to State Board of Barber Examiners (919) 814-0640
Bats	• No government agency handles these complaints, but if there exposure to a bat refer to Mecklenburg County Communicable Disease
Beauty Shops & Nail Care Salons	• No local regulations for this type of facility. Refer to NC Board of Cosmetic Arts in Raleigh (919) 736-6123
Bees	• No government agency handles this type of request. Refer to Mecklenburg County Bee Keepers Association http://www.meckbees.org/ or to a private pest control company for information and assistance.
Birds	▪ No government agency handles this type of request. Refer to Animal Control for information at 311or NC Wildlife Commission (919) 707-0050. ▪ Nuisance waterfowl - see WILDLIFE..
Body Piercing	▪ There are no regulations for body piercing in NC
Building Permits	▪ Refer to LUESA Permit Writing 311.
Carbon Monoxide	▪ Alarm inquiries in the city: refer to City Fire Prevention (704) 336-2101. ▪ Alarm inquiries in the county: refer to County Fire Marshall (980) 314-3070. ▪ Code compliance should be referred to: ▪ Child Care Team Supervisor if child day care for home day care. ▪ If residential housing, refer to Tim Dutcher at (980) 314-1631.
Consumer Product Safety Commission	▪ US Government (800) 638-2772
Contaminated Food	▪ Packaged items (grocery store, canned goods, etc.): refer to NC Department of Agriculture and Consumer Services (919)-733-7366. ▪ Restaurant/deli, etc.: write up service request or take name and number for a call back.
Daycare (Child Day Care)	▪ Plan review: 12 or less children: refer to Child Care Team Supervisor ▪ Plan review 13 or more children: refer to Plans Examiner on Call for the week. ▪ General questions: refer to the above individuals. ▪ Complaints (Sanitation-related): write up service request or take name and number for a call back. ▪ Complaints (Care-related): refer to NC Division of Child Development (800) 859-0829.

General Complaint and Service Request Investigations

Child Care Abuse/ Neglect at Childcare Establishment	▪ Refer to NC Division of Child Development (800) 859-0829.
Day Care Home (5 or fewer children)	▪ Inquiries: refer to 980-314-1620 or take name and address to mail a registration packet. ▪ Complaints: take service request or take name and number for a call back.
Dead Birds	▪ General questions: see WILDLIFE.
Demolition Permits	▪ Refer to LUESA Permit Writing 311.
Diseases	▪ Refer to Communicable Disease Program (980) 314-9211.
Drainage Problems	▪ Refer to Storm Water Services at 311 for both City and County concerns. ▪ Mosquito-related complaints: write up service request or take name and number for call back.
Dumpsters	▪ If related to placement in CITY: no health regulations; refer to Code Enforcement at 311. ▪ If related to solid waste or odor complaint, see GARBAGE COMPLAINTS.
Fencing Around Pools (Complaints)	▪ Residential: take service request or take name and number for a call back. ▪ Commercial: take service request or take name and number for a call back.
Fleas	▪ See FLIES. If associated with an animal, refer caller to their veterinarian.
Food Questions	▪ Restaurant or other permitted food service facility: refer to F&FS Environmental Supervisor based on territory assignment list. ▪ Temporary Food Establishment at carnival: refer to Environmental Plans Examiners. Route to main office 980-314-1620 for Plans Examiner on call for the week.
Garbage Complaints	▪ City or County: refer to Code Enforcement at 311. ▪ If complaint is regarding a restaurant or other permitted food service facility, take a service request for F&FS.
Grass, High	▪ City: refer to Code Enforcement at 311. ▪ County: few regulations-Refer to311.
Gym Sanitation Complaints	▪ Currently, there is not a government entity that regulates Gyms unless they sell food or have a public swimming pool.

General Complaint and Service Request Investigations

Hazardous Waste	▪ Refer to NC DEQ 877-623-6748.
Housing Complaints	▪ City/County: refer to City/County Customer Service at 311.
Insects	▪ In general, no government agency handles this type request. Caller may get information from local college Biology department (i.e. UNCC) or from private pest control company.
Landfills	▪ Regulated by LUESA Solid Waste Services 311.
Lead Questions	▪ Refer inquiries to Sr. EHS assigned to lead paint investigations
Lice Information	▪ Refer to Communicable Disease (980) 314-9211. There is no effective environmental treatment.
Mice	▪ City/County: if problem in multi-family refer to Customer Service at 311. ▪ If problem in any other setting (SF, Commercial, etc.): No regulations. No government agency provides treatment; information given out by PEHS. Refer to Tim Dutcher at (980) 314-1631.
Mold	▪ General referrals go to Environmental Protection 311. ▪ Schools/Child Care/Food Service/any establishment we regulate: take service request and assign to EHS based on territory assignment
Mosquitoes	▪ Complaint: write up service request. ▪ Questions: refer to James Bjorneboe (980) 314-1623
Moving Structures	▪ See DEMOLITION PERMITS.
Nursing, Rest Homes	▪ Complaints (sanitation issues): take service request or name and number for call back. ▪ Complaints (abuse, neglect): refer to DHHS, Health Service Regulations Section 919-855-4500
Odors	▪ There are no Health regulations specifically dealing with odors. If the odor is associated with a manufacturing facility, Air Quality may be able to assist 311. ▪ Solid Waste associated: see GARBAGE COMPLAINTS. ▪ Animal care related: see ANIMALS. ▪ Dumpster associated with restaurant: take service request or name and number for call back.
Pesticide Questions	▪ Use regulated by NC Department of Agriculture, Pesticide or Structural Division in Raleigh at 919) 733-6100.

General Complaint and Service Request Investigations

	▪ General questions may be directed to Tim Dutcher (980) 314-1631.
Plan Review	▪ Food service: refer to Environmental Plans Examiners at 980-314-1620 and route to Plans Examiner on call for the week. ▪ Child Care (more than 12), swimming pool, institutions: refer to Environmental Plans Examiners (980) 314-1620. Childcare (12 or less): refer Child Care Team Supervisor ▪ Temporary Events: refer to Environmental Plans Examiners (980) 314-1670
Public Pools	▪ Plan review: Refer to Plans Examiner on call for the week at 980-314-1620 ▪ Permitting: refer to Katie Rudisill (980) 314-1656 ▪ Complaints: take service request or name and number for call back.
Rabies	▪ Refer to Communicable Disease Program.
Raccoons	▪ No government agency will trap. Refer to Animal Control at 311 for general information. Refer to Communicable Disease Program if rabies related questions/concerns. Contact private trapping company (i.e. Carolina Trap, Critter Control) for control.
Residential Care Facilities	▪ See GROUP HOME INSPECTIONS.
Restaurants, New	▪ Refer to Environmental Plans Examiners (980) 314-1620 on call for the week for plan review or permitting questions. ▪
Roaches	▪ City and County: if in multi-family dwelling, refer to Customer Service at 311. ▪ Other settings- No government agency handles unless related to a restaurant, hotel, meat market, hospital or other facility regulated by F&FS or PEHS. ▪ For unregulated facilities: refer to private pest control company.
Seafood Market Inspections	Refer to NC Department of Agriculture/Food and Drug Protection Division (919)733-7366. If concern is with shellfish, refer to NC Division of Marie Fisheries.
Septic Tanks	▪ Questions and all other inquiries: refer to GWS Program at 980-314-1680
ServSafe	▪ Also known as, Certified Food Protection Manager Training • Not provided by the County. Refer to F&FS home web page for Food Service Operator Resources link
Sewage Back-up	▪ Permitted restaurant or other facility: This constitutes an Imminent Hazard and the assigned staff person is to be contacted in the field for immediate investigation.

General Complaint and Service Request Investigations

	▪ Non-permitted facility: refer to Charlotte Water Wastewater Collection Department via 311
Snakes	▪ No government agency handles. Refer to private company (i.e. Critter Control) for assistance.
Spiders	▪ See INSECTS.
Stream Pollution	▪ Refer to Environmental Protection 311.
Stump Holes	▪ Refer to Customer Service at 311
Swimming Pools	▪ See POOLS (PUBLIC/COMMERCIAL) or POOLS (RESIDENTIAL). Route to Tim Dutcher, 980-314-1631
Tanning Beds	▪ Regulated by NC Division of Radiation Protection (919) 571-4141
Tattoo Facilities	▪ Refer to Tim Dutcher (980) 314-1631. Underage complaints should be directed to Charlotte-Mecklenburg Police (311).
Temporary Food Establishments	▪ Food service establishments operated in conjunction with carnivals and other public gatherings generally require a permit before beginning operation. Refer to Environmental Plans Examiners (980) 314-1620.
Termites	▪ No direct government services. Contact private pest control company.
Ticks	▪ No government control programs. Medical questions should be referred to Communicable Disease Program. If related to animals, refer to a private veterinarian.
Tire Disposal	▪ City or County: refer to Customer Service at 311. ▪ If landfill related, refer to LUESA Solid Waste Services 311. If complaint, see GARBAGE COMPLAINTS.
Traffic Signal Out (State-maintained Roads)	▪ Refer to NC Department of Transportation (704) 596-6900
Trash	▪ See GARBAGE COMPLAINTS.
Trees	▪ Refer callers to Customer Service at 311 or City Charlotte Tree Management at (704) 336-4262.

General Complaint and Service Request Investigations

USDA Meat & Poultry Hotline	▪ Obtain information on safe handling and cooking of meat and poultry and prevention of foodborne illness at (800) 535-4555.
Vegetation	▪ Vines/Shrubbery: no regulations in city or county. ▪ Also, see GRASS, HIGH.
Wasps, Yellow Jackets, Hornets	▪ No government agency handles this type request. See INSECTS.
Water Testing (Wells)	▪ Refer to GWS Program 980-314-1680 unless well is located at a facility permitted by F&FS. If at a permitted facility, refer to 980-314-1620 and assign request to EHS based on territory assignment list.
Water/Sewer Questions	▪ City: refer to Charlotte Water at 311 ▪ Septic Systems: see SEPTIC TANKS.
Well Questions	▪ Refer to GWS Program at 980-314-1620.
West Nile Virus	▪ See MOSQUITOES.
Wildlife	▪ No local nuisance wildlife response; if diseased or nuisance, contact Animal Control at 311 or refer to US Fish & Wildlife at (919) 856-4520 (#21). ▪ If enforcement-related (e.g. pesticide killing), refer to NC Wildlife Commission (919) 707-0010 or (800) 662-7137
Wood	▪ Fallen trees/firewood: few regulations. Refer to Customer Service at 311. ▪ Discarded construction debris: refer to Customer Service at 311

Appendix B - Response to Complaints and Service Requests

General Complaint and Service Request Investigations

F01 **Adulterated Food**

- On site investigation includes the following:
- Identify and investigate by a walk thru, the processing steps from receiving to service area for the food item in question to identify potential for adulteration source. Processing steps may include refrigeration, preparation by designated persons in designated areas.
- Discuss with person in charge about any abnormal circumstances during the time that the complaint was lodged. Discuss observations during visit and any changes warranted as well as follow through with the facility's staff.

F02 **Animal on Premises**

- Onsite investigation includes the following.
- Discussion with person in charge as to the facilities allowances and/or policies regarding animal on premises i.e. dogs on patios.
- Complete a walk thru of facility to see if facility is in violation during your visit.
- Inform of the state regulations and the prohibition of animals except where rule makes allowance for service animals, etc.

F03 **Bad Foodhandling**

- Onsite visit is warranted in most cases. Exceptions are considered on a case by case basis such as no hair restraints; handling money and food without handwashing. These can be addressed over the phone with supervisor's approval.
- During onsite visits the ES (Environmental Specialist) will make person in charge aware they are investigating a potential complaint and ask to complete observation of the area of question where the behavior may be observed.
- After reasonable span of time for observation, ES will confirm the poor food handling allegation, intercede and gain compliance. If confirmation is not obtained the ES will educate person in charge as to the potential for problem, why it is a problem and preventative measures.
- ES may question person in charge about completed or required employee training to ensure compliance is obtained.

F04 **Confirmed Illness Referral (CD)**

- Note: these generally require immediate response (within 24 hours of receipt). ASA (Administrative Support Assistant) will make contact with field staff or Environmental Supervisor if employee is not on duty, to make them aware of

the service request and necessary information in addition to entering information into the complaint database. See EHF-05 After Hours Response for communicable disease investigation requests received on county holidays or weekends. See EHF-07 for actions required when request is received. Investigation details will be documented on the service request.

- ES will send a final report of their findings to the applicable CD nurse. This documentation can be on a visit sheet or on the service request form in CDP.

F05 **Unconfirmed illness Reported**

- This complaint may evolve into a confirmed illness by definition if two or more people who do not know one another have dined at the same facility, had similar or same exposures, etc. during the same time period and report to the Health Department. See EHF-07 for actions required when request is received. Investigation details will be documented on the service request.

F06 **Grade Card Not Posted**

- Make on site visit to investigate validity of complaint. If grade card is found to be in compliance, proceed with standard policy on completion of complaint.
- If investigation reveals grade card has been altered in any manner since time of placement by the ES, then visiting ES will speak with person in charge to make them aware of that the grade card is a public document and must be posted according to the current regulations and the General Statutes.
- Replace the grade card as necessary, issue an intent to suspend the permit If this is a reoccurring issue at the establishment. Not all cases will warrant an intent to suspend. Speak with a supervisor if necessary.
- When a facility reinspection has been requested and it is determined that the sanitation grade card has been changed from where posted (missing grade card), it is the policy of this Department that the reinspection will not be conducted at that time unless delaying the reinspection would cause us to be out of compliance with the requirement that a reinspection be conducted within 10 days of the request.
- If second violation (or more), discuss the option for an ITS or Immediate suspension with your supervisor.

F07 **Groundwater Referral**

- This type of request may require consultation with a supervisor or other person within management to determine most effective course of action based on location and severity.

- To be determined: if facilities affected are permitted or regulated by Health Department. If location in question is a regulated facility, they may have to obtain other approved water source or cease operation. If not, we must assure that they have been properly notified in writing of contamination of well and recommendations for bottled water, bagged ice, etc. ES will review maps and field book to determine whether or not there are other food, lodging, public pools, childcare, schools, or institutional facilities in the vicinity that may need to be monitored. Include Pushcarts and Mobile Food Units that may operate in conjunction with a commissary if affected
- Assure compliance with water quality standards before request is resolved.

F08 **Illegal Operation**

- Environmental Health's priority is completing mandated inspections and responding to reports of communicable diseases in regulated establishments. Staff will respond to complaints when received from the public in the following manner.
- ES will incorporate Appendix D if food related, when conducting investigations.
- When the operation is child care related, ASA or ES will refer the complainant to the Division of Child Development and Early Education (DCDEE). DCDEE has regulatory authority to investigate illegal child care providers.
- Date, time, location, type of food being sold (if applicable), and any specific vehicle information (if applicable) will be collected by ASA (or EHS if collecting information for a complaint), and a service request will be created. Assignments are based on the territory and location of the non-permitted vendor.
- This request requires an onsite response within 7 days and documenting findings in the assigned service request.
    - However, a response may exceed the 7 day requirement if there is a need to coordinate an onsite response with another party or if the vendor's next known date of operation is outside of the 7 day window. When this occurs, the ES will document a productive activity on the service request for the vendor.
- ES will investigate the complaint based on the time and day of the week the complainant indicates the illegal vendor is in operation. When operation information is not available, ES will investigate on at least 2 varying dates/times of the week.
- When the operation location is potentially unsafe or inaccessible during routine business hours, as confirmed with a supervisor, the ES will work with another ES, Senior ES, Supervisor, or Program Manager or involve the police.

- When an illegal food vendor is operated in a residential setting, complete an onsite visit based on the time and location of the alleged illegal food operation days. For a residential setting, an onsite visit may include a drive-by of the property to view any food service activity on the exterior of the property. Or, if evidence of food sales from social media is obtained, an onsite visit may not be necessary. The EHS is not required to investigate activities inside the premises. Zoning and Code Enforcement has the authority to investigate code violations inside the interior of a home. ES will notify Zoning and LUESA Code Enforcement if there is evidence that food is being prepared on the property. Notification to both agencies is achieved by calling 311 and filing a complaint.
- When the operation is a mobile food, push cart, or tent type set up, the ES will record as much applicable information about the vendor. (Date of incident, Action Taken, Address of Incident, Operator Name, Type of Operation, Vehicle Tag number, Vehicle make/model, color, operator's physical address, etc., on the NOV Tracking spreadsheet in OneDrive.
- If an illegal food service operation refuses to cease operation or has more than one NOV, as indicated in CDP IMS or on the NOV Tracking spreadsheet, the ES will work with their supervisor to issue a criminal summons for the operator, see section 5 in Appendix D. ES assigned Supervisor will contact assigned County Attorney before beginning summons process.
- The applicable program manager must approve surveillance for non-permitted food vendors on weekends.

F09 **Improper Handwashing**

- Onsite investigation to observe worker activity. Ensure that efforts are made to enforce hand washing procedures and required frequencies. ES will correct any improper handwashing observed. Correct handwashing is demonstrated as well as explained. Person in charge agrees to further educate and reinforce with workers not present during visit.

F10 **Improper RTE Handling**

- Onsite investigation to observe worker activities in correspondence with lodged complaint.

F11 **Insanitary Conditions – Interior**

- Onsite investigation for observation into areas of concern. Evaluate all areas of facility which would correspond with lodged complaint.

F12 **Insanitary Conditions – Premises**

- On site investigation for observation into area of concern.
- If other properties under our authority are contributing to insanitary conditions, address and document in the complaint. If warranted, additional, separate service request may be generated to track individual business.
- If contributing facilities are not regulated by HD, when justified concerns overlap with other agencies or sections or come under their jurisdiction, follow through with a referral to appropriate agency.

F13 **Insects/Rodents**

- On site investigation into areas applicable. ES will look for presence of pests as well as investigate potential nesting and harborage areas. ES will address concerns observed and noted to be linked with insects and rodent problems such as old equipment and debris outside the back doors of facilities; excessive storage of cardboard; improper cleaning; unsealed spaces between walls and wall coverings; holes in cove base etc.

F14 **Interrupted Utilities (no water, no hot water, no power)**

- Administrative staff receiving an intake call for interrupted at a regulated establishment, in addition to generating a service request, will contact the applicable EHS and Supervisor via text or phone and notify about the situation.
- On site investigation will be made to determine the extent of outage and the potential need for permit action in establishments holding NC DHHS permits. See EHF06 Enforcement Actions for procedures.

F15 **No Hair Restraint**

- Review file for facility to see if there is a pattern of violation. Without special circumstances surrounding the lodged complaint, it will be considered acceptable practice to contact facility by phone; speak with person in charge. Inform facility of the complaint and regulations governing when hair restraints are to be worn.

F16 **Odor Problem**

- On site visit to check permitted facility for source of odor problem. Where odor is deemed an issue associated with area under regulation, ES will address and work to resolve issue. Area under regulatory authority would be overflowing dumpster.
- Odor produced from dumpsters being maintained within our regulations will not be considered resolvable by this section.
- Odor produced from sewer gases in floor drains will be discussed with facility but is not addressed in the regulations for compliance purposes.

F17 **PC/MFU Commissary Violation**

- Visit recorded route to attempt contact while unit is operational. If unable to locate on route, make contact with commissary to check validity of agreement. See if commissary owner is the same, still wishes to support the unit, has updated contact information for unit. Gather evidence that unit is operating outside of the confines of the rules, such as cooking at home; doing more than permit allows on specified unit.
- For compliance purposes, ES will address warranted violations with notice of intent to suspend the permit. ES will work with operator to verify correction or suspend the permit after 30 days.
- ES notes date assigned (in lieu of date received in office)

F18 **Undercooked Food**

- Visit facility during appropriate times of day which correspond with cooking foods. Verify final cook temperatures are met according to the regulations. Provide correction as needed and education to appropriate staff who are completing the cooking. Verify staff have a working, calibrated food thermometer available for use during work shifts.
  Leave documentation of required final cook temperatures. Assure that staff can calibrate thermometer where applicable.

F19 **Wastewater Violation**

- Administrative staff receiving an intake call for a sewage violation at a regulated establishment, in addition to generating a service request, will contact the applicable EHS and Supervisor via text or phone and notify about the situation.
- On site investigation to determine where there may be a violation.
  Examples: Leaking drain field; broken municipal waste line; wastewater backing up inside a facility.
  - If municipal line is the problem, contact Charlotte Water via 311 to advise of situation. Review maps and field book to determine whether or not there are

other food, lodging, childcare, public pool, school, or institutional facilities in the vicinity that may need to be checked and/or monitored. If septic drain field is the problem, contact your supervisor so that representatives from all relative departments may be contact, i.e. water quality and ground water.

- If the backup occurs within the confines of a restaurant, dispose of contaminated supplies and follow permit suspension procedure as applicable until a solution is reached. Include all permits linked to the facility with the violation, i.e. Mobile food unit. Permit action would include but not be limited to, raw sewage is leaking onto ground in confined outdoor area from malfunctioning septic system, if raw sewage is spilling onto ground from municipal system and/or backing up into facility. See EHF06 for additional instructions.

F20 **Drinking Water Facilities Violation**

- No longer an active CDP service request code. Deleted.

F21 **Facility Flooded**

- Note any contacts or attempts to contact requestor. The response for this complaint can be via phone with the facility owner or manager. Response must come within 2 days.
- Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed. If childcare, contact NC Division of Child Development; if institution facility, contact Division of Health Service Regulation.

F22 **Hot Water Violation**

- Note any contacts or attempts to contact requestor. The response for this complaint can be via phone with the facility owner or manager. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed.
- If childcare, contact NC Division of Child Development; if institution facility, contact Division of Health Service Regulation
- See EHF06 for more instructions

F23 **HVAC Violation**

- Note any contacts or attempts to contact requestor. The response for this complaint can be via phone with the facility owner or manager. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed.

- If childcare, contact NC Division of Child Development; if institution facility, contact Division of Health Service Regulation

F24 **Improper Diaper-Changing Procedures**

- Note any contacts or attempts to contact requestor. The response for this complaint must be onsite. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed.

F25 **Laundry - Improper Handling**

- Note any contacts or attempts to contact requestor. The response for this complaint must be onsite.. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed

F26 **Solid/Medical Waste Violation**

- Note any contacts or attempts to contact requestor. The response for this complaint must be onsite. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed.

F27 **Storage Violation**

- Note any contacts or attempts to contact requestor. The response for this complaint must be onsite. Document appropriate contacts and corrections needed, by date, including verification of correction of violations as needed.

F30 **HB2 Smoking Complaint – Local Receipt**

- Used when complaint is received through our local switchboard
- Check with assigned supervisor to determine if there has been a previous smoking complaint on the facility
- For first complaint, make an onsite visit during operating hours. Obtain contact information including mailing address for the owner/operator of the establishment. If complaint is valid, educational letter sent, NC State DHHS (Department of Health and Human Services) reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.

- For second complaint, make an onsite visit during operating hours. If complaint is valid, 1st warning letter sent, NC State DHHS reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.
- For third complaint, make an onsite visit during operating hours. If complaint is valid, 2nd warning letter sent, NC State DHHS reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.
- For any further complaints, make an onsite visit during operating hours. If complaint is valid, a letter will be sent, and the Health Director may assess fines. The NC State DHHS reporting form is completed and attached to service request.

F31 **HB2 Smoking Complaint from DHHS**

- Used when complaint is received through the NC Smoke-Free Hot Line
- Check CDP Complaint Manager to determine if there has been a previous smoking complaint on the facility
- For first complaint, make an onsite visit during operating hours. Obtain contact information including mailing address for the owner/operator of the establishment. If complaint is valid, educational letter sent, NC State DHHS (Department of Health and Human Services) reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.
- For second complaint, make an onsite visit during operating hours. If complaint is valid, 1st warning letter sent, NC State DHHS reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.
- For third complaint, make an onsite visit during operating hours. If complaint is valid, 2nd warning letter sent, NC State DHHS reporting form completed and attached to service request. If complaint is not valid, State reporting form completed and attached to service request.
- For any further complaints, make an onsite visit during operating hours. If complaint is valid, a letter will be sent, and the Health Director may assess fines. The NC State DHHS reporting form is completed and attached to service request.

F99 **Other Complaint**

- All complaints received that do not fall in line with the above codes will be coded as such. Contact a Senior ES, Supervisor, or Program Manager for any information or guidance needed to correctly address the complaint.

G01 **Carbon Monoxide**

- Request will be for non-functioning or absent CO alarm with education provided on CO concerns.
- If complaint on a childcare facility, will require onsite visit.
- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- If non-compliant, actions will include either a warning notice to correct within 7 days and, if still non-compliant, a 14-DAY notice of Violation with a referral to the licensing agency, the NC Division of Child Development

G02 **Meth Lab**

- Used to document activities following notification from law enforcement officials of the presence of a methamphetamine laboratory.
- Determine the owner of the affected property by use of Polaris, tax records etc. Once determined, the property owner or their agent is informed by letter of the following: that the property has been used as a methamphetamine laboratory, that the property must be vacated, and of the requirement placed upon a responsible party to remediate the property in accordance to the rules prior to the property being reoccupied.
- Post a sign at the laboratory site for the Health Director outlining the potential site danger and the requirements of the law to vacate and not reoccupy the premises.
- Require the property owner or their agent to conduct a site assessment, prepare a pre-decontamination plan, and document all decontamination activities. All documentation must be submitted to the Health Department.
- Note receipt of all documentation and attach to the service request. Note: all written documentation must be maintained for three years.
- Notify Groundwater Services (GWS) if there is potential contamination of groundwater, septic system or soil.
- In the event of non-compliance of specific requirements of the law, initiate legal action against the owner and/or responsible party.

General Complaint and Service Request Investigations

G03 **Mold**

- Used to document complaints of mold in regulated facilities. All others will be handled by appropriate referrals.
- Attempt to contact caller for specific detail of location and observation of mold. Note any contacts or attempts to contact requestor, but do not delay onsite visit.
- Onsite visit to check for signs of visible mold.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.

P01 **Abandoned Pool**

- Note any contacts or attempts to contact requestor, but do not delay onsite visit.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

P02 **Algae in Pool**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P03 **Animal in Pool**

- Note any contacts or attempts to contact requestor. The response for this complaint may be by phone with management in lieu of onsite visit
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P04 **Backwash Nuisance**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P05 **Bathhouse Dirty**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P06 **Bathrooms Not Accessible**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P07 **Feces in Pool**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P08 **Fence Violation**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P09 **Glass in Pool**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P10 **Lifeguards Not Provided**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P11 **Lighting Violation**

- Note any contacts or attempts to contact requestor. May necessitate after hours(night) visit
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

P12 **Pool Accident/Illness Reported**

- Facilities(public) required to report injuries, accidents, or illnesses within 48 hours of occurrence. If reported by facility, may require submission of completed Pool Accident/Illness Report before visit.

Serious illness/accidents may require 1 business day or less response time.

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Record names of onsite and phone contacts
- Actions will vary
- Receive/review completed Pool Accident/Illness Report; Police/Fire/Medic reports; other documents (e.g. lab reports) as appropriate

P13 **Pool Dirty**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary.
- Record name of onsite and phone contacts

P14 **Pool Water Cloudy**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P15 **Pump Inoperable**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary

- Record name of onsite and phone contacts

P16 **Safety Equipment Violation**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P17 **Facility Flooded**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary, if non-compliant, with possible permit suspension
- Record name of onsite and phone contacts

P18 **Hot Water Violation**

- Note any contacts or attempts to contact requestor
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed. Actions will vary
- Record name of onsite and phone contacts

S01 **Administrative Request**

Complete request according to program policy and according to given information. Contact Supervisor or Specialist as appropriate.

S02 **Assigned Inspection**

- Inspection must be completed within 14 days unless otherwise specified.
- Record date inspection completed.
- Enter inspection on DHD.

S03 **Construction Final (Food)**

- If plans were submitted, approved plans will be accessible on OneDrive in the appropriate “Electronic Plan Review” folder for comparison to construction completed. Note water temperatures, proper operation of refrigeration, dish machines, and any approval conditions noted by the state or local plans examiner, etc. for compliance with regulations. If changes are made from approved plan they can only be approved if they do not cause problems that would result in violations and do not compromise the

operation of the facility. If equipment has been substituted from the approved plan, NSF/ANSI or equal status/good condition must be verified. If water heater installed does not meet with approved plan, specifications must be checked to see if the storage capacity and recovery meet with requirements for the appropriate operation.

- Issue permit/transitional onsite.
- Release computer hold on facility if hold exists (or have it released by appropriate personnel).

S04 **Deliver State Fee Letter**

- Call all contact numbers in the file and on CDP. For mobile units, contact the commissary as well. If contact is made with a representative of the facility, notify them of the need to pick up a state letter in our office during business hours within 72 hours. In this case, leave the letter with the ASA. Record all contacts or attempts at contact. Response onsite must come within 7 days if phone contact cannot be made. Talk with your supervisor about possible police escorts for late night delivery. Carry letter with you if an onsite visit is required.
- Verify mailing address with owner/manager and make corrections as needed on the request form.
- The ES will provide the NC DHHS phone number and website to make payment to the facility. Advise the facility to give their account number (full state ID number) when calling. ES will advise facility the online method of payment is https://ehids.eh.ncdhhs.gov/eh/bill/bill.html#/home.
- Notify your supervisor if address corrections are required on CDP.
- Document contact with requestor and indicate method of contact on service request. Sign and date form. Have owner/manager sign and date form.
- Turn in form w/other paperwork to Zineb York.
- Request may be handled via phone or email as long as a response is received from the establishment that the fee will be paid. However, the assigned service request cannot be closed/resolved until EHS verifies the fee has been paid by contacting NC DHHS.
- If establishment declines to make payment, a supervisor or program manager will contact NC DHHS Regional Environmental Health Specialist

S05 **Educational Presentation**

- Presentation must be approved by applicable Program Manager
- Record contact, topics desired to be covered, number of participants anticipated.

- Record date presentation completed.

S06 **Fire Call Response Documentation**

- Request entered by ES after every fire call.
- Document the date and time that the call was received. Response may need to be immediate; discretion may be taken if situation does not indicate imminent hazard may exist or if no indications are evident that manager will not comply with requirements if later visit is made.
- Note time of arrival on site, or when call was made to owner/operator.
- Note name of contacts on site (fire, police, manager, etc.)
- Note if power service is affected.
- Document temperature abuse from fire, loss of power, etc.
- Document whether food or utensils are affected.
- Note required remedies.
- Note any additional visits and whether facility remains open or closed, either voluntarily or involuntarily via Immediate Suspension action.
- Follow-up visit must be made the same or next day to assure that corrections have been made and/or to reinstate permit; this can be done the next day by the territory ES if the next day is a regular business day; otherwise would need to be done by the ES receiving the call.
- Document appropriate visits and corrections needed, by date, including verification of corrections of violations as needed.
- Follow the requirements of F14, Interrupted Utilities, as needed.
- Document contact with complainant or requestor and indicate method of contact.
- Notify regular territory ES of occurrence of event and needed follow-up
- See EHF03 for more instruction.

S07 **Initial Inspection**

- This code is used for establishments that are issued an "I"sheet and cannot receive an inspection on the same day the permit is issued.
- Use S-13 to document initial inspections related to Transitional and "L" (child care transitional) status permits
- Inspection must be made between 14 to 30 days after the establishment opens for business.

- Attempted inspections and communication with owner/operator will be document on the service request.
- If establishment has not opened, contact owner and determine expected opening date. Document attempts to inspect via a visit sheet and in the service request record.
- Record date completed.

S08 **New ownership**

FOOD

- Contact caller and/or make onsite visit when caller can't be reached.
- Document if there is an actual change of ownership; can access Secretary of State for Corporations website via related links on home page of CDP.
- When a facility is seeking a permit and is on "D" status, the new owner will have to pay the fees before a permit or transitional permit is issued. The owner can contact NC DHHS at 919-707-5854.
- Site visit to facility: Issue transitional permit, noting all non-compliant items, in detail, unless facility conditions are all current with existing rules and requirements and a full permit can be written. Include necessary conditions that remain with the permit according to .2659. Utilize the Quick Permitting Checklist on OneDrive to ensure compliance with permitting requirements.
- If transitional permit is issued, generate track transitional service request after permit is issued. If new permit is issued, generate an initial inspection service request after permit is issued.Complete permit application including menu, water calculations and all necessary information.
- Scan all permitting documents onto Onbase including but not limited to the signed permit application, applicable secretary of state verification documents, water calculations, menu and any other pertinent documentation (ie. SOPs)
- Service request is closed once permit is issued to facility.

CHILD CARE

- The Division of Child Development or new owner notifies the Health Department
- Environmental Health Supervisor or ASA generates a service request and assigns the inspection. Service request is closed once the childcare center has obtained a superior sanitation classification

S09 **Non-Profit Event -** Code no longer in use

S10 **Permit Suspended by State**

- ASA will verify that an activity has been entered into CDP changing the status code to D. If the D status doesn't appear then the ASA will contact EH Analyst or Program Manager for entry. The action will be attributed to NC DHHS Admin. A service request will be generated for the ES.
- Phone the establishment and advise the person in charge we have been notified that their permit has been suspended by NC DHHS and that they may not operate until they provide documentation indicating their permit has been reinstated. The ES will provide the NC DHHS phone number. Payment via NC DHHS website is not an option when a permit is suspended. Do not attempt to contact the facility after 4:30 PM to advise them of this status per NC DHHS.
- The facility can email, bring the reinstatement documentation to VCW office, or mail it. Advise operator the state will issue a warrant for their arrest if they continue to operate without a valid permit. If you cannot reach them by phone, you will respond onsite within 7 days of receipt of the request in the office. In either case record any contact or attempts at contacting the facility on the service request and respond to NC DHHS with actions taken. If operator continues to operate, contact your supervisor to work with the Regional EHS for assistance with an onsite visit.
- If you verify the facility is not operating the facility will remain in D status with quarterly verification of non-operation to be documented in the service request. If at any time signs of new construction, signs of new ownership, or building destruction are observed, email your supervisor and your Program Manager so that a correct status entry can be entered into CDP.
- You may close the service request if there is resolution by payment, proof of closure, documentation of no longer in operation; otherwise, keep the request open until payment has been documented.
- Notify your supervisor if the facility name, address, or other demographic information needs to be changed.
- All correspondence related to the request must be documented in the service request.

S11 **Re-evaluation Requested**

- Visit the facility for unannounced reinspection and document when completed in service request.
- Note any visits to facility where grade card was not posted as required by .2660 other applicable NC DHHS regulations (i.e. child care centers and nursing homes.). Note if any violation letters are written or legal actions are taken as a result of the removal of the grade card. Attach documentation of actions taken to complaint (can be scanned by ASA for attachment);

- If second violation (or more), inquire about pursuit of legal action w/supervisor.
- If legal action is approved, file in person at Magistrate's Office; await subpoena from Sheriff's Department; attend court session as witness.
- Date re-evaluation completed which must not ever be more than 15 days from the receipt in the department, regardless of pending legal action.MUST NEVER BE MORE THAN 10 DAYS FROM RECEIPT IN THE DEPARTMENT REGARDLESS OF ANY PENDING LEGAL ACTION).

S12 **State Fee Request**

- Attempt delivery of State fee letter to facility.
- If facility is open for business, have letter signed and return to office assistant.
- If facility has changed ownership, issue transitional permit noting all non-compliant items, in detail, unless facility conditions are all current with existing rules and requirements and a full permit can be written. Include necessary conditions that remain with the permit according to .2659. Complete permit application including menu, water calculations, and all necessary information. Close out permit of former operation with status code H. Return letter to office assistant with appropriate documentation of actions taken.
- If facility has closed, make appropriate status code change in CDP. Return letter to office assistant with appropriate documentation of actions taken.

S13 **Track Transitional permit**

- Service request is created after a transitional permit is issued by the ES, due to establishment having non-compliant construction or equipment related violations. ES will generate the service request.
- In most cases, an initial inspection will be conducted between 14 to 30 days after the establishment opens for business. Initial Inspection date to be documented on track transitional service request.
- Establishment will be visited for compliance at least quarterly, one week prior to expiration of the permit, and the day after permit expiration.
- Note visits made and observations made at each visit toward compliance with transitional items.
- Note name of contact person on site at each visit.
- Enter date full permit written (K status) or date facility closed for failure to complete all corrections (F status) on CDP.

- If F status is issued, PIC or owner must receive a permit denial form.
- If an F status is issued and the owner requests a new permit, continue to document visits to the establishment on this service request even though the establishment is no longer eligible for a transitional permit.

S14 **Well construction follow-up**

- Note visits made and observations made at each visit.
- Record name of onsite and phone contacts.
- Record date repairs are completed.
- Record of any water samples taken.
- Attach lab results and well letter. These can be scanned by ASA for inclusion on CDP Complaint Module.
- Document contact with complainant or requestor and indicate method of contact.
- Change status to Resolved in CDP and enter date completed.

S15 **Well sample follow-up.**

- Note visits made and observations made at each visit.
- Note record of any water samples taken each quarter for 1 year as required.
- Attach lab results and well letter. These can be scanned by OA for inclusion on CDP Complaint Module.
- Document contact with complainant or requestor and indicate method of contact.
- Change status to Resolved in DHD and enter date completed.

S16 **Plan Review, Field**

- Used to track field-based plan review for food service establishments, childcare centers and applicable institutions (approve new space, facility modifications that do not require In-House plan review), of both existing and new ownership.
- Sr EHS will record on site field observations, phone calls or correspondence regarding the project during the construction process.
- Approval documentation may be by visit sheet and a permit amendment or new “I” inspection sheet in the database.
- Release computer hold on facility if hold exists (or have it released by appropriate personnel).

S17 **Plan Review, In-House**

- Used to track childcare center modifications that do not require an initial onsite assessment prior to construction and childcare centers in a residence. Childcare Supervisor establishes guidelines.
- Used to track food or lodging plan review request when access to the LUESA online system is not available for customer. Approval documentation may be by visit sheet or new "I" inspection sheet.
- Release computer hold on facility if hold exists (or have it released by appropriate personnel).

S18 **Track Approved Construction**

- Assigned to Senior EHS to track an approved project after local or State EH Plan Review.
- Sr EHS will record on site field observations, phone calls or correspondence regarding the project during the construction process.
- Senior EHS to transfer information from the track approved construction to the construction final request once requested (refer to S03).

Appropriate personnel to apply a permit hold if applicable.

S19 **Verify Facility Ownership**

- Used when information is received from the public that questionsa facility's ownership
- Make onsite visit to determine if there has been an ownership change to a permitted operation, I.e. reorganization of business partners or business leased to a new operator Inquire with person in charge of facility if any changes have occurred. Records any information shared including other names or contact information to investigate if a change has occurred. Utilize the NC Secretary of State Business Registration website for verifying information of incorporation status.
- If new ownership has occurred requiring a new permit to be issued see S-08 New ownership for guidance.
- If a name change has occurred, the ES shall document the change in CDP IMS. This shall include name of ES, verification that ownership has not changed and the date of the change.

S21 **Resolve Business License Request** – Code no longer in use

S22 **Renewal Inspection Requested**

- Inspection must be completed within 14 days unless otherwise specified.
- Record date inspection completed.

- Enter inspection on CDP as appropriate.

S99 **Other Service**

- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts and contact requestor with findings, I.e. administration.
- Actions will vary.

V04 **Demo Cancelled**

- Document comments, as needed, for cancelled application.

V05 **Demo-Commercial**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V06 **Demo-Commercial, In Process**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V07 **Demo-Residential**

- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V08 **Demo-Residential, In Process**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V09 **Lead-Elevated Blood Lead Level**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V10 **Lead-Poisoned Blood Lead Level**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V11 **Lead Investigation (Childcare)**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- If request was generated due to a lead paint chemical spot test, document date of chemical spot tests as the initial service request action.
- If part of new facility (e.g. childcare) in plan review, release computer hold on facility if hold exists (or have it released by appropriate personnel).

V12 **Lead Investigation (School)**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

- If request was generated due to a lead paint chemical spot test, document date of chemical spot tests as the initial service request action.

V13 **Mosquitoes**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V14 **Move**

- Note any contacts or attempts to contact requestor, but do not delay onsite visit.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V15 **Move, In Process**

- Note any contacts or attempts to contact requestor, but do not delay onsite visit. Response onsite must come within 7 days.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V16 **Rabies Response**

- Note received date from Communicable Disease with response within 1-2 business days to disseminate literature. Alternate response will be activation of GEO-NOTIFY system for mass automated phone notification.
- Document appropriate visits by date and record address/geographic area.
- Actions will vary.

V17 **Rats**

- Note any contacts or attempts to contact requestor.

- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V18 **Residential Pool - Abandoned**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V19 **Residential Pool - Backwash Nuisance**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V20 **Residential Pool - Barrier Complaint**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.

V21 **Residential Pool - Fence/Gate Final**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.
- Actions will vary.
- Submit to ASA for POSSE Release

V22 **Residential Pool - Insanitary Conditions**

- Note any contacts or attempts to contact requestor.
- Document appropriate visits and corrections needed, by date, including verification of correction of violations as needed.
- Record name of onsite and phone contacts.

- Actions will vary.

V23 **Tattoo - New Artist Permit Request**

- Inspection must be completed within 14 days unless otherwise specified.
- Record date inspection completed.
- Enter inspection on CDP.
- Document contact with requestor and indicate method of contact.
- Write permit onsite.

V24 **Tattoo - Unpermitted Artist (Illegal)**

- Note any contacts or attempts to contact complainant, but do not delay onsite visit.
- Note visits made to correspond with time operation has been seen.
- Record name of onsite and phone contacts.
- Send violation letter.
- Make follow-up visits to assure that illegal operation has not recurred.
- If operations recur, discuss possible action with supervisor, take necessary next steps which may involve taking legal action.

General Complaint and Service Request Investigations

Appendix D - Investigation of Alleged Illegal Operations

1. Investigation of alleged operation
    - Prior to onsite investigation:
        - Contact complainant if applicable and obtain information about operation if needed based on review of information ASA documented on the service request.
        - Review CDP IMS and NOV Tracking Spreadsheet and determine if vendor or operation has been investigated before.
        - Review business information for exempt bar or club status if operation is in a structure via NC ABC Commission website. If vendor is exempt, no onsite action is needed. Notify the complainant of exempt status and provide the complainant with ABC Commission contact information.
        - Review and determine if the establishment is an exempt vendor such as country club, wine bar, NC Department of Agriculture permit, or brewery operating in compliance with NCDHHS position statement. If vendor is exempt, no onsite action is needed. Notify the complainant of exempt status.
        - Review CDP IMS and determine if vendor has a permit. If permit is located, no further action is required. If mobile unit is being investigated, review surrounding county inspection data via Gaston, Iredell, Lincoln, Cabarrus, and Union environmental health inspection database websites to determine permit status.
        - Review food type being sold and determine if a permit is required
        - Review social media for activity. Record any social media advertising selling food items. Record any phone number or contact information indicated on social media site.
        - Consult with supervisor and determine if the investigation should be completed in pairs with supervisor or senior ES as deemed necessary for safety.
    - Onsite Investigation:
        - EHS will print current Police Citation information described in section 3 below, prior to arriving onsite at the alleged location of the illegal food vendor.

- Witness and confirm allegation or some variation of illegal food sales and exchanges of funds for the food. The confirmation includes menu with prices or exchanging funds. If neither is observed, social media advertising the sale of food will be used as evidence for an NOV.
- Complete the following when meeting with the non-permitted vendor.
  - Advise of Rules, Law
  - Instruct to cease operation
  - Provide information on how to obtain a permit
  - Issue the operator an NOV citing specifics of observation and law or violation notice on NOV half sheet (available in supply closet).
  - Witness vendor pack up equipment
  - Return onsite verification within 4 days and review social media postings, if applicable, to verify breakdown and/or no evidence of continued illegal activity.
  - In chronic situations, cases of repeat offenders, or violators refuses to discontinue operation, ES will consult with EH Supervisor and begin process for a criminal summons.

- Complete the following if an onsite visit is completed at site of alleged non-permitted vendor and no one is present.
  - Leave business card on door (if residence or commercial building)
  - Return within 7 days to complete another assessment.
  - Monitor social media for vendor activity (if applicable)
  - If phone number is listed on social media for the vendor, attempt to contact.
  - After second attempt to investigate, if no activity, mail cease and desist letter along with information on how to obtain a permit to the known mailing address or email address if applicable.
  - Contact the complainant and determine if they have additional information on activity.
  - After 30 days, if ES does not see onsite or social media activity, close the service request.

- Completed the following after the investigation is completed and vendor is no longer observed onsite at last known location and no longer advertising the sale of food in Mecklenburg County:
    - All documents uploaded into OnBase (NOV, Police Citation, Court Documents)
    - Update CDP IMS Service Request

2. Alleged operation is confirmed to have a permit, is a non-profit entity selling food in compliance with NC GS, or a private club, private bar, or brewery (brewery with no food preparation).
    - For Permitted Vendors: ES observes that operator has a Health Permit with them. Determine validity of permit by using CDP records; ASA access to Onbase files; phone calls to other field staff or counties clarifying information. Confirm permit is in good standing and proceed to close request.
    - For Exempt Vendors: Document business information on service request and details about exempt status and close request.

3. Police Citation Information
    - This information is located on OneDrive in the Illegal Operator Documents folder, document titled CMPD info for Illegal Vendors

4. Cease and Desist Information
    - A copy of a Cease and Desist letter is located on OneDrive in the Illegal Operator Documents folder

5. Filing with Court Magistrate
    - Guidance documents for current Criminal Summons Process are on OneDrive in the Illegal Operator Documents folder.
    - All information will be reviewed by the applicable program manager and Division Director prior to contracting assigned County Attorney and Magistrates office.

6. How to request a police escort
    - If need for safety, contact a CMPD community coordinator in advance (your supervisor can assist) and schedule a time to meet CMPD if the vendor operators consistently at one location.

- If you are already onsite and need police assistance, you will use the CMPD info for Illegal Vendors document from section 3 as a guide for initiating an onsite visit. Please note that by using this option, the wait time for police may be significant.

7. Illegal Tracking Spreadsheet and documents on how to use the tracker are located on OneDrive in the Illegal Operator Documents folder.

Appendix E – NPTEO (Non-profit/tax exempt organizations) and food service

1. EXEMPT - NPTEO can prepare and serve food to members and members' guests as often as they like. They can charge members and members' guests for the food. They can hire anyone they wish to prepare the food. All of this is exempt.
    a. Example: Wednesday night worship and supper at church. The church hires and pays Flossie Jones a flat fee to come in and prepare the meal in the church's fellowship hall. Worshipers are charged a token amount that sometimes covers the cost of the meal.
    b. Example: Non-profit incorporated country clubs.

2. EXEMPT - NPTEO are entitled to 2 consecutive days, once a month exemption when they can open their doors to the public and sell food. They can hire anyone they wish to prepare the food, but the NPTEO must be in charge of the event. They must take up the money and hand out the food.
    a. Example: Once a month, Mint Hill Volunteer Fire Dept hires Joe's BBQ to cook chicken that the volunteers then sell to the public. Joe's BBQ does not collect any money, they receive a flat fee regardless of how much chicken is sold. The volunteers collect the money and dish up the food. If you wanted to write a check for a pound of chicken BBQ you would be writing it to the Mint Hill VFD, not Joe's BBQ. All of the proceeds benefit the VFD. The money they pay Joe's BBQ is an expense, the same as their cost for paper goods, tablecloths, and BBQ sauce that they purchase at Costco.
    b. Example: The Lupus Foundation plans a gala with dancing and a banquet. Tickets will be sold to the gala, and all proceeds will benefit the Lupus Foundation. The meal is included in the cost of the ticket. The Foundation

hires Joe's Fine Dining and Catering, a permitted restaurant, to provide the meal on site of the gala and pays them a flat fee for the service.

c. Example: The Huntersville PTA plans a one-day fund-raising carnival. The PTA volunteers will prepare and serve hot dogs and hamburgers. All proceeds, less the cost of the materials, benefits the PTA.

3. NON-EXEMPT – NPTEO opens their doors to the public on a regular basis, advertising the meal and charging for the food.
    a. Example: First Baptist Church has a hot dog supper every Friday night. All are welcome to attend, and a fee is charged. There is sign posted at the road. This is not exempt and is not even eligible for a TFE permit as there is no associated "event."
    b. Example: First Baptist Church has a ball field and every Saturday from March through May teams compete at baseball games. The church operates a concession stand selling hot dogs, chips and drinks to anyone that comes to watch the game. They would not be exempt, but they would be eligible for an LFSE permit as this is amateur athletics manned by volunteers.

4. NON-EXEMPT – For profit business operating under the auspices of a NPTEO.
    a. Example: Huntersville PTA plans a one-day fund-raising carnival. They allow food vendors to set up on the school yard and sell food to the public. The vendors are charged a fee for the space but keep all or part of their proceeds. This is not exempt but would be eligible for TFE permits.
    b. Example: Joe's BBQ is set up in the parking lot of First Baptist Church. He is cooking and selling BBQ chicken. The church has agreed for him to be there and he will split the profits with the church. Joe is collecting the money and selling the food. This is not exempt and would not be eligible for a TFE permit as there is no associated "event.

Appendix F
Additional Information when Responding to a Complaint or Service Request with Intentional Contamination

When staff conduct onsite visits in response to a complaint or service request, they may determine intentional contamination has occurred. This Appendix will ensure uniform notification of appropriate agencies when a complaint involves a contaminated product or a product that originated outside the agency's jurisdiction or has been shipped interstate.

Intentional Contamination
During the investigation, if intentional food contamination is suspected, the EHS will consult with a supervisor. After consultation, staff or supervisor will contact:

- The appropriate law enforcement agency by dialing 911 to report possible criminal actions.
- The Program Manager and/or Division Director
- The Mecklenburg County Health Department Communicable Disease Nurse
- The Mecklenburg County Health Department Epi Team
- The Food Defense Coordinator at 919-218-6943
- Environmental Health Regional Specialist for Mecklenburg County

Appendix G
Additional Information when Responding to a Complaint or Service Request

Complainants Regarding North Carolina Department of Health and Human Services (NCDHHS) Support – Recalls and Trace-back

Mecklenburg County Environmental Health assists the efforts of NCDHHS and NC Department of Agriculture and Consumer Services (NCDA) to remove implicated foods from consumption and assist with trace-back methods through surveillance, notification, and product disposition. Notification of support and procedures will come from Supervisor or Program Manager as each case may be different.

Food Defense Coordinator
North Carolina Department of Health and Human Services
Environmental Health
919-218-6943

Complainant Involving Outside Agencies

During a complaint follow up, when staff identifies a food product that has originated outside the agency's jurisdiction or has been shipped interstate, the EHS staff person will notify a supervisor and contact the appropriate agency utilizing the contact information below.

General Complaint and Service Request Investigations

Grade A Milk Products, Dairy Operations, Milk Plants North Carolina Department of Agriculture and Consumer Services Grade A Milk Program 919-733-7366
Meat and Poultry North Carolina Department of Agriculture and Consumer Services Meat and Poultry Inspection 919-707-3180
Other Dairy Products: Yogurt, Ice Cream, Cheeses, etc. North Carolina Department of Agriculture and Consumer Services Food and Drug Protection 919-733-7366
Packaged Processed Food (Canned, Vacuum-Packed, Jarred) North Carolina Department of Agriculture and Consumer Services Food and Drug Protection 919-733-7366
Produce Safety North Carolina Department of Agriculture and Consumer Services Food and Drug Protection 919-733-7366
Retail Fish Markets North Carolina Department of Agriculture and Consumer Services Food and Drug Protection 919-733-7366
Shellfish Sanitation N.C. Department of Environment and Natural Resources Shellfish Sanitation 252-726-6827

Mecklenburg County Health Department
Food and Facilities Sanitation Policies and Procedures Manual

Environmental Health Division **EHF-03**
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After Hours Response

Origin: February 1999
Reviewed: March 2006, June 2006, June 2007, June 2008, June 2009, June 2010, October 2011, June 14, June 2016, August 2022, August 2023
Revised: March 2006, June 2006, June 2009, October 2010, May 2013, April 2015, July 2016, January 2018, August 2018, August 2019, August 2020, August 2021, August 2024, **November 2025**
References: NCGS 130A-41

POLICY: Environmental Health Division staff will be available and will respond to emergency events such as foodborne illnesses, fires, and other emergency situations at regulated establishments on a 24 hour per day, 365 days per year basis as needed. Staff will be available and follow after-hours response procedures.

PURPOSE: To assure that staff are available to respond, whenever needed, to environmental hazards and illnesses complaints associated with food, lodging, institutional, and child care facilities, public swimming pools and spas, and tattoo artist facilities.

Policy Assigned To: Stephen Graham

Approved by:

Chrystal Swinger, REHS
Environmental Health Director

Jeremy Michael, REHS
Program Manager, GWS/PEHS

Amber Daniels, REHS
Program Manager, Planning and Support Services

Stephen Graham, REHS
Program Manager, Food & Facilities Sanitation

After Hours Response

PROCEDURES:

I. Environmental Health Division staff will provide 24 hours per day, 365 days per year, response to emergencies such as foodborne, waterborne, and vector-borne illnesses and fires associated with regulated facilities through a rotation of staff providing on-call services.

II. A response is initiated by Fire, Police, or Medic personnel calling the Environmental Health emergency response number (980) 314-1660, which is forwarded to the appropriate Environmental Health Specialist's (ES) cell phone or by calling one of the other contacts on our Emergency Contact List.

III. The individual handling emergency response is expected to carry their cell phone with them at all times when on-call and remain within proximity of a reasonable distance to Mecklenburg County to facilitate an onsite response if necessary at the beginning of the assigned rotation (Tuesdays, by 4:00 pm).

IV. Administrative team staff will transfer the emergency response number to the assigned ES each week and will call (980) 314-1660 and verify the phone has been forwarded to the assigned ES.

V. The supervisor of the individual handling emergency response will be available for staff support via their home or work phone and will serve as backup coverage on assigned team weeks unless otherwise pre-approved by the assigned Program Manager or another ES volunteer to cover the on-call time frame in advance. For detailed response instructions, see "Response to Fire or Foodborne Illness at a Permitted Foodservice Facility" (Appendix A), which is attached.

After Hours Response

Appendix A

Expectations for Fire or Foodborne Illness at a Permitted Foodservice Facility for ES and Supervisor

1. Phone call received from Fire, Police, Medic, or Communicable Disease Nurse. NOTE: The work cell phone assigned to the ES member on call is the primary contact method.

2. ES (Environmental Health Specialist) returns the call to get contact information.

3. ES contacts individuals in charge on the scene to determine the degree of need for onsite response and to notify fire/police at the site of our intentions to respond. In the event, the response is to fire, always talk with the fire department personnel on the scene either by phone or in person.

4. For situations related to swimming pool, tattoo, or sewage complaints, the ES will contact Environmental Health management assigned to those program areas.

5. For situations related to the Charlotte Douglas International Airport, security clearance is required to access the food service area, and the ES will need to be escorted. If you are unable to reach the PIC of the food service establishment with the emergency and obtain access to the food service establishment, the ES will contact the City of Charlotte's Facilities Maintenance Department and ask for the chief of maintenance on duty by calling 704-359-4012.

6. **If 2 or more unrelated cases of confirmed foodborne illness are reported or a single Hepatitis A illness at a food service establishment, the Program Managers and Environmental Health Director are to be notified and an onsite visit is to be conducted according to EHF-07.**

7. If supervisor support is needed during the event, the ES will contact their direct supervisor via their applicable home or work number. If the supervisor does not answer their phone(s), the ES will leave a detailed voice mail and should contact a program manager or Division Director after 15 minutes has elapsed.

Response Fire or Foodborne Illness at a Permitted Foodservice Facility for ES

After Hours Response

1. In all cases, the ES must analyze the situation to determine what actions will be needed. (When information on clean-up procedures can be effectively communicated to the owner/operator by telephone, an onsite Environmental Health response is not required.) Questions to consider include:
    a. Has power or gas service been cut off or disconnected? If so, for how long and what is the temperature of coolers, freezers, and the products stored within them?
    b. Has there been structural damage that would require the facility to go through plan review before gaining approval to reopen?
    c. Would it be safe for the facility to return to operation after following simple clean-up procedures?
    d. What is the extent of damage to the facility? Have food, utensils, equipment, disposable items, etc., been exposed to gray water or sewage, fire, smoke, fire extinguishing residue, chemical, etc.?

2. When an on-site response is required, the ES must:
    a. Wear county ID and carry identification
    b. Park so as not to block fire engines or other emergency vehicles
    c. Establish contact with the requesting official and the facility owner/operator on-site to receive pertinent information, advise of our arrival, and receive safety clearance before entering a facility.

3. By the end of the next business day, the assigned ES must:
    a. Document receipt of all calls and specific actions taken on a Service Request logged as Fire Call Response Documentation.
    b. The ES is to notify the establishment's assigned ES on all actions taken by the end of the next business day or as soon as business hours resume if the area ES is to take further action.

Guidance for Damage Remediation

1. Food items may be moved to another store or refrigeration unit within the affected establishment if there has been no damage by heat, water contamination, or fire control system, etc. and there is no potential for smoke damage. Discuss proper transport methods.

2. Food may be required to be discarded as a result of risk levels determined by the ES, or by other agency representatives possessing embargo power or legal

After Hours Response

authority to require such action. Document actions take on Product Disposition forms.

3. Cleaning of surfaces and equipment exposed to the fire control system:
    a. Await the reconnection of electricity and natural gas/pilot re-light (if main gas connection was disabled by the Fire Department) so that an appropriate amount of hot water is available for cleaning.
    b. An organized pattern for cleaning with hot soapy water to be implemented by management/owner:
        i. Top to bottom, pushing to the floor. The floor is to be the last area of concern.
        ii. Equipment to be washed, rinsed, sanitized, air-dried at the three-compartment sink (if available)
        iii. Surfaces to be sanitized by acceptable measures (as specified in North Carolina Food Code, 4-501.110 through 4-501.115), after washing of all surfaces.

4. Before reopening to the public, the facility should have obtained approval from any other agency that had closed it as a result of the emergency.

5. Instruct management to contact MCHD Monday through Friday, 8:00 am to 5:00 pm, at (980) 314-1620 to schedule a reopening visit after the above recommendations have been completed. The reopening request will be assigned to the applicable ES based on territory assignment. When the establishment has been closed for an emergency at a time that the MCHD main office is closed, and the extent of corrective actions are completed prior to the main office reopening, it shall be the responsibility of the on-call ES, to visit and evaluate compliance and conditions for reopening.

After Hours Response

SUPERVISOR/MANAGER CONTACT NUMBERS

Contact	Title	Work Cell Number	Home Number
Chrystal Swinger	Environmental Health Director	[redacted]	[redacted]
Amber Daniels	Program Manager	[redacted]	[redacted]
Wendy Bell	EH Supervisor	[redacted]	[redacted]
Matthew Cook	EH Supervisor	[redacted]	[redacted]
Matt Muris	EH Supervisor	[redacted]	[redacted]
Cassandra Thompson	EH Supervisor	[redacted]	
Stephen Graham	Program Manager	[redacted]	[redacted]
Marie Cain	EH Supervisor	[redacted]	[redacted]
Renada Ervin-Junious	EH Supervisor	[redacted]	
Alex Hall	EH Supervisor	[redacted]	[redacted]
Lynn Lathan	EH Supervisor	[redacted]	[redacted]
Aimee Lee	EH Supervisor	[redacted]	[redacted]
Jeremy Michael	Program Manager	[redacted]	[redacted]
Tim Dutcher	EH Supervisor	[redacted]	[redacted]
Hope McIntosh	EH Supervisor	[redacted]	
Jeremy Michelone	EH Supervisor	[redacted]	[redacted]

Appendix B

Guidelines for Environmental Field Investigations of Foodborne Illness Outbreaks

I. Note arrival time on site. Determine the identity of the person in charge. Were they on duty at the time of the incident? If not, determine who was on duty and in charge. Ask if the food service manager has received any other complaints.

II. Assess the risk factors

A. Risk Factor - "Employee Health/Poor Personal Hygiene"

1. Question management and staff about their employee health policy and any absenteeism. Were any employees sick (e.g. vomiting, diarrhea, sore throat w/ fever) at the time of the FBI? Currently sick?
2. Observe the personal hygiene of the employees on duty. Are hands clean? Are there any cuts, sores or burns; coughing or sneezing? Is clothing clean? Do they wear gloves when handling RTE food?
3. Observe employee handwashing and handwashing facilities. Are handwash lavatories accessible, in good repair? Are soap and towels available? Are employees washing hands at appropriate times? Is bare- hand contact with ready to eat food observed?

B. Risk Factor - "Food from Unsafe Source"

1. List the sources of the suspected foods. Record state code for processing plant for all shellfish.

C. Risk Factor - "Inadequate Cooking/Reheating/Cooling"

1. List steps in preparation of suspected foods. Document any steps in the process where temperature is a critical control point. Measure and document final cooking/reheating/cooling temperatures when possible. Are there any specialized food processes being used that require a variance or HACCP (hazard analysis of critical control points) plan?
2. Review, discuss, and document facility procedures.

D. Risk Factor - "Improper Holding Temperatures"

1. Measure and document the ambient air temperatures of any refrigerators holding suspect foods.
2. Measure and document the holding temperatures of the suspected foods, both for hot holding and cold holding if available. Multiple temperatures should be taken in different areas of the food. Is the facility using Time as a Public Health Control? Review, discuss, and document procedures.
3. Verify accuracy of the facility's product thermometer(s).
4. Observe date-marking if needed for TCS foods (time/temperature controlled for safety.

E. Risk Factor - “Contaminated Equipment/ Prevention of Contamination”

1. Observe food contact surfaces of equipment that would be used to cook, prepare, or store suspected foods. Are food contact surfaces easily cleanable? Are they clean to sight and touch? Is sanitizer available and at the correct concentration? If there is a dish machine, is it clean and operating properly? Has it been out of service? Are utensils being properly air-dried?
2. Observe storage of the suspected foods. Observe or discuss the handling of the suspected foods. Is there opportunity for cross-contamination?

Mecklenburg County Health Department
Food and Facilities Sanitation Policies and Procedures Manual

Environmental Health Division **EHF-07**
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Foodborne Illness Investigations

Origination:	February 1999
Reviewed:	March 2006, June 2006, June 2007, June 2008, June 2009, June 2010, April 2015, July 2016, November 2017, August 2023, **August 2025**
Revised:	June 2006, October 2010, October 2011, May 2013, June 2014, August 2018 August 2019, August 2020, August 2021, August 2022, August 2024
References:	NCGS 130A-41; 10A NCAC 46 .0213

POLICY: Environmental Health Division staff will ensure a consistent, appropriate, and complete response and investigation of all foodborne illness complaints received in accordance with Foodborne Illness Investigation procedures.

PURPOSE: To provide a standardized method to investigatefoodborne illness complaints received by the program, ensure they receive the appropriate response priority, are thoroughly investigated, and that appropriate corrective actions are implemented to prevent reoccurrence.

Policy Assigned To: Stephen Graham

Approved by:

Chrystal Swinger, REHS
Environmental Health Director

Amber Daniels, REHS
Program Manager, Planning and Support Services

Stephen Graham, REHS
Program Manager, Food & Facilities Sanitation

Foodborne Illness Investigations

PROCEDURES:

I. Upon the receipt of a foodborne illness complaint, the office assistant will generate a service request for the ES (Environmental Health Specialist) assigned to the identified facility/facilities. The Administrative Support Assistant (ASA) will immediately contact the ES and the applicable Supervisor in the event the foodborne illness complaint is classified as Category 2, 3, or 4 based on the information below. The ES will respond to notification of a foodborne illness based upon the assigned Category or as otherwise instructed by the Health Director/Program Manager/Supervisor. See EHF-03 After Hours Response for communicable disease investigation requests received on county holidays or weekends.

A. Category 4: More than one physician and/or laboratory confirmed case of foodborne illness in restaurant patrons or one or more physician and/or laboratory confirmed cases of foodborne illness in food service workers.
    1. Immediate notification to a program supervisor
    2. The ES will call the Communicable Disease Nurse who issued the referral to collect all relevant case information to begin the investigation
    3. Immediate (Same Day), on-site response to the request is required unless otherwise instructed by the Health Director/Program Manager/Supervisor. Cases received after working hours and on holidays/weekends will be assigned to the ES on call; see EHF03.
    4. Obtain/review food history of individuals reporting illness (see Appendix A)
    5. Conduct on-site visit (see Appendix B)
    6. In the case of an infected food service worker, ensure that the Person in Charge (PIC) has taken action to exclude or restrict as required in Chapter 2 of the NC Food Code Manual
    7. Identify corrections needed to remedy any deficiencies found
    8. Program supervisor will direct a program Senior Environmental Specialist (Sr ES) to collect food/environmental samples as appropriate (see Appendix C)
    9. Provide training/verify corrective measures where symptoms and sanitation conditions point to a source of possible foodborne illness (see Appendix B)
    10. Document findings. Update service request with investigation findings in CDP. Food History forms will be stored electronically in Onbase and will

be scanned into Onbase by the ES. Food history forms with protected customer information must be stored in compliance with Health Department administrative policy.

B. Category 3: Single physician and/or laboratory confirmed case of foodborne illness in a restaurant patron (i.e. CD Referral).
    1. Response required by end of next business day unless otherwise instructed by the Health Director/Program Manager/Supervisor. If referral is received on a Friday or prior to a county holiday, ES will contact applicable supervisor to determine if a response is required before Monday. If the referral is a Hepatitis A confirmed illnesses at food service establishment, an investigation will be completed on the day of notification. The ES will call the Communicable Disease Nurse who issued the referral to collect all relevant case information to begin the investigation
    2. Obtain/review food history of individual reporting illness (see Appendix A)
    3. On-site visit (see Appendix B)
    4. Direct corrections needed to remedy any deficiencies found
    5. Program supervisor will direct a program Sr ES (Senior Environmental Specialist) to collect food/environmental samples as appropriate (see Appendix C)
    6. Provide training/verify corrective measures where symptoms and sanitation conditions point to a source of possible foodborne illness (see Appendix B)
    7. Document findings. Update service request with investigation findings in CDP. Food History forms will be stored electronically in Onbase and will be scanned into Onbase by the ES. Food history forms with protected

C. Category 2: More than one unrelated case of illness reported with symptoms generally associated with a foodborne illness and with a common point of origin.
    1. Response required by end of next business day unless otherwise instructed by the Health Director/Program Manager/Supervisor.
    2. Obtain/review food history of individuals reporting illness (see Appendix A)
    3. On-site visit (see Appendix B)

4. Direct corrections needed to remedy any deficiencies found
5. Program supervisor will direct a program Senior Environmental Specialist to collect food/environmental samples as appropriate (see Appendix C)
6. Provide training/verify corrective measures where symptoms and sanitation conditions point to a source of possible foodborne illness (see Appendix B)
7. Document findings. Update service request with investigation findings in CDP. Food History forms will be stored electronically in Onbase and will be scanned into Onbase by the ES. Food history forms with protected

D. Category 1: Single unconfirmed case of illness in a patron or foodservice worker with symptoms generally associated with a foodborne illness and attributed to a food service facility.
    1. Response required within 3 working days
    2. Obtain/review food history of individual reporting illness if a recent illness
    3. On-site visit (see Appendix B)
    4. In the case of a symptomatic food service worker, ensure that the Person in Charge (PIC) has taken action to exclude or restrict as required in Chapter 2 of the NC Food Code Manual
    5. Direct corrections needed to remedy any deficiencies found
    6. Document findings.

Appendix A
Foodborne Illness History Form

NEXT PAGE

CONTAINS CONFIDENTIAL INFORMATION NOT TO BE RELEASED WITHOUT CLIENT AUTHORIZATION

Investigation initiated

Date _____

EHS _____

COMPLAINT# _____

Date Received _____

Call Received by _____

FOODBORNE ILLNESS INVESTIGATION

Complainant Name _____ Phone (Work) _____

Address _____ Company _____

_____ Phone (Home) _____

_____

Complaint _____

_____

_____

WATER SOURCE

Home: ☐Well ☐ Spring ☐City/Town

Work: ☐Well ☐ Spring ☐City/Town

Have you drunk, swam, or bathed in other water sources in the past 6 weeks? ☐ Yes ☐ No

Details: _____

FOOD & BEVERAGES CONSUMED

Suspect meal _____ Was this a take-out order? ☐ Yes ☐ No

Location _____ If yes, time between pickup and consumption

_____ hrs. Date and Time

_____ AM PM Suspected Incubation Period _____

Description of meal (please note anything unusual noticed about the meal, i.e. temperature, taste, etc.) _____

_____

_____

_____

SYMPTOMS

Onset of symptoms: Date _____ Time _____ AM PM

Symptoms ended: Date _____ Time _____ AM PM

What were your main symptoms? (Check any symptoms present; circle predominant symptoms.)

☐ Vomiting	☐ Diarrhea	☐ Fever	☐ Nausea	☐ Burning Mouth
___ No. of Days	____ No. of days	☐ Chills	☐ Muscle Ache	☐ Itching
___ No. of times	____ No. of times	☐ Cramps	☐ Excessive Salivation	☐ Rash
	☐ Bloody	☐ Headache	☐ Cough	☐ Dizziness
	☐ Explosive	☐ Perspiration	☐ Metallic Taste	☐ Numbness
	☐ Watery			☐ Double Vision

Other symptoms _____

_____

_____

Was Medical Treatment Received? ☐ Yes ☐ No

Doctor _____ Hospital (name) _____

Address _____ Phone _____

Cultures/Samples: ☐ Stool ☐ Blood ☐ Other Results _____

Names of any other ill family members (including pets)? _____

Symptoms? _____

Do you have any pets or other animals? _____

Do you have any food allergies? _____

Comments/Notes _____

	Name	**Phone #**	**Ill? Y/N**
Others in party			

1st 24 hours (Date Became Ill) Date

	All Foods & Beverages Consumed	**Where**
Dinner		
Lunch		
Breakfast		

2nd 24 hours (Previous Day) Date

	All Foods & Beverages Consumed	**Where**
Dinner		
Lunch		
Breakfast		

3rd 24 hours (2 Days Prior) Date

	All Foods & Beverages Consumed	**Where**
Dinner		
Lunch		
Breakfast		

Appendix B

Guidelines for Environmental Field Investigations of Foodborne Illness Outbreaks

I. Note arrival time on site. Determine the identity of the person in charge. Were they on duty at the time of the incident? If not, determine who was on duty and in charge. Ask if the food service manager has received any other complaints.

II. Assess the risk factors

A. Risk Factor - "Employee Health/Poor Personal Hygiene"

1. Question management and staff about their employee health policy and any absenteeism. Were any employees sick (e.g. vomiting, diarrhea, sore throat w/ fever) at the time of the FBI? Currently sick?
2. Observe the personal hygiene of the employees on duty. Are hands clean? Are there any cuts, sores or burns; coughing or sneezing? Is clothing clean? Do they wear gloves when handling RTE food?
3. Observe employee handwashing and handwashing facilities. Are handwash lavatories accessible, in good repair? Are soap and towels available? Are employees washing hands at appropriate times? Is bare- hand contact with ready to eat food observed?

B. Risk Factor - "Food from Unsafe Source"

1. List the sources of the suspected foods. Record state code for processing plant for all shellfish.

C. Risk Factor - "Inadequate Cooking/Reheating/Cooling"

1. List steps in preparation of suspected foods. Document any steps in the process where temperature is a critical control point. Measure and document final cooking/reheating/cooling temperatures when possible. Are there any specialized food processes being used that require a variance or HACCP (hazard analysis of critical control points) plan?
2. Review, discuss, and document facility procedures.

D. Risk Factor - "Improper Holding Temperatures"

1. Measure and document the ambient air temperatures of any refrigerators holding suspect foods.
2. Measure and document the holding temperatures of the suspected foods, both for hot holding and cold holding if available. Multiple temperatures should be taken in different areas of the food. Is the facility using Time as a Public Health Control? Review, discuss, and document procedures.
3. Verify accuracy of the facility's product thermometer(s).
4. Observe date-marking if needed for TCS foods (time/temperature controlled for safety.

E. Risk Factor - “Contaminated Equipment/ Prevention of Contamination”

1. Observe food contact surfaces of equipment that would be used to cook, prepare, or store suspected foods. Are food contact surfaces easily cleanable? Are they clean to sight and touch? Is sanitizer available and at the correct concentration? If there is a dish machine, is it clean and operating properly? Has it been out of service? Are utensils being properly air-dried?
2. Observe storage of the suspected foods. Observe or discuss the handling of the suspected foods. Is there opportunity for cross-contamination?

Appendix C

Sample Collection Process

I. Collection of samples related to a foodborne illness investigation will be conducted only after discussion of the case with a supervisor or manager and determination that sampling is appropriate for the case.

II. All samples will be collected by a Sr ES (Senior Environmental Specialist) or an ES (Environmental Specialist) who has been trained in proper sampling techniques and only samples that are scientifically reasonable are to be collected.

III. Prior to collecting samples, a program representative must contact the SLPH (North Carolina State Laboratory of Public Health) at (919) 733-7367 to notify the laboratory of incoming food samples. EMSL Analytical, Inc. may be used to analyze food samples in the event the SLPH is unable or unwilling to accept the samples. The contact number for EMSL Analytical, Inc. is (877) 435-5227.

IV. Samples must be collected using protocol as described in "Guidelines for Environmental Field Investigations of Foodborne Illness Outbreaks" (see Appendix B).

V. When shipping samples, place the labeled samples in the appropriate shipping container with (a) cold pack(s) to maintain the cold temperature of the samples. Ensure sample bags are tightly sealed and are leak-proof. Include the Food/Environmental Sample Collection Reports (when sending samples to the SLPH) for each sample or the EMSL chain of custody forms in a separate bag. Samples for the SLPH may be placed in the State Courier service box at VCW Center. Samples in need of refrigeration must be shipped via state courier box at the south east health department. The State Courier service picks up samples at 11 am, so plan accordingly when collecting/sending samples. When sending samples to EMSL, or State Lab when courier service is not available, use Federal Express to send the samples (during business hours, use Federal Express shipping containers). Retain, for reimbursement, any receipts from shipping samples if sent after business hours.

VI. All samples must be collected using an EPI kit which is maintained by management staff and is located in the Environmental Health Clean Supply Closet. The EPI Kit must be inclusive as described in "Guidelines for Environmental Field Investigations of Foodborne Illness Outbreaks" (see Appendix B)



Appendix G

Part III: Baseline and Program Assessment Compliance and Enforcement

Content includes:

- **G1: EHF06 – Enforcement Action Policy**
- **G2: Risk Control Plans**

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Environmental Health Division **EHF-06**
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Enforcement Actions

Origin: January 1993
Reviewed: March 2006, June 2006, June 2007, June 2008, June 2009, June 2010, October 2011, April 2015
Revised: March 2006, June 2006, June 2009, October 2010, May 2013, June 2014, July 2016, October 2017, August 2018, August 2019, August 2020, August 2021, August 2022, August 2023, August 2024, **August 2025**
References: NCGS 130A-41; 15A NCAC 18A

POLICY: Environmental Health Division staff will take appropriate enforcement action in regard to violations of applicable statutes, rules, and ordinances to ensure facilities do not adversely impact public health in accordance with enforcement action procedures.

PURPOSE: To ensure the continued well-being of patrons of food, lodging, school, institutional and childcare facilities, public swimming pools and spas, and tattoo artist operations in Mecklenburg County.

Policy Assigned To: Stephen Graham

Approved by:

Chrystal Swinger, REHS
Environmental Health Director

Jeremy Michael, REHS
Program Manager, GWS/PEHS

Amber Daniels, REHS
Program Manager, Planning and Support Services

Stephen Graham, REHS
Program Manager, Food & Facilities Sanitation

Enforcement Actions

PROCEDURES:

I. Staff in the Environmental Health Division will contact their immediate supervisor or Program Manager to discuss possible options prior to taking enforcement actions at a permitted facility. Professional judgment will be applied to the situation or conditions that have been encountered before initiating a course of action. Supervisors will consult with the assigned county attorney, program manager, and division director prior to issuing a criminal summons.

II. Conditions to allow for permit action include:
   a. A situation or condition that rises to the level of Imminent Hazard as defined in NCGS 130A-2 (3) will be immediately suspended or revoked unless specified otherwise in a rule applicable to the specific facility.
   b. After consultation with the immediate supervisor or program manager when the situation or condition constitutes an ongoing problem that could adversely impact public health and is not being properly addressed by the facility owner/operator. In such situations, the ES (Environmental Health Specialist) must provide documentation as to the persistent nature of the problem and show that the owner/operator has failed to take appropriate corrective measures.

III. Appropriate documentation must be entered into the inspection database The following documentation is the minimum allowed:
   a. <u>D-Status (State Issued Permit Suspension):</u> For permit suspended by state for non-payment of food and lodging fee handle as indicated in policy EH-02 “General Complaint Investigations” Appendix B, code S10 “Permit suspended by State.” If a site visit is made, verify that status code D is in the database in addition to documentation on the service request.
   b. <u>E-Status (Immediate Permit Suspension):</u>
      i. A Notice of Immediate Permit Suspension form must be completed and provided to the person in charge. This form is used for all required documentation.
      ii. The form must indicate the rule(s) that resulted in the permit suspension.
      iii. The ES must notify the person in charge of their appeal rights.
      iv. The person in charge shall be asked to sign the form indicating receipt. If the person in charge refuses, this must be indicated on the form in the signature area and the original copy left on site. The

ES will leave a paper copy of this form onsite with PIC if the ES is unable to verify receipt of an emailed copy.

v. ES will notify the assigned supervisor prior to the issuance of an immediate suspension. The supervisor will notify the applicable program manager. ES will forward a copy of the suspension to their supervisor and program manager.

c. <u>W – Status (Issuing an Intent to Suspend (ITS) and Expiration of Intent to Suspend E-Status):</u>

i. A Notice of Intent to Suspend Permit Suspension form must be completed with observations and provided to the person in charge when issuing an intent to suspend. This form is used for all required documentation.

ii. The form must indicate the rule(s) that resulted in the permit suspension.

iii. The ES must notify the person in charge of their appeal rights.

iv. The person in charge shall be asked to sign the form indicating receipt. If the person in charge refuses, this must be indicated on the form in the signature area and the original copy left on site. The ES will leave a paper copy of this form onsite with PIC if the ES is unable to verify receipt of an emailed copy.

v. ES will notify the assigned supervisor prior to the issuance of an intent to suspend. The supervisor will notify the applicable program manager. ES will forward a copy of the intent to suspend form to their supervisor and program manager.

vi. During the 30-day period, the ES will visit the establishment and monitor compliance, and provide guidance on the compliance issue that lead to the ITS.

vii. If violation(s) have not been corrected within the 30-day period the ES must enter the E status change on a Comment Addendum form. When applicable, the form must be completed during an onsite visit at the establishment. In no case does the ES enter a second suspension form.

viii. The visit/status change entry in the general comment box must include a comment indicating "Violation _____has not been corrected, immediate suspension is in effect. The person in charge was instructed to cease operation until they are in compliance with all rule requirements and have obtained a reinstatement of their permit from MCHD."

ix. The person in charge will be asked to sign the comment addendum form indicating receipt. If the person in charge refuses, this should be indicated on the form in the signature area. The original copy of the documentation must be left with the person in charge. The ES will leave a paper copy of this form onsite with PIC if the ES is unable to verify receipt of an emailed copy.

x. ES will notify the assigned supervisor prior to the issuance of an immediate suspension. The supervisor will notify the applicable program manager. ES will forward a copy of the suspension to their supervisor and program manager.

d. H-Status (Expiration of Transitional Permit):

i. Prior to a transitional permit expiring and throughout the transitional period, multiple compliance visits must be made by the ES to evaluate the status of non-compliant items on the transitional permit. During each visit, the status of each original non-compliant item listed on the transitional permit will be documented on a visit sheet that is provided to the person in charge after each visit. A final compliance visit must be made the week before the transitional permit expires

ii. The visit where observations are the transitional permit non-compliant items have not been met, and the permit has expired must be documented on a comment addendum form entered as a Visit.

iii. All establishments with an expiring transitional permit shall be visited on the next business day following the expiration of the permit unless ES has determined prior to the expiration of the permit that all non-compliant items have been resolved.

iv. If the ES that issued the permit is not available to follow-up on the expired permit, the supervisor or senior ES assigned to the ES shall follow-up on the expiring permit. If non-compliant items on the permit have not been resolved, the visit sheet must include a comment indicating "Transitional permit condition(s) number (enter numbers) in the permit issued by MCHD on (enter date) have not been met. The permit has expired and the person in charge was instructed to cease operation until they are in compliance with all rule requirements and have obtained a new permit from MCHD."

v. The person in charge must be asked to sign the form indicating receipt. If the person in charge refuses, this should be indicated on the form in the signature area.

vi. ES will notify the assigned supervisor prior to the issuance of an H status. The ES will leave a paper copy of this form onsite with PIC if the ES is unable to verify receipt of an emailed copy. ES will notify the assigned supervisor prior to the issuance of an H status. The supervisor will notify the applicable program manager. ES will forward a copy of the suspension to their supervisor, program manager, and EH Division Director.

e. <u>H-Status (Immediate Permit Revocation):</u>

i. A Notice of Immediate Permit Revocation form must be completed with observations and provided to the person in charge when issuing a revocation. This form is used for all required documentation.

ii. The revocation form must indicate the violations of the rules that have resulted in the permit revocation.

iii. The person in charge shall be asked to sign the form indicating receipt. The ES must notify the person in charge of their appeal rights. If the person in charge refuses, this must be indicated on the form in the signature area and the original copy is left on site. The ES will leave a paper copy of this form onsite with PIC if the ES is unable to verify receipt of an emailed copy.

iv. When emailing the revocation to the owner is not an option, it is also acceptable to mail the form via USPS. If USPS is used, mail the form via the outgoing mailbox in the VCW suite 8000 copy room by the beginning of the next business day. Document on the form USPS was used and the date the form was mailed.

f. <u>H-Status (Permit invalid due to sale of business):</u> A visit or status change will be documented on a state comment addendum form. A comment must be entered indicating "Facility sold. Will operate as (facility name) under new ownership of (insert owner name)."

g. <u>J-Status (Permit expired due to no operation for one year):</u>

i. The ES will document at least once per quadrimester C status visits throughout the calendar year if an establishment is not open and operating. The ES will also use the internet and social media to determine if an establishment is open prior to placing on C or J

status. Information shall be clear and informative so that the reason why the J status was issued is clear.

IV. In order to meet inspection mandates, each facility needs an inspection or status code update during their applicable risk category period, but no less than 1 time per each quadrimester. If during the reporting period, the facility is moved from an inactive to an active status, an inspection and education visit (Risk 4s only) must be completed for compliance purposes, with the exception of a new permit issued in the last month of the quadrimester. All status code entries must include enough information and detail for the reviewer or owner of the establishment to understand why a closed status was used.

a. Example of Good Documentation: Onsite visit completed during posted operational hours. Doors were locked and door signage stating business was closed. Viewed social media accounts for the permit and no Google reviews since 3 months ago. Phone call Bob Smith (owner), business is not operating and plans to reopen this coming summer.
b. Example of Non-Approved Document: Mobile unit not operating.

V. When a document is required to be given to an owner, operator, or person in charge in paragraphs a-g above, and the owner, operator, or person in charge cannot be found, or an email is returned undeliverable, the document shall be mailed to the last known address for the owner, operator, or person in charge. This action must be documented by indicating in the space for the owner/operators signature a statement to the effect "Copy emailed On ___ Date."

VI. Violation of NC statutes such as those requiring permits for operation and posting of sanitation grade cards must be discussed with the immediate supervisor or program manager and a course of action determined to effectively resolve the situation.

VII. The following table, along with professional judgment will be used as a guideline when making a determination regarding whether or not enforcement action is warranted and the type action to be taken. ES will also use the NC DHHS Enforcement Guide when determining enforcement actions. The documents can be found at EnforcementStrategyManual-050619.pdf (ncdhhs.gov) For food service establishments, the flow to enforcement action must be in compliance with the .2600 rules. In most situations, the flow to permit action is as follows: Zero Points, Half Points, Full Points, Risk Control Plan, Intent to Suspend, and Immediate Suspension.

Enforcement Actions

VIII. The Division Director and Program Manager will be notified prior to any legal actions, including assistance from law enforcement. A log will be maintained of all criminal actions initiated by the County attorney assigned to Public Health. All permit actions will be properly documented in the inspection database.

IX. Notice of Violations are only issued to illegal food or home day care operators will be scanned into OnBase after the investigation is complete. Notice of Violations are not issued to permitted establishments

.

Appendix A

Conditions	Applicable Response
1. Major destruction of an establishment by fire, flood, or other disaster.	1. Immediate permit revocation
2. Facility has no water, refrigeration, or electricity.	2. Immediate permit suspension unless management closes voluntarily.
3. Sewage backing up into the kitchen or a food service facility.	3. Immediate permit suspension
4. Extreme cases involving poor food handling practices being used and/or storage of food at improper/unsafe temperatures (ex. food is adulterated, all refrigeration is out, etc.)	4. Immediate permit suspension unless score drops below 70 (immediate revocation).

Enforcement Actions

5. No Hot Water or hot water sanitizing dishwasher not attaining effective final rinse temperature or chemical sanitizing machine not circulating adequate sanitizing solution.	5. Immediate permit suspension unless appropriate facilities or methods are available for sanitizing, switch is made to single-use utensils, Low temperature dish soaps are in use, or the management closes voluntarily. ES will evaluate the establishment for evidence of greasy dishes, utensils, and equipment and provide the information to their supervisor when factoring in if an immediate suspension is warranted.
6. Second violation for failure to have adequate hot water temperature at dishwashing point of use and utensils or other equipment contains debris or grease buildup. See 11 for hand washing areas.	6. Intent to suspend (30 days). Verify that water heating fixtures are sized appropriately using permit conditions and that no changes have occurred in equipment installed. The applicable supervisor will verify with the Office of Administrative Hearings that an appeal request has not been received prior to issuing immediate suspension.
7. Sewage leaking to the ground surface outside (malfunctioning septic system or broken waste line).	7. Intent to suspend (30 days). Make referral to Groundwater Program for septic system malfunction, to the County Water Quality Program for municipal system failures or situations where contamination of a creek, river, etc. are involved. The applicable supervisor will verify with the Office of Administrative Hearings that an appeal request has not been received prior to issuing immediate suspension.
8. Chronic situations involving poor food handling problems, poor food storage temperatures, or other situations which might reasonably be expected to contribute to a foodborne illness outbreak.	8. Intent to suspend (30 days) if deemed appropriate after conversation with Supervisor and/or Program Manager. If rule violation is not corrected during visit on day 31, an Immediate suspension may be issued after consulting with a Program Manager. If closure occurs, the establishment will close until facility staff have been trained by ES. Closure will equate to at least 1 business day. The applicable supervisor will verify with the Office of Administrative Hearings that an appeal request has not been received prior to issuing immediate suspension.
9. Facility is found to be operating without a valid operating permit.	9. NOV/ Cease of operation notice issued. Criminal summons or police citation issued for operation without

Enforcement Actions

	a permit for repeat offense after consult with Supervisor and Program Manager. See EHF-02 for more instructions.
10. Facility is found to be operating without displaying the sanitation grade card previously posted by the EHS.	10. Warning documented on comment addendum form or inspection report and grade card moved to correct location. Intent to suspend for 2nd offense and grade card moved to correct location. Criminal summons for ongoing violations after consult with Supervisor and Program Manager. See EHF-02 for more instructions.
11. Cold or tempered water not available at hand wash sink (only hot water above 110 degrees F is available).	11. Intent to suspend permit (30 days) if there are other facilities where hands can be washed that are working properly. Immediate suspension if there are no other functioning handwash facilities and owner/operator does not voluntarily close. Prior to permit action inspector must evaluate if lack of hot/cold/tempered water at a sink is causing non-compliance hands washing. ES will not issue an ITS due to the absence of hot water alone. However, if the absence of hot water or a hot water temperature above 120 F at the hand washing sink is causing staff to not wash their hands permit action may be warranted. The applicable supervisor will verify with the Office of Administrative Hearings that an appeal request has not been received prior to issuing immediate suspension.

The following shall be reported to the Program Manager:

- Immediate reporting of any immediate suspension or revocation of a permit to operate.
- Prior notification of any intent to initiate legal action and ongoing updates of actions in progress.

Action	Activity	PSC	Reversible	Transitional	Follow-up	Initial Documentation	Followup Documentation
Intent to Suspend (ITS)	Inspection Reinspection Visit Status Change	A, B, C, I, K, M, S, T, U, X	Intent Lifted if prior to E status. Permit Reinstated if ITS results in E status	Yes**	30 days	Enter activity resulting in the ITS into database. In the "Suspend/Revoke" field, select "Intent to Suspend" and enter the rule number(s) violated that caused the ITS to be issued. Comments must be written as a violation, not a statement of the rules. The PSC will not change at this time.	• If the violation has been corrected, enter an activity in database with a comment indicating the violation has been corrected and the ITS has been lifted. • If an appeal has been filed with OAH, enter an activity in database with a comment indicating the ITS is being appealed. The facility may continue to operate until the outcome of the appeal is determined. DO NOT change the "Suspend/Revoke" field. • If the violation has not been corrected and an appeal has not been filed with OAH, enter an activity in database. Change the permit status to E and enter a comment to the effect that the violation has not been corrected and that the suspension is in effect. DO NOT issue an Immediate Suspension or make a change in the "Suspend/Revoke" field.
Intent to Revoke (ITR)	Inspection Reinspection Visit Status Change	A, B, C, I, K, M, S, T, U, X	Intent Lifted	Yes**	30 days	Enter activity resulting in the ITR into database. In the "Suspend/Revoke" field, select "Intent to Revoke" and indicate the rules violated which are causing the ITR to be issued. The PSC will not change at this time.	• If the violation has been corrected enter an activity in database with a comment indicating the violation has been corrected and the ITR has been lifted. • If an appeal has been filed with OAH, enter an activity in database with a comment indicating the ITR is being appealed. The facility may continue to operate until the outcome of the appeal is determined. DO NOT change the "Suspend/Revoke" field. • If the violation has not been corrected and an appeal has not been filed with OAH, enter an activity in database. Change the permit status to G and enter a comment to the effect that the violation has not been corrected and that the revocation is in effect. DO NOT issue an Immediate Revocation or make a change in the "Suspend/Revoke" field. After revocation, a new permit must be issued for facility to reopen.
Immediate Suspension (IS)	Inspection Reinspection Visit Status Change	A, B, C, I, K, M, S, T, U, W, X	Permit Reinstated	No#	No	Enter activity resulting in the IS into database. In the "Suspend/Revoke" field, select "Immediate Suspension" and indicate the rules violated which are causing the IS to be issued. Change the PSC to E at this time.	• If the violation is corrected at any time, enter an activity in database with a comment indicating the violation has been corrected and the permit has been reinstated. Change the PSC to the one in effect prior to the suspension unless another status is appropriate. If an appeal has been filed with OAH, enter an activity in database with a comment indicating the IS is being appealed. The facility may not operate until the outcome of the appeal is determined. DO NOT make an additional entry in the "Suspend/Revoke" field or change the PSC.
Immediate Revocation (IR)	Inspection Reinspection Visit Status Change	A, B, C, I, K, M, S, T, U, W, X	No##	No	No	Enter activity resulting in the IR into database. In the "Suspend/Revoke" field, select "Immediate Revocation" and indicate the rules violated which are causing the IR to be issued. Change the PSC to G at this time.	• An IR is not reversible unless an appeal is filed with OAH and the court finds for the plaintiff. If this is the case, enter an activity in database documenting the outcome. Change the PSC to the one in effect prior to the revocation unless another status is appropriate. In the case of an IR that is not appealed or where an appeal is lost, no further action is required in database. The owner will have to correct ALL violations at the site and qualify for a permit as a new facility. A new facility ID number will be required.

** ITS/ITR item must be corrected prior to issuing a transitional permit unless supervisor or manager has been consulted and concurs with request to issue the permit prior to correcting the item.
# Transitional permit is not possible while the permit is suspended. A new owner/operator could correct violations, have the existing permit reinstated, and then obtain a transitional permit (ex. Establishment on D status).
Unless the Department's action is appealed and the OAH finds for the plaintiff.

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health
Risk Control Plan

Establishment Name:	**Type of Facility:**
Physical Address:	**Person in Charge:**
Inspection Date/Time In:	**Inspection Date/Time Out:**

Violation Citation and specific observation noted during inspection:

Risk factor to be controlled:

☐ **Food from Unsafe Sources** ☐ **Improper Holding Temperatures** ☐ **Poor Personal Hygiene**
☐ **Inadequate Cooking Temperatures** ☐ **Contaminated Equipment and Cross Contamination**

Hazard (most common, significant):

☐ **Biological** ☐ **Chemical** ☐ **Physical**

How will active managerial control be achieved:(Who is responsible for the control, what monitoring and record keeping is required, who is responsible for monitoring and completing records, what corrective actions should be taken when deviations are noted, and how long is the plan to continue)

Procedures – Describe the procedure that will be created to make sure the violation(s) are corrected:

Training – Describe how you will train food employees on the procedures listed above:

Monitoring – Describe how the PIC/Manager/Food employees will monitor the violation(s) (ex. logs, temperature checks, visual checks:

Corrective Actions – Describe what will be done when procedures are not followed:

Who is responsible for ensuring procedures are completed, training has occured, monitoring and corrective action are happening per procedures in place?

How will the RCP results be shared with the inspector, and how often?

As the person in charge of the above location, I have voluntarily developed this risk control plan in consultation with the regulatory authority and understand its provisions.

Establishment Manager Signature	Date
Regulatory Official Signature	Date



Appendix H

Part III: Baseline and Program Assessment Communication: Industry and Community Relations

Content includes:

- **H1: Food Safety Training Flyers and Example Presentations (Risk Factor and Temporary Events)**
- **H2: Plan Review Letter of Recognition**
- **H3: Mecklenburg County Map with Attractions**
- **H4: Standard 7 – Certificate of Achievement**

Food Safety Tips



Get The Recipe For A Better Health Score!

Join the Mecklenburg County Health Department to learn about the Food Safety Risk Factors and the role you play in preventing foodborne illness.

This class is open to the public

Register for one of the sessions below:

Scan QR Code to Register

TUESDAY, MARCH 4TH
9:30-11:30 am
(North County Regional Library)

THURSDAY, MARCH 6TH
2:00-4:00 pm
(South Park Regional Library)

Scan me

TUESDAY, MARCH 11TH
1:30-3:30 pm
(Valerie C. Woodard Center)

WEDNESDAY, MARCH 12TH
1:30-3:30 pm *(Spanish session)*
(Valerie C. Woodard Center)

3205 Freedom Drive | Suite 8000 | Charlotte, NC 28208 | P: (980) 314-1620 | F: (704) 336-6894 | www.mecknc.gov

Consejos de seguridad alimentaria



¡Consiga la receta para alcanzar una mejor puntuación de salud!

Acompañe al Departamento de Salud del condado de Mecklenburg para aprender acerca de los factores de riesgo de la seguridad alimentaria y conocer cuál es su función para prevenir las enfermedades de origen alimentario.

Estas clases están disponibles al público.

Inscríbase en una de las siguientes sesiones:

Escanee el código QR para inscribirse.

MARTES, 4 DE MARZO
De 9:30 a 11:30 a. m.
(North County Regional Library)

JUEVES, 6 DE MARZO
De 2:00 a 4:00 p. m.
(South Park Regional Library)

Para escanear

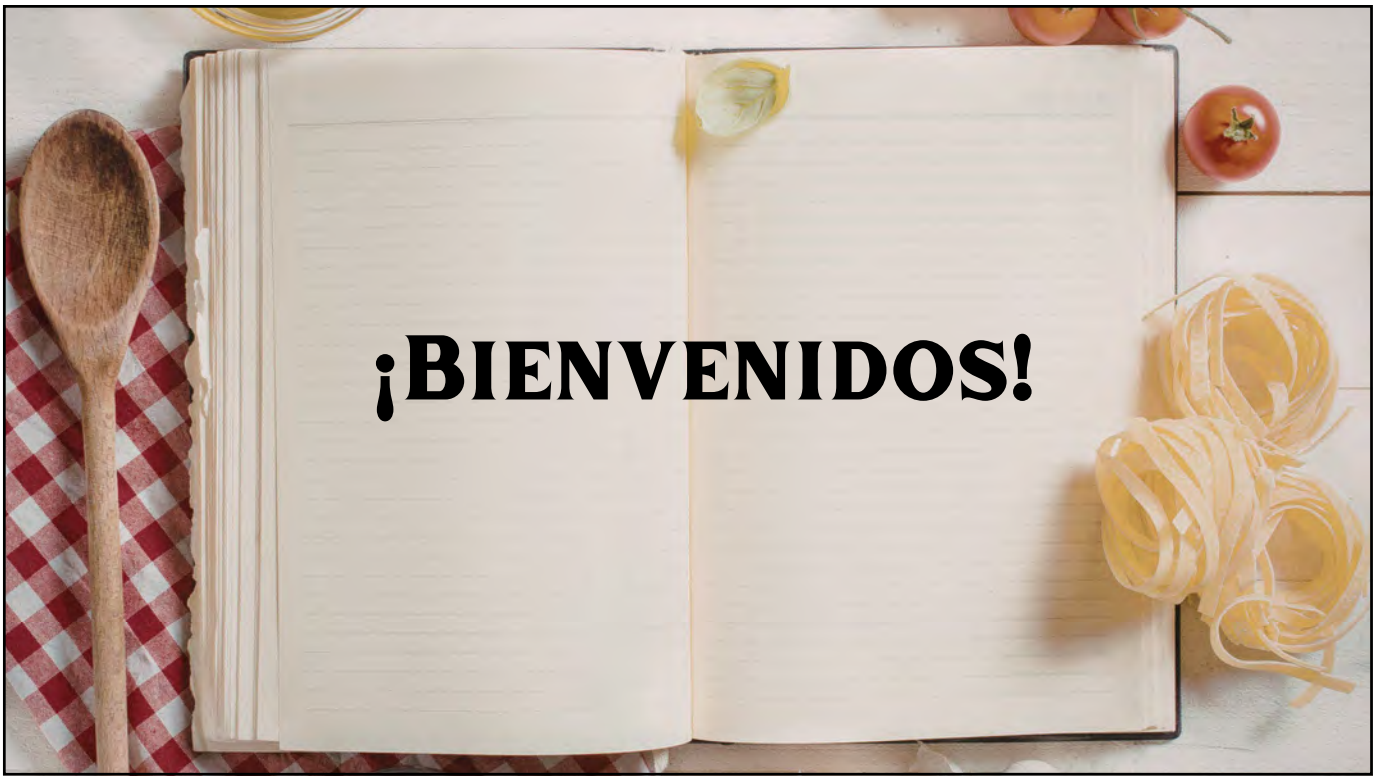
MARTES, 11 DE MARZO
De 1:30 a 3:30 p. m.
(Valerie C. Woodard Center)

MIÉRCOLES, 12 DE MARZO
De 1:30 a 3:30 p. m. *(sesión en español)*
(Valerie C. Woodard Center)

3205 Freedom Drive | Suite 8000 | Charlotte, NC 28208 | Tel.: (980) 314-1620 | Fax: (704) 336-6894 | www.mecknc.gov


DEPARTAMENTO DE SALUD DEL CONDADO DE MECKLENBURG
¡CONSIGA LA RECETA PARA ALCANZAR UNA MEJOR PUNTUACIÓN DE SALUD!
MECKLENBURG COUNTY
North Carolina

1


¡BIENVENIDOS!

2

Conceptos básicos de seguridad alimentaria



3

Lo que queremos que recuerden hoy....



4

CADA

F E C H A



CUENTA

5

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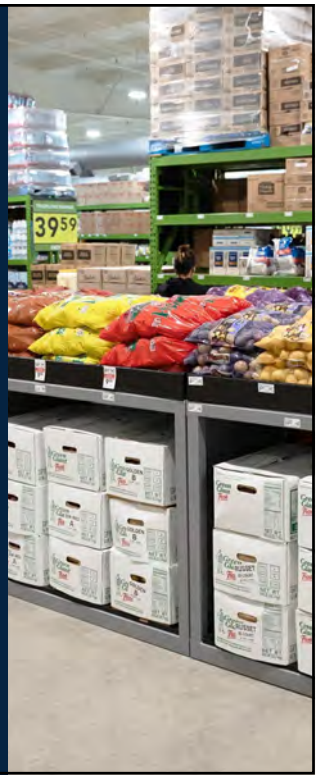
FUENTE

¿De dónde viene la mercancía?

- ¿En qué tipo de tienda compran su comida?
  - Por ejemplo: US Foods, Gordons…ext?
  - Por favor, guarden sus recibos.

- Asegúrense de que los alimentos provienen de fuentes aprobadas y solamente pueden ser preparados en el restaurante o un lugar con permiso en Carolina del Norte.

SIEMPRE COMPRA DE FUENTES DE CONFIANZA



6

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Equipo

Piensa sobre estas cosas:

- Lavar, enjuagar y desinfectar equipo y utensilios
  - Asegúrese de limpiar todo el equipo y los utensilios con la frecuencia requerida (cada cuatro horas)
  - Para desinfectar correctamente los equipos y utensilios, utilice lo siguiente:

Desinfectante	Rango
Cloro	50 – 200PM
Quat	150 – 400 PPM (depende)
Sink and Surface	272 – 700 ppm
Lava Platos de alta temperatura	Minimo 160F

- ¿En qué estado se encuentra su equipo?
  - ¿Está en buen estado, agrietado o roto, es el equipo para uso comercial o para su hogar?

7

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Cocinar

Estas son las temperaturas finales de cocción de los alimentos crudos.

- ***Nota:*** Puedes cocinar los alimentos poco hechos, como los huevos estrellados pero debes añadir una advertencia al consumidor en el menú.

Comida	Temperatura
Carnes como bistec, cerdo, cordero, huevos individuales	145F (62C)
Pescado, camarones	145F (62C)
Chorizo, hamburguesa, carne tierna, huevos juntos	155F (68C)
Pollo, pato, pavo	165F (73C)

Estas son las temperaturas de recalentamiento de los alimentos.

Comida	Temperatura
Alimentos recalentados que han sido cocinados y enfriados	165F (73C)
Alimentos recalentados de origen comercial	135F (57C)

8

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HIGIENE

- Lavate las manos correctamente y con frecuencia
- Utilice guantes al manipular alimentos listos para el consumo.
- No vengas a trabajar enfermo e informa sobre las enfermedades transmitidas por los alimentos.
- Tenga un acuerdo de presentación de salud y capacite a sus empleados sobre la política de forma regular.





9

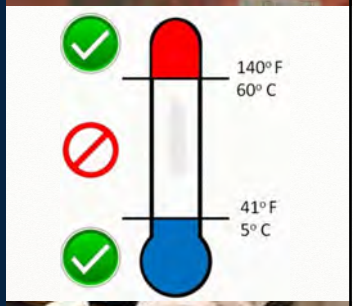
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ADECUADOS

- **Temperatura**
  - 135F (57C) o más - Mantener todos los alimentos calientes
  - 41F (5C) o menos - Mantener todos los alimentos fríos
- **Colocar la fecha de la comida**
  - Consúma los alimentos en un plazo de 7 días y deseche las sobras.
  - Se cuenta a partir del día de preparación más 6 días para un total de 7 días.
- **Enfriar los Alimentos**
  - Los alimentos cocinados deben refrigerarse de 135F a 41F en seis horas. Es importante que la temperatura se reduzca de 135° F a 70° F dentro de las dos primeras horas.
  - Es importante utilizar métodos que permitan enfriar los alimentos rápidamente.

PREGUNTA:
¿A QUÉ ALIMENTOS ES NECESARIO PONERLES FECHA?







10



¿PREGUNTAS?

11

ACTIVIDAD DEL DÍA

1 - (H - HIGIENE) - EMPLOYEE HYGIENE

- Understand employee Health and the importance of training all food employees
- Understand when to wash, how to wash and where wash
- Understand how to properly use gloves when working with food

2 - (A - ADECUADAMENTE) - COLD HOLDING

- what is cold holding (what temperatures)
- how to take temperatures properly
- methods to keep items 41F and below.

3 - (A - ADECUADAMENTE) - DATEMARKING

- El marcado de fechas evita enfermedades (Date marking eliminates illness)
- Regla de los 7 dias (7 day rule)
- Fecha clara y visible = seguridad (Clear and visible date = safety)

4 - (A - ADECUADAMENTE) - COOLING

- Reducir el tamaño ó la profundidad de las porciones.
- Usar baños de hielo o de agua fría.
- Emplear equipos especializados de enfriamiento rápido.

12

Temporary Food Events & YOU



A Journey through the World of Festival Food
Mecklenburg County Plan Review

1

Permitting Process- Before the Event

- In Mecklenburg County: All applications are reviewed by MCHD Plan Review
- The event must have an Event Organizer
- The Organizer acts as the conduit from the Vendors to MCHD
- The Organizer must complete a separate application for the overall event
- The Organizer must collect the Vendor applications, ensure fees are paid and submit a packet to MCHD which includes all applications, map and relevant information per the rules.
- After review, and possible revisions to the applications, Plans Examiner sends the packet to the ASAs (admin support assistants) for entry into CDP

2

Permitting Process

- Prior to the event, staff assigned to the TFE will sign out the packet/file and contact the organizer to confirm permitting date/time
- Staff must review the permits and any special notes from the PE's
- Staff are never responsible for collecting fees or issuing permits which have not had plan review approval
- When on site to permit, staff are not expected to wait for an unreasonable time for vendors to set-up – check w/ supervisor for the definition of "unreasonable"
- Staff are required to post the permit in the TFE set-up in a conspicuous place – have tape w/ you
- If a commissary permit is required, the inspector in the routine territory will be responsible for permitting – supervisors will coordinate
- Staff must turn in, to her/his supervisor, copies of TFE permits/packet (in mailbox)

3

TFE Permits

Rule .2665 describes the minimum information required on the TFE permit and application:

see rules and applications

4

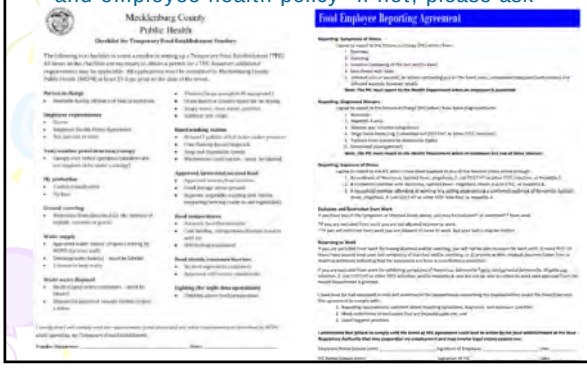
TFE Permit site visit

- Health Department staff will make an on site visit to evaluate each vendor's set up
- Health staff will use to the TFE Vendor Checklist to ensure vendors have all required equipment.
- Health staff will review the application to ensure approved menu matches the food on site

5

TFE Vendor Checklist

- Each vendor should have a copy of the check list and employee health policy- if not, please ask


Mecklenburg County
Public Health

Food Employee Reporting Agreement

6

Safe food-handling practices are necessary!

7

Sources of Food

- Must comply w/ the Food Code – no home-cooked/prep
- Cannot be leftovers from another event
- Cannot come from other States unless reciprocity is granted by NCDHHS EH (exception = commercially packaged product purchased from an approved source such as Sam's Club, etc.)
- Must have invoices (particularly if no local commissary or food service establishment is used to prepare food in advance)
- Food must be on site to verify the above although NO PREP/COOKING allowed in TFE prior to permitting

8

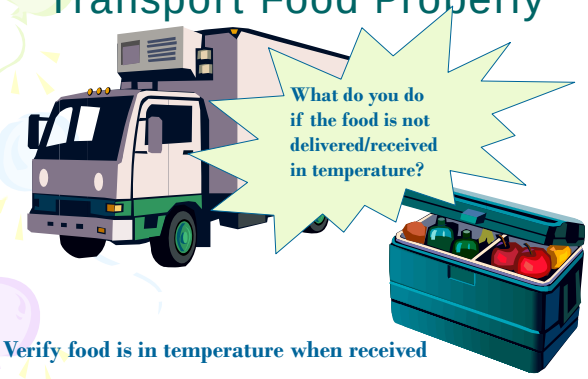
No Unidentified Foods Permitted!



Would this ever be permitted at a TFE?

9

Transport Food Properly



What do you do if the food is not delivered/received in temperature?

Verify food is in temperature when received

10

Food Storage

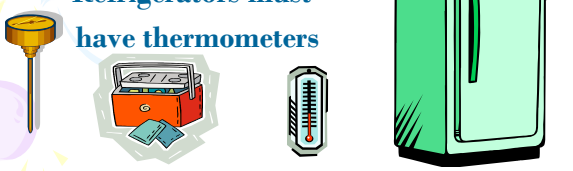


Store all food off the ground

11

Cold Food

- Keep cold food at or below 41°F
  - Must have thermometers to check food temperature
  - Refrigerators must have thermometers



12



Keep foods very hot!

13

Accurate Thermometer



14

Raw Meat, Poultry, Fish

Items such as raw meat, hamburgers, chicken, fish must be purchased ready-to-cook



15

Kabobs

On-site Kabob preparation requires approval from MCHD



16

Food Particulars

- Salads w/ cooked/cooled ingredients are NOT permitted to be prepared in the TFE or TFE commissary
- They can be prepared at a restaurant or food stand or purchased from Sam's, BJ's, or grocery store, etc.
- Examples: potato, macaroni, chicken salads, etc.



17

Food Particulars

- RTE may not come in direct contact w/ ice – tightly closed food bags containers must be used
- Note: refrigerators may not hold temp in hot weather – freezers may be needed
- Non-mechanical coolers must have a drain for cold holding

18

Cold Foods





Use a lot of ice + must have a drain — OR — mechanical freezer

19

Food Particulars

NO cooking/cooling/re-heating permitted UNLESS prior approval from PE's is received

BBQ must be prepared daily



20

Food Particulars

- Prep sink required for RTE fruit/veggies

(ex. Lettuce for hamburgers, fresh Fruit, melons, ect.)





21

Food Particulars

What about customer self-service such as condiments, salad bars or buffets?

22

Food Safety

Condiments must be in squeeze bottles, containers with pumps or packets



23

Condiments





Packets — Pumps — Squeeze Bottles

24

Employees

All hygiene rules apply:

- No smoking/eating
- Hair restraints
- Hand washing
- No Bare Hand Contact w/ Ready To Eat
- Employee Health Policy – PE's provide info to Organizer/Vendors

25

Hand Washing

Facilities must be provided with 2 gallons of free-flowing warm water…



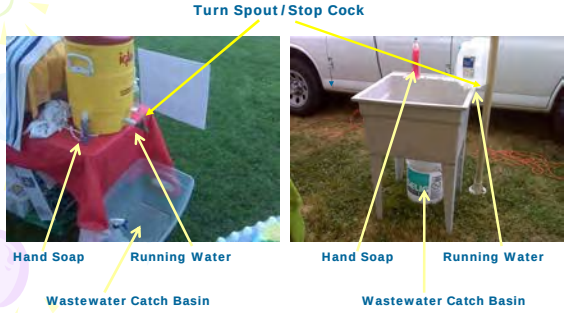


Plus soap & towels



26

Hand-Washing Set-up



27

Utensils & Equipment

- Wash, rinse, sanitizing required=3 basins method or other equivalent method*
- Sanitizer solution & testing method
- Air-drying surface or drain board
- Stored: protection from contamination

*Pre-approved in Plan Review process

28

Wash/Rinse/Sanitize



Wash
Hot/Soapy Water

Rinse
Plain Water

Sanitize
Sanitizer

29

Heating Water

Utensil washing requires

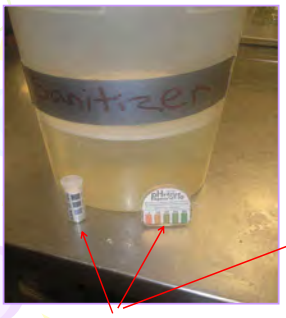
HOT WATER





30

Sanitizer





Test Strips Needed

31

Drain Board



3-compartment sink with drain board



Table for drain board

32

Physical Facilities

- Overhead covering required
- Bulk meats/roasts may be in a smoker that has a cover outside the tent
- Grills for hot dogs, hamburgers, chicken breasts, etc. must be under tent



33

Physical Facilities

- Approved lighting required for night-time operations
- Proper chemical storage



34

Physical Facilities

- **Provide clean surroundings**
- **Provide protection from dust & insects:**
  - **3-sided tents**
  - **Effective use of fans**



35



3-Sided Tent

36

Fly Fans





37

Physical Facility

Protect your food from the public by using sneeze guards or barriers

(such as tables)

38



Sneeze Guards

39

Physical Facilities: Potable Water

- **Running water from an approved source shall be provided**
- **Food grade/drinking water hose labeled "Potable Water"**
- **Back flow prevention needed**



40

Potable Water

- All containers, etc. used for transport must be approved for potable water & used for no other purpose
- Containers must be cleaned/sanitized

41

Wastewater

- Cannot dump wastewater on the ground or in storm water drains!
- Must dump your wastewater in a Port-a-John or take it off site to dump into the sanitary sewer
- Label the Wastewater Container(s)

42

Waste



Garbage and wastewater must be disposed of properly





43

Toilets

Approved toilets must be provided for customers & workers



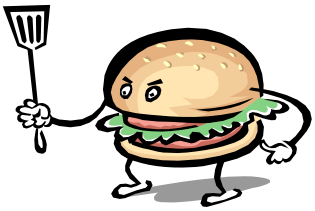
44

Port-a-John



45

The End



46



Refreshing Tips For Keeping Food Safe



1 Keep Door(s) Closed

Walk-in Cooler doors should only be open when entering or exiting. Avoid propping the door open when moving multiple items in and out of the refrigerator.

2 Maintain Air Temperature in your kitchen

Refrigerators work best when the kitchen's air temperature is 88 °F or lower.

3 Prep Top Coolers

Keep the lids closed on refrigerators that open from the top, so cold air doesn't escape. If you can't keep food that needs to be kept cold at 41°F or lower, contact your health inspector about using time instead of temperature to keep the food safe (for example, keeping food for 4 hours instead of keeping it cold).

4 Condenser Coil, Filters, and Fan Blades

Clean the condenser coil and fan blades at least once a month, or more often if needed. Check and replace filters regularly. Dust, dirt, grease, and debris can build up and make the unit work less efficiently. This can cause the unit to overheat, which can lead to expensive repairs.

5 Gasket and Hinges

Regularly inspect the door seals and hinges for any damage. If a hinge is broken or a seal is loose or broken, warm air can get inside the unit. This can lead to ice forming and increased energy use. Replace any broken parts quickly to ensure a tight seal.

6 Air Flow

Avoid overloading your walk-in cooler or freezer. Overloading can block the airflow and reduce the cooling efficiency.

7 Temperature

Check the temperature inside the walk-in cooler every day and change it if needed.

Make sure the temperature settings are correct: Refrigerators should be between 35°F and 38°F, and freezers should be between -10°F and 0°F.

8 Routine Maintenance

Have a professional regularly check your refrigeration system for possible problems like leaks, cracks, loose connections, or low refrigerant. Complete any needed repairs or changes to make sure it works well and is safe. Your walk-in cooler or freezer should be serviced at least twice a year, before and after the summer.







Consejos de refrigeración para mantener la comida segura



1 Mantenga las puertas cerradas

Mantenga las puertas cerradas – Las puertas de los refrigeradores portátiles solo deberían de abrirse al entrar o salir. Evite apoyar la puerta al mover varios artículos hacia dentro y afuera.

2 Mantener la temperatura en tu cocina

Las unidades de refrigeración dependen de una temperatura ambiente de 88°F o menos para funcionar correctamente.

3 Enfriador superior de preparación

Mesas de preparación de refrigeración – Mantenga cerradas las tapas de los refrigeradores que se abren desde arriba para que no se escape el frio. Si no puede mantener los alimentos con control de tiempo de conservación (TCS) de 41 °F o menos, comuníquese con su inspector de salud para usar el tiempo como control de salud pública.

4 Condenso de serpentín del condensador y aspas del ventilador

Limpie el serpentín del condensador y las aspas una vez al mes o según sea necesario. Revise y reemplace los filtros regularmente. El polvo, la suciedad y los residuos pueden acumularse y reducir la eficiencia. Esto puede causar sobrecalentamiento y reparaciones costosas.

5 Junta y bisagras

Verifique regularmente el sellador y las bisagras de la puerta por daños. Una bisagra dañada o un sellador suelto/roto pueden introducir aire caliente en la unidad, causando acumulación de hielo y mayor consumo de energía. Reemplace cualquier parte defectuosa lo antes posible para mantener un sello hermético.

6 Flujo de aire

Evite sobrecargar su cámara frigorífica o congelador. Sobrecargar puede bloquear el flujo de aire y reducir la eficiencia de enfriamiento.



7 Temperatura

Monitorear la temperatura dentro de la cámara frigorífica a diario y ajustarla acordemente. Verifique los siguientes ajustes de temperatura: Los refrigeradores deben estar entre 35°F y 38°F; Los congeladores deben estar entre -10°F y 0°F. Fuera de estos límites, el crecimiento de bacterias y moho aumenta, por lo que se reduce la calidad y la vida útil de sus alimentos.

8 Mantenimiento rutinario

Programa un mantenimiento regular con un profesional para revisar tu sistema de refrigeración en busca de problemas o inconvenientes potenciales, como fugas, grietas, conexiones sueltas, niveles bajos de refrigerante, etc. Completa las reparaciones o ajustes necesarios para asegurar un rendimiento óptimo y seguridad. Tu cámara frigorífica o congelador debe ser revisado al menos dos veces al año; antes y después de la temporada de verano.



MECKLENBURG COUNTY
North Carolina

U.S. FOOD & DRUG ADMINISTRATION

July 7, 2025

Matthew Cook
matthew.cook@mecklenburgcountync.gov

RE: Letter of Appreciation

Dear Matthew,

On behalf of the Food and Drug Administration (FDA), Office of Training, Education and Development (OTED) I would like to express my sincere appreciation for your dedication to excellence during the continuous process to improve, update, and ensure all FDA retail courses are reflective of the current Food Code. This is no easy feat to update, prepare and deliver over 20 courses annually.

Your commitment continues to have a significant impact on the nation, your community, and your peers. Our State, Local, Tribal, and Territory (SLTT) partners along with regulators from NASA, National Park Service (NPS), and Department of Defense (DoD) appreciate this virtual avenue to learn, discuss, and address the major public health issues they encounter daily. The course reviews from participants supports your efforts, expertise, professionalism, friendly and approachable attitudes.

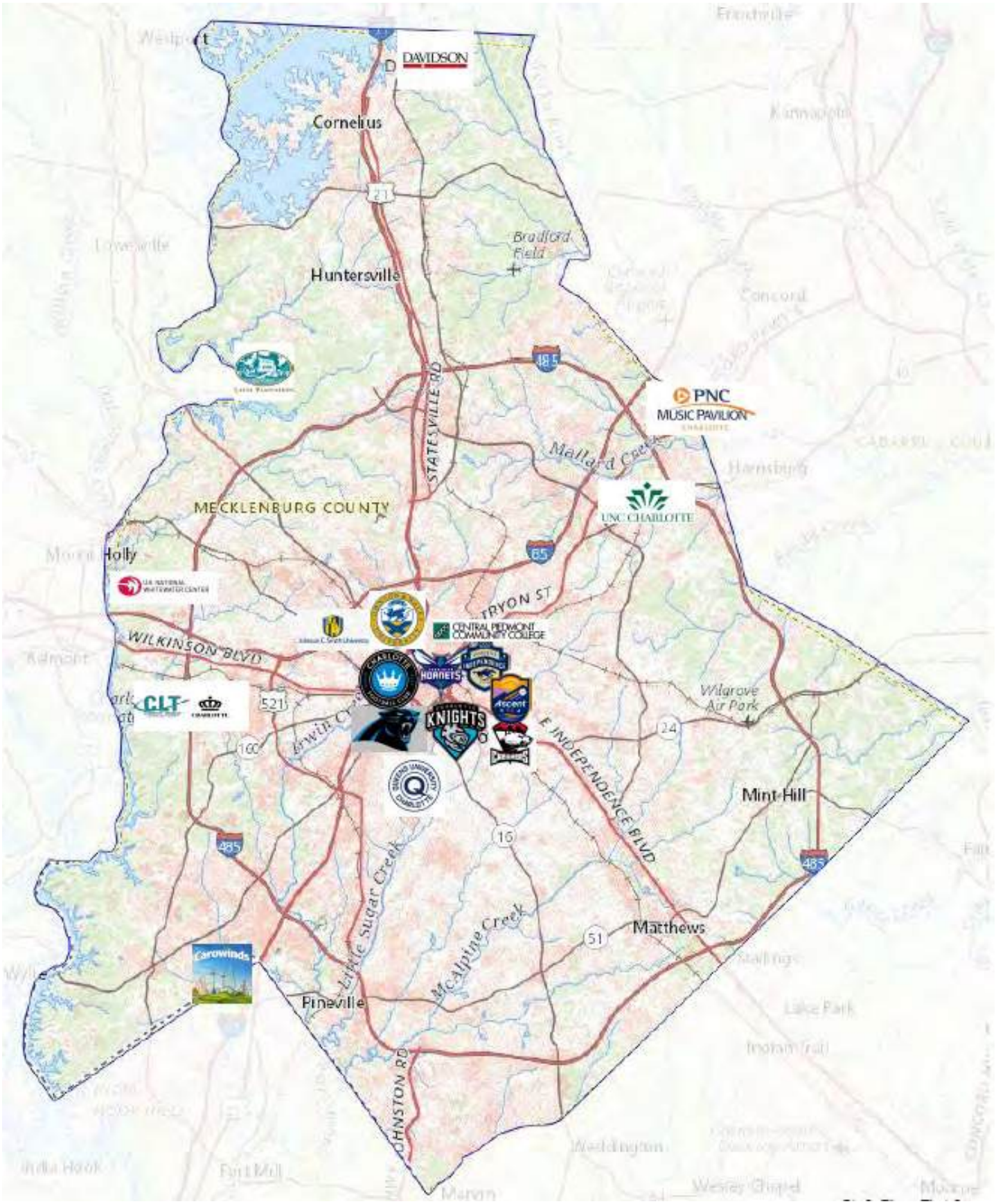
Matthew your expertise and professional guidance is commendable! Your participation with the FD207 Plan Review at Food Establishments is a complex course. Your assistance and willingness to deconstruct it into different levels will benefit all regulators during inspections. Your professional time is a precious commodity and I do appreciate your willingness to commit time for this team. I look forward to working with you in the future.

Your contributions have an overall positive reflection to public health issues nationwide. These contributions strengthen and stimulate the retail community of regulators and the retail industry. OTED commends your insightful approach to retail food safety issues and participating as leaders, mentors, and partners with National Environmental Health Association (NEHA) as a cooperative agreement with the FDA.

With gratitude,

Deirdra Holloway

Deirdra Holloway, MS RD
Commander, US Public Health Service
Senior Program Officer - FDA/OII/OTED
Deirdra.holloway@FDA.HHS.GOV


DAVIDSON
Cornelius
Huntersville
Bradford Field
STATESVILLE RD
485
PNC MUSIC PAVILION
Mallard Creek
MECKLENBURG COUNTY
UNC CHARLOTTE
Holly
65
TRYON ST
WILKINSON BLVD
CENTRAL PIEDMONT COMMUNITY COLLEGE
CLT
521
HORNETS
KNIGHTS
Wilgrove Air Park
24
E INDEPENDENCE BLVD
Mint Hill
16
Matthews
51
Little Sugar Creek
McAlpine Creek
Carowinds
Pineville
JOHNSTON RD

MECKLENBURG COUNTY
North Carolina

U.S. Department of Health and Human Services Public Health Service
Food and Drug Administration

Certificate of Achievement

Presented to

Mecklenburg County Public Health

For outstanding commitment to retail food safety and the continous improvement of the retail food regulatory program as demonstrated by meeting

Standard #7 - Industry and Community Relations

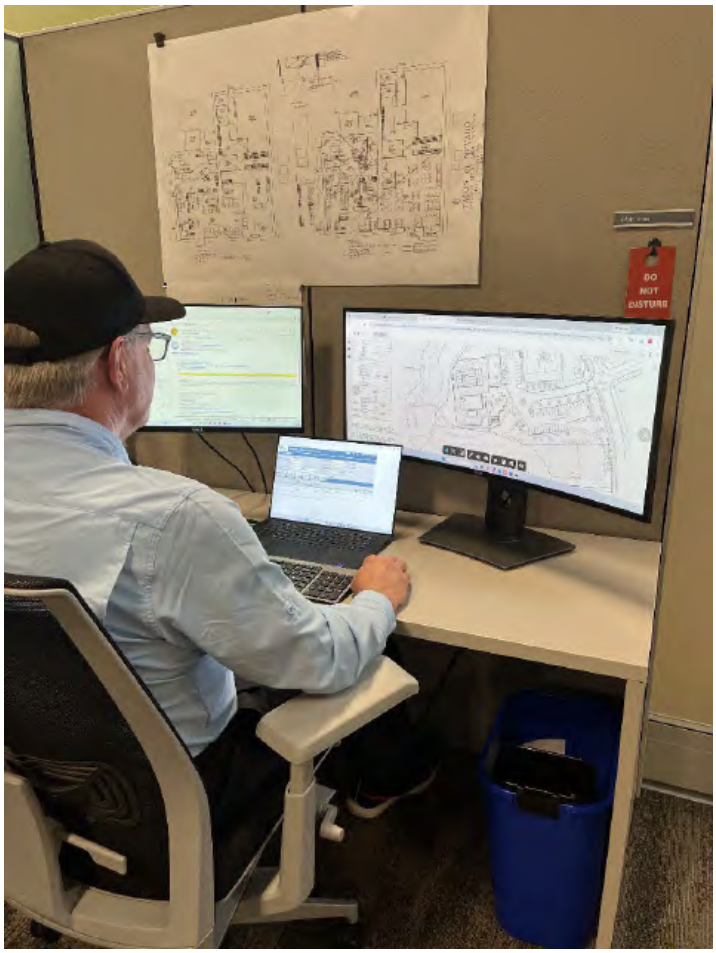
Of the FDA Voluntary National Retail Food Regulatory Program Standards

Donna M Wanucha, REHS
FDA Retail Food Specialist

Elizabeth O'Malley
FDA Retail Food Protection Branch Director

FDA U.S. FOOD & DRUG ADMINISTRATION

Achieved on: February 17, 2023



Appendix I

Part III: Baseline and Program Assessment Program Support and Resources

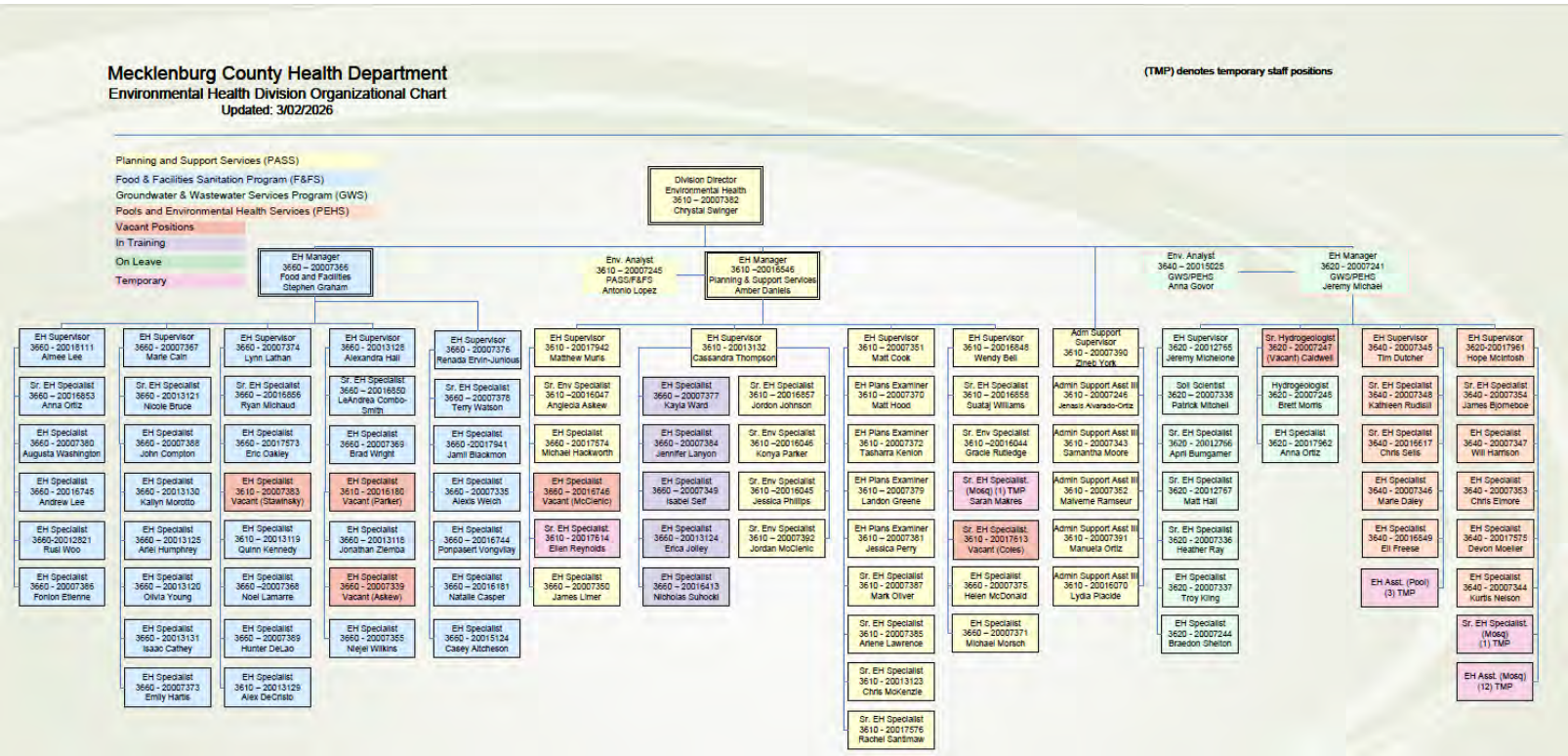
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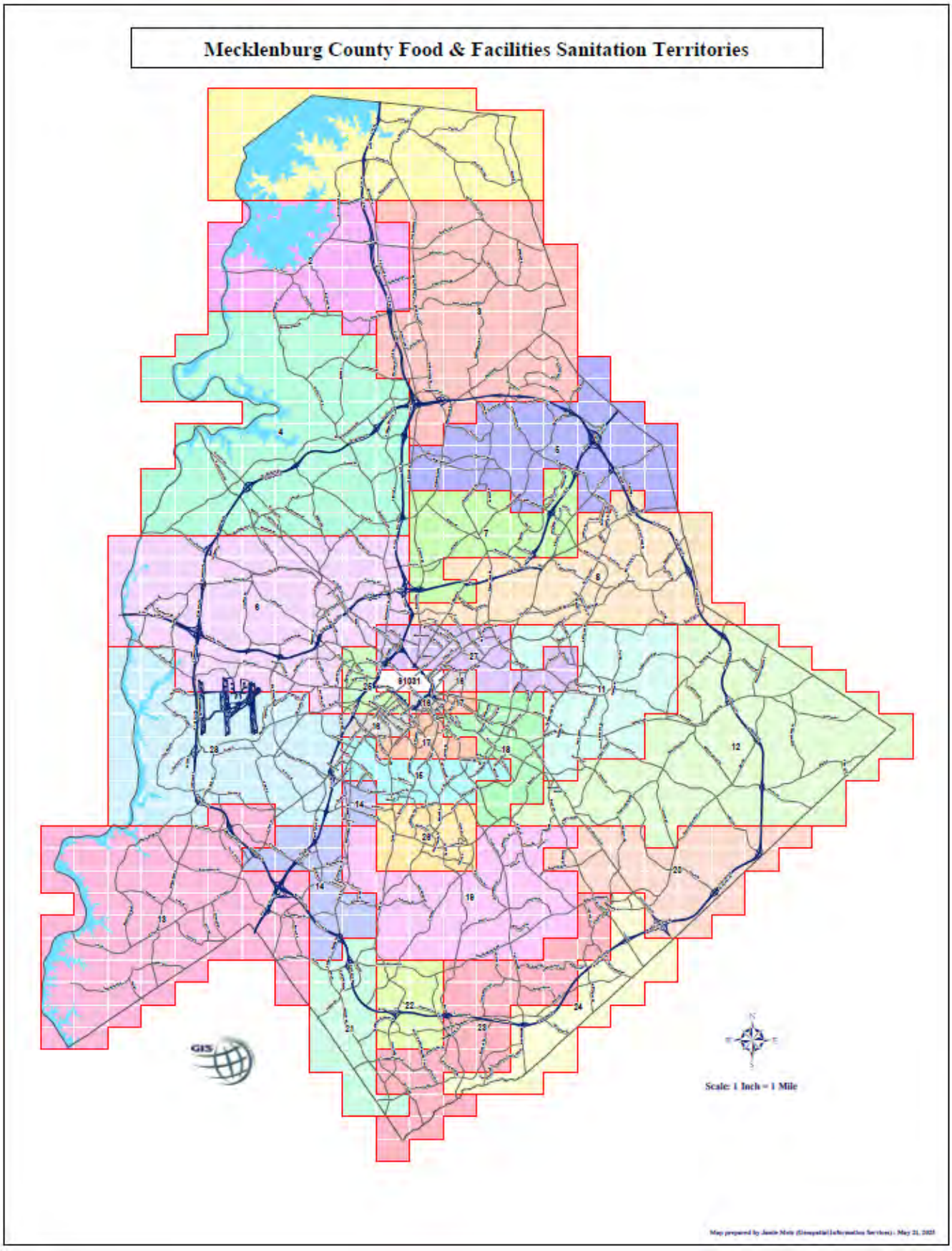
- **I1: Mecklenburg County Organization Chart**
- **I2: Environmental Health Environmental Health Specialist Territories**

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Environmental Health

Organization Chart




Mecklenburg County Food & Facilities Sanitation Territories
GIS
Scale: 1 Inch = 1 Mile



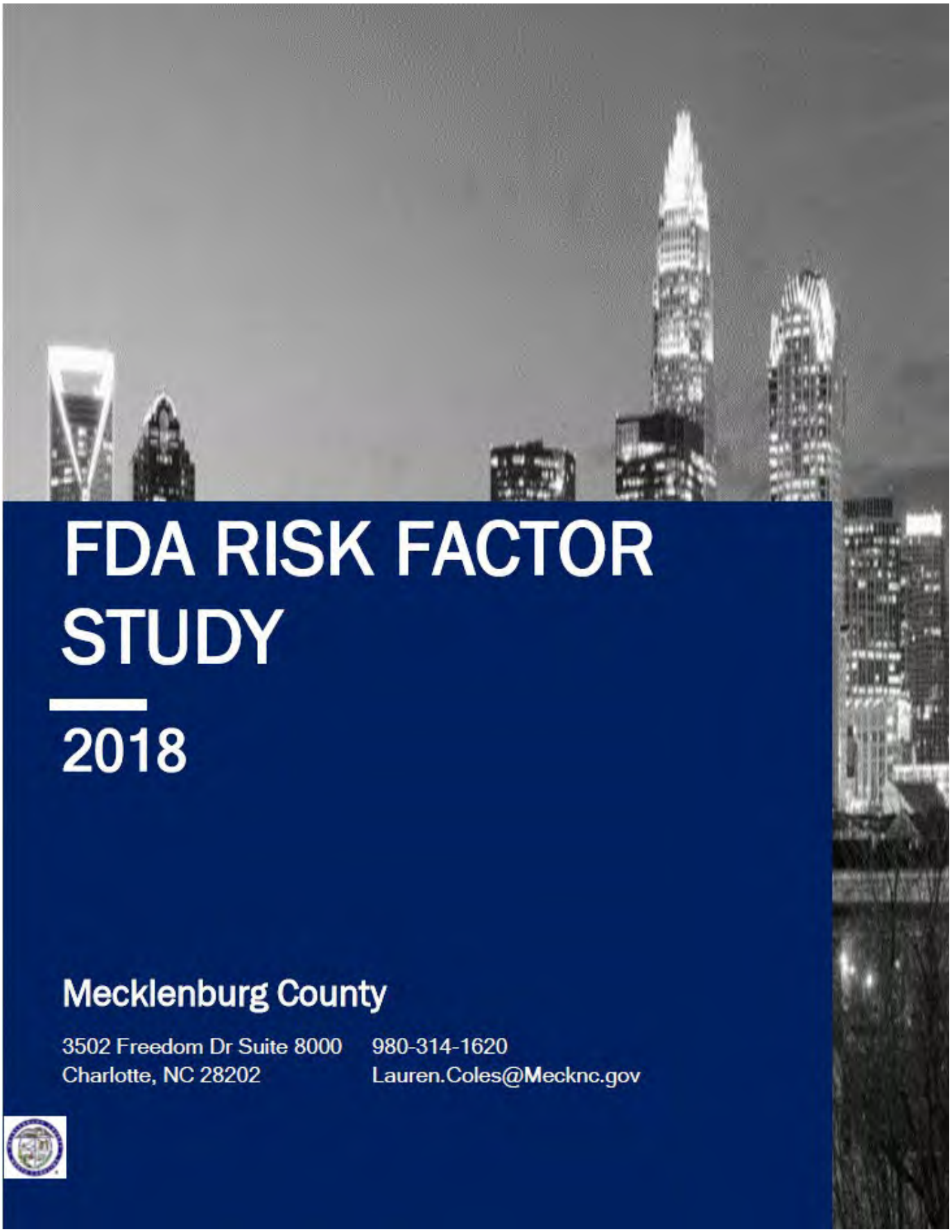
Appendix J

Part III: Baseline and Program Assessment
Program Assessment

Content includes:

- **J1: 2018 Mecklenburg County Environmental Health Risk Factor Study**
- **J2: 2023 Mecklenburg County Environmental Health Risk Factor Study with Attached Resources**
- **J3: Food Safety Management System Tool**
- **J4: Standard 9 – Certificate of Achievement**

MECKLENBURG COUNTY
North Carolina



FDA RISK FACTOR STUDY

2018

Mecklenburg County

3502 Freedom Dr Suite 8000
Charlotte, NC 28202

980-314-1620
Lauren.Coles@Mecknc.gov

2018 Mecklenburg County NC Risk Factor Study of Foodborne Illness Risk Factors

Background

In 1998, the US Food and Drug Administration's (FDA) National Retail Food Team initiated a ten-year voluntary study to measure trends in the occurrence of foodborne illness risk factors- preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention (CDC) as contributing factors to foodborne illness outbreaks at the retail level. Specifically, the study included data collection inspections of various types of retail and foodservice establishments at five-year intervals (1998, 2003, and 2008) in order to observe and document trends in the occurrence of the following foodborne illness risk factors:

- Food from Unsafe Sources
- Poor Personal Hygiene
- Inadequate Cooking
- Improper Holding/Time and Temperature
- Contamination Equipment/Protection from Contamination

The FDA risk factor study provides a solid foundation for developing program intervention strategies and justifies program resources. Volunteering in the National Retail Food Regulatory Standards allows local agencies to adopt this solid foundation to achieve national uniformity. Mecklenburg County values achieving national uniformity for retail food protection and has been enrolled in this voluntary program since 2010. Mecklenburg County last conducted a risk factor study in 2011. Since 2011, extensive changes have been made to the Voluntary National Retail Food Regulatory Program Standard guidelines. As a result, the data from the 2011 risk factory study will be considered a stand-alone study. It is also important to note that the 2011 risk factor study was conducted before North Carolina adopted the 2009 FDA Food Code.

STUDY OBJECTIVES AND PURPOSE

The purpose of the 2018 risk factor study is to collect data to establish a baseline against which future performance can be measured. Over time, this data will also determine the following for each facility type included in the study:

- Trends of improvement or regression in foodborne illness risk factor occurrence over time;
- Whether progress has been made toward the goal of reducing the occurrence of foodborne illness risk factors

The objectives of this study will be to:

- Establish baseline data for facility compliance with risk factors
- Determine the foodborne illness risk factors that are in most need of priority attention
- Design intervention strategies focused on reducing the occurrence of the risk factors determined to need priority attention

INDUSTRY SEGMENTS AND FACILITY TYPES INCLUDED IN THE STUDY

Data was collected from the following industry segments:
(1) Health Care
(2) Schools (K-12)
(3) Restaurants
(4) Retail Food Stores

The four categories are further subdivided into facility types:
(1) Health Care
(a) Hospitals
(b) Long-Term Care Facilities
(2) Schools
(a)Base Kitchen
(b)Onsite Kitchen
(c)Combination Kitchen
(3) Restaurants
(a) Fast Food
(b) Full Service
(4) Retail Food Stores
(a) Deli Department
(b) Seafood Department
(c) Produce Department

To ensure consistency in measuring trends from one risk factor study to the next, definitions were written for each facility type. Definitions are noted in Tables 1-4.

Table 1: Description of Facility Types that Comprise the Health Care Industry

Facility Type	Description
(a) Hospitals	A food service operation that provides for the nutritional needs of inpatients, by preparing meals and transporting them to the patient's room and/or serving meals in a cafeteria setting (meals in the cafeteria may also be served to hospital staff and visitors).
(b) Long-Term Care Facilities	A food service operation that prepares meals for the residents in a group care living setting such as nursing homes and assisted living facilities.
NOTE:	For the purposes of this study, healthcare facilities that do not prepare or serve food to a highly susceptible population, such as mental healthcare facilities, are not included in this facility type category.

Table 2: Description of Facility Types that Comprise the School Industry

Facility Type	Description
(a) Base Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Meals are fully prepared in the onsite kitchen and some meals are shipped to other locations (including multiple locations within the same school).

(b) Onsite Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. All meals are prepared and serviced on-site.
(c) Combination Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Some meals are prepared and served on-site; while others are fully prepared or partially prepared in a central or base kitchen.
NOTE:	For the purpose of this study, Central Kitchens that prepare meals for serving at receiving/satellite schools, but do not serve any student meals on-site at the Central Kitchen, are not included as part of the study sample. In addition, restaurants or other retail food operations that provide meals to school facilities are not included as part of the study sample for schools. Also, Receiving or Satellite Kitchens that obtain partially or fully prepared meals from a base or central kitchen and conduct little or no food preparation are not included as part of this study. Other school food service facilities eliminated from the study sample include those for behavioral health schools, those serving a high school population only, any schools which had limited to no food prep such as schools holding a permit for only handling catered food. Permitted preschool kitchens within a childcare facility were eliminated as they had little to no food prep; however, elementary schools which also serve preschool children were included.

Table 3: Description of Facility Types that Comprise the Restaurant Industry

Facility Type	Description
(a) Fast Food	Restaurants that provide food via counter service, wait, or drive through rather than full table service. Payment is made at a counter, not via check delivered to the table.
(b) Full Service Restaurants	Restaurants that offer food via full table service, even if they also offer a counter or drive through option. Food can be ordered and served, and payment taken at the table.
NOTE:	For the purpose of this study, the following operations are excluded: mobile food units (food trucks), pushcarts (hot dog carts), gas station/convenience stores, and caterers.

Table 4: Description of Facility Types that Comprise the Retail Food Industry

Facility Type	Description
(a) Deli Department	Operations selected from the supermarket and grocery store segments of the industry where food such as luncheon meats and cheeses, are sliced for the customers and where sandwiches and salads are prepared onsite or received from a commissary in bulk containers, portioned and displayed. Parts of the deli operations may include salad bars, pizza stations and any other stations or bars managed by the deli department. Other areas where meat and poultry products are cooked and offered for sale and managed by the deli department managers may also be included.
(b) Seafood Department	Operations selected from the supermarket and grocery store segments of the industry where seafood, is cut, prepared, stored, or displayed for sale to the consumer. In some retail food stores, the seafood department will be operated under the same manager who has responsibility over the meat and poultry department / operation. When the seafood department is combined with a meat and poultry department, the data collector will assess only those procedures and practices associated with the processing of seafood.

(c) Produce Department	Operations selected from the supermarket and grocery store segments of the industry where produce is cut, prepared, stored, or displayed for sale to the consumer. A produce operation may include salad bars or juice stations that are managed by the produce manager.
NOTE:	For the purpose of this study, only supermarkets or grocery stores with a permitted deli facility were included. If the retail food store also contained a permitted seafood and/or produce department where food items are cut, prepared and stored these facility types were also included. In-store sushi bars operated and managed as part of the retail food store business are considered part of seafood department / operation for the purposes of this Study. If the in store, sushi bar operation is under the management and operated by a separate business from the retail food store, it is not to be included as part of the data collection. Convenience stores, are not included as part of the Study sample.

SELECTION OF DATA COLLECTORS

Mecklenburg County selected a small group of 14 FDA Standardized Environmental Health Specialists to serve as data collectors for this study. These specialists also are regularly selected to serve as trainers for new staff and have a solid understanding of conducting risk-based inspections. This group was purposefully chosen to be a small group so that consistency in data collection could be maintained. Each of these specialists received data collection training by Donna Wanucha, the FDA Retail Specialist. All data collectors met at least weekly as needed to calibrate the collection process and consistent use of the marking instructions. The FDA Retail Specialist was consulted regularly for interpretation questions.

RANDOM SELECTION OF ESTABLISHMENTS

All facilities were pulled from a CDP system report and sorted according to the facility definitions and listed in an excel spreadsheet. All sorted facilities were tallied, and these numbers were given to the FDA Statistician to obtain the appropriate sample sizes as listed in Table 5.

Table 5: Statistical Breakdown of Facility Types

Facility type	Inventory	95/5	95/10
Hospitals	11	11	11
Long-term Care	54	48	35
Schools	156	112	60
Retail	124	94	55
Fast food	727	252	85
Full service	579	232	83

Mecklenburg County selected the sample size calculated by the FDA statistician for a 95% confidence with an estimate that would be within a 10% margin of error. Sorted facility lists were than randomized using an online randomizing system and put into individual master lists. This list was then divided amongst the 14 Environmental Health Specialists. If Specialists encountered any closed facilities or were denied entry, they were assigned the

next substitute from the master list. Substitutes were also assigned in cases where listed full-service facilities were discovered to be fast food facilities by definitions in Table 3.

DATA COLLECTION FORM

A data collection form was developed to assess the five CDC risk factors for foodborne illnesses for the 2013 Food Code. Currently North Carolina utilizes a version of the 2009 Food Code. The data collection format was modeled after the "FDA Retail Food Program Foodborne Illness Risk Factor Study Restaurant Data Collection Form" and the Rockingham County, NC data collection form. Data collection items 1-10 and 17 are segmented by the risk factors that they address. Assessing these 11 basic items meets the minimum standard of Standard 9. In addition, three questions were added to assess: handwashing facilities maintained and accessible, consumer advisory and time as a public health control. The Mecklenburg County FOODSHIELD database entry form was customized to match the data collection form (See Appendix A).

For each data collection item on the form, Specialists indicated the following compliance options, in accordance with the 2013 Food Code:

- **IN –** means that all observed occurrences were **IN** Compliance with the appropriate *FDA Food Code* provision for the data item or information statement.
- **OUT** – means that one or more of the observations made were **OUT** of Compliance with the appropriate *FDA Food Code* provision for the data item or information statement. An explanation of the specific criteria used for determining **OUT** of Compliance for each data item is to be recorded by the data collector on the data collection form.
- **NO** – means the data item or information statement was **Not Observed** during the inspection. The **NO** marking is used when an information statement is a usual practice in the food establishment, but the practice is **NOT** observed during the time of the inspection. For example, if a restaurant that seasonally serves shellfish was selected for the study, but the inspection occurred during non-shellfish season, then the information statements "B" and "F" are marked NO for the overarching data item **#17 – Food is received from safe sources** as illustrated below.
- **NA** – means the data item or information statement is Not Applicable. The NA marking is used when a data item or information statement is NOT a function of the food establishment. Using the data item table below as an example, if a restaurant does NOT cool cooked foods (information statement "A"), or does NOT cool foods prepared at ambient temperatures (information statement "B"), then ALL the information statements pertaining to cooling foods under data item 7 are marked NA. Since all the information statements (A through D) for this data item were marked NA, the data item will also be marked NA. More on the marking relationships between information statements and data items is presented in the next section.

CONDUCTING THE DATA COLLECTION

The 14 Environmental Health Specialists collected data by conducting unannounced visits independent of a routine compliance inspection. Upon arrival the EHS explained that the facility had been randomly selected to participate in a voluntary Risk Factor Study. The purpose and benefits of the Risk Factor Study were explained to the operators. It was also explained that data collected would not affect their score or replace a routine compliance inspection. Once granted access, data collectors began with a review of the facilities menu to determine processes conducted. This activity was followed by a quick walk through to identify the critical food processes being conducted at the time of the visit. The flow of the data collection is then prioritized, and observations recorded on the data collection form using the marking instructions (Appendix B).

DATA COLLECTION QUALITY ASSURANCE

Two Environmental Supervisors and one retired Environmental Health Program Manager hired as a temporary employee were assigned to enter and conduct quality assurance checks on all completed data collection forms. Although other staff could be granted access to enter data into the FOODSHIELD site, access was limited to only 3-4 people ensure uniform quality assurance on all items entered.

Data Collectors were provided all required materials: marking instructions, data collection forms (paper and electronic), facility assignments, 2013 food codes, a standardized acronyms list for equipment, and the 2013 FDA Food Establishment Risk Categorization of chart (See Appendix C). Staff were allowed to conduct no more than 2 risk factor study inspections the week prior to training by the FDA Retail Specialist. This allowed sufficient time to acclimate to the form and present the Specialist with any questions during training.

Environmental Health Specialists were contacted to discuss observations for clarification of any conflicting or unclear data that was collected. Large-scale inconsistencies, such as capturing ambient air temperatures for raw shell eggs, were addressed and discussed during calibration meetings. These meeting interpretations were captured in “RFS Clarification” documents and distributed to staff conducting data collection surveys.

TROUBLE SHOOTING

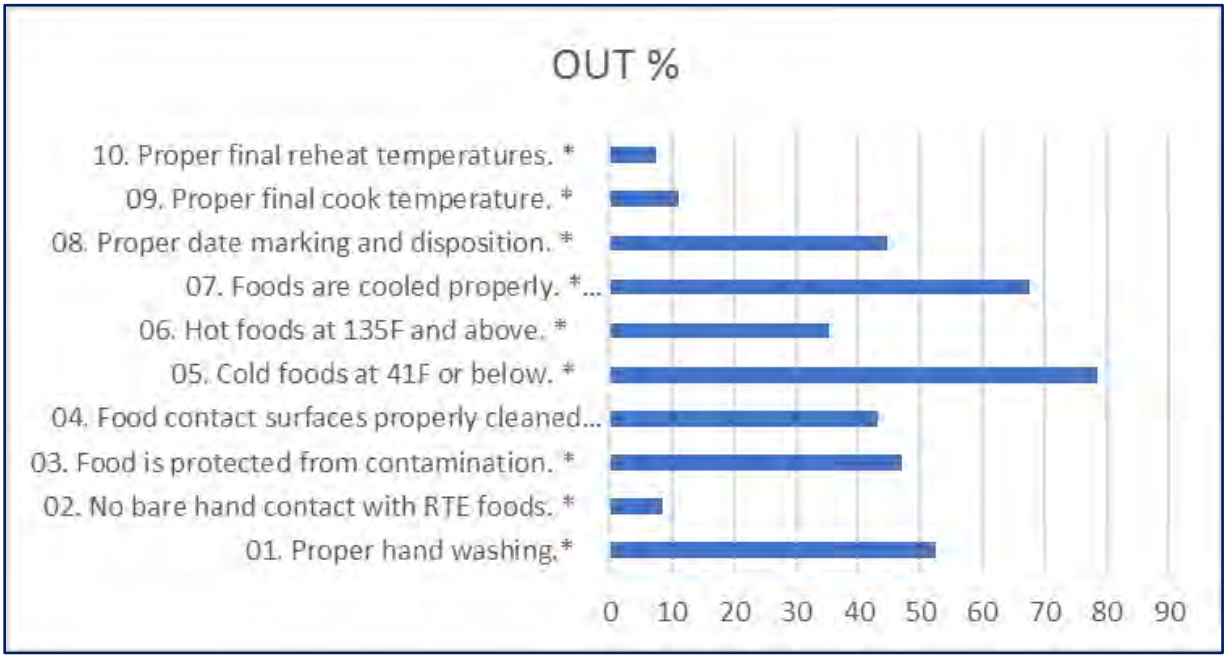
Some technical issues were encountered with the FOODSHIELD site while entering the data. When entering establishment information all data must be accurate prior to saving. If inaccurate data is saved, the establishment record would need to be deleted to correct the entry. Another technical issue encountered was after submitting a record, an error box would indicate item 1 was not answered, despite this information having been entered. Issues were reported to and resolved by the University of Minnesota Food Protection and Defense Institute.

To alleviate workload concerns by staff, provisions were made to account for data collection visits by designating a specific activity code in the Custom Data Processing system for these visits. To encourage staff to conduct thorough data collection visits, selected staff were permitted to include these visits in their monthly required inspection totals.

RESULTS

After all the data was entered into the FOODSHIELD database for statistical analysis, reports generated by FOODSHIELD were used to determine priority risk factors requiring intervention. Report 3A was utilized for an overview of out of compliance risk factors for the primary data items 1-10 of all facility types (Figure 1):

Figure 1: Percentage OUT for Primary Data Items 1-10.



COLD HOLDING

When analyzing Figure 1, the top priority data item reported out of compliance for all industry segments is foods requiring refrigeration being stored at 41F and below, data item number 05. It is important to note that the 2013 FDA Food Code requires refrigeration at 41F and below; however, at the time the data was collected, the NC Food Code required cold foods to be refrigerated at 45F and below. Maintaining proper cold holding temperatures helps to control the growth of Listeria Monocytogenes. Listeria Monocytogenes is a type of bacteria that can cause serious illness in immunocompromised populations. Listeria grows at a much faster rate at 45F than at 41F. North Carolina adopted a requirement of 41F and below on January 1, 2019, after the study was completed. When looking at this data it is important to note that having one food product above 41F would place the facility out of compliance with data item 05 in accordance with the marking instructions. Several other counties across the state have reported similar noncompliance rates for cold holding. The top industry segments out of compliance with cold holding were Restaurants and Retail Food Stores (See Table 6).

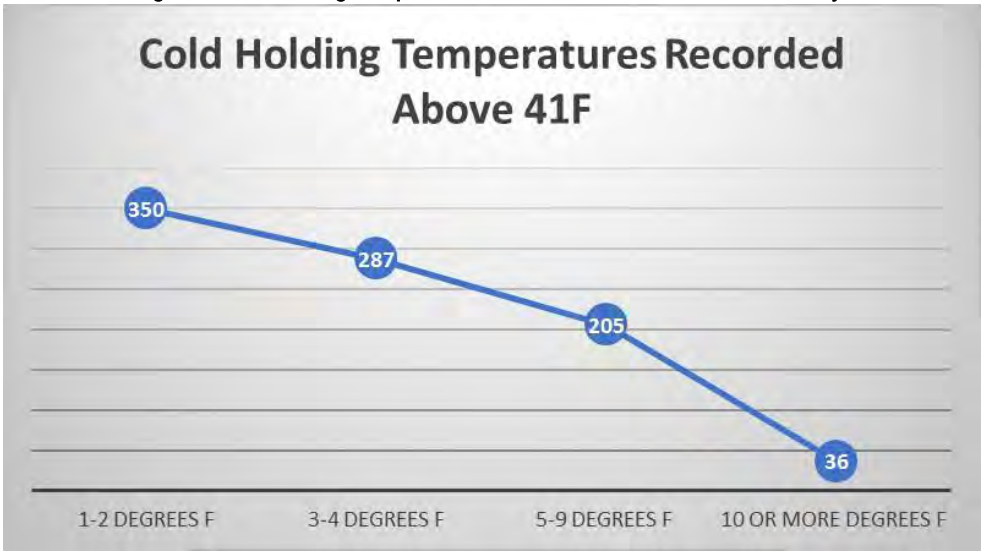
Table 6: Cold Holding Compliance by Industry Segments

Industry Segment	% OUT
Restaurants	94.3
Healthcare	68.9
Retail Food Stores	79.4
Schools	38.3

Within the restaurant industry both Full Service and Fast Food facilities demonstrated non-compliance rates over 90%. Data collected from Healthcare facilities indicated that Hospitals were out of compliance at a 90% rate, while Long-Term-Care facilities were at 63%. In the Retail Food industry, Delis and Produce areas saw non-compliance rates around 85%.

Food products within the Restaurant Industry were further analyzed to determine how many degrees above 41F products were found. The data presented in Figure 2 indicates that products found above 41F were most commonly found 1-2 degrees above 41F.

Figure 2: Cold Holding Temperatures Recorded for the Restaurant Industry.



COOLING

The second most frequent out of compliance data items is cooling. Proper cooling is assessed in item numbers 7A, 7B, 7C and 7D on the data collection report. Data item 7A determines whether cooked TCS food is cooled from 135F to 70F within 2 hours and from 135F to 41F or below within a total of 6 hours. Data item 7B determines compliance with cooling TCS foods prepared at ambient temperature and cooled to 41F or below within 4 hours. Data item 7C evaluates whether proper cooling methods or equipment was used. Compliance with data item 05 appeared to directly affect compliance with data item 07. If equipment within a facility is incapable of maintaining products at 41F as stated in data item 05 (cold holding) then the facility will not comply with data item 07 (cooling).

When compliance with cooling was further segmented by Industry, the data collected indicates that Full Service Restaurants were most out of compliance at 96.3%, followed by Hospitals at 90%, Retail Food Delis at 85.2%, Fast Food at 85%, Retail Produce at 83.3 and Long-Term Care Facilities at 62.9%. Schools and Retail Seafood departments were the most in compliance with cold holding at 41F. Retail Seafood departments were only 24.1% out of compliance and Schools were 38.3% out of compliance. Full Service industry segments are most out of compliance with data item 7A requiring food to be properly cooled from 135F. Data collected indicates that Hospitals, Retail Food Delis and Fast Food industry segments were most out of compliance with ambient air cooling under 7B.

HANDWASHING

Handwashing is assessed for compliance under data items 1A and 1B. Item 1A ensures hands are washed using proper procedure in accordance with 2-301.12 of the Food Code. Item 1B confirms employees are appropriately washing hands when required in accordance with 2-301.14 of the Food Code. The data collected indicated that all facilities in the study were 33.9% out of compliance with data item 1A and 43.3% out of compliance with data item 1B. This data demonstrates that employees had more difficulty with washing hands at the appropriate times. Restaurants and Healthcare facilities saw the highest out of compliance rates for handwashing. Data collected from restaurants showed 64% out of compliance rates and healthcare 57.8% (Table 7).

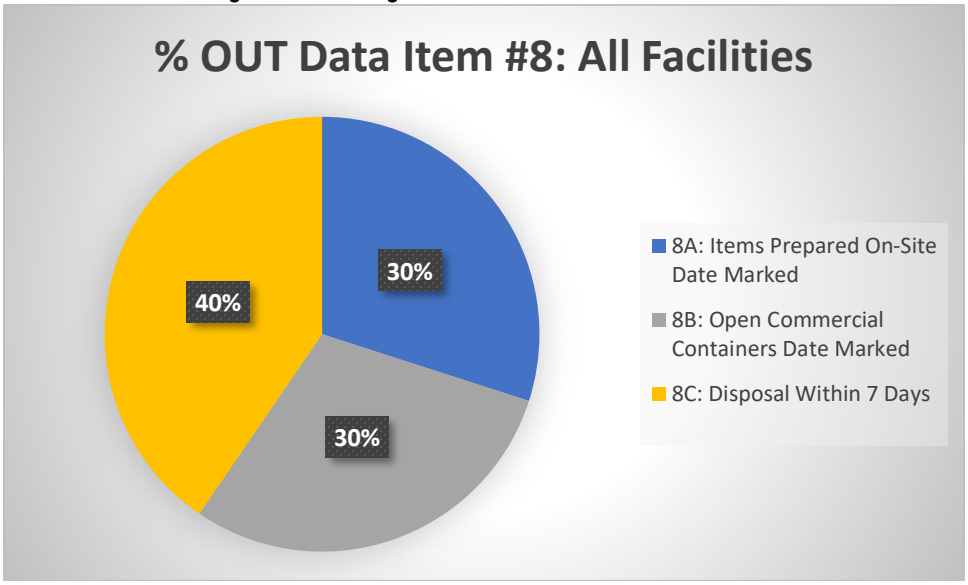
Table 7: Handwashing Compliance by Industry Segments

Industry Segment	% OUT
Restaurants	64.4
Healthcare	57.8
Retail Food Stores	40.2
Schools	36.7

DATE MARKING

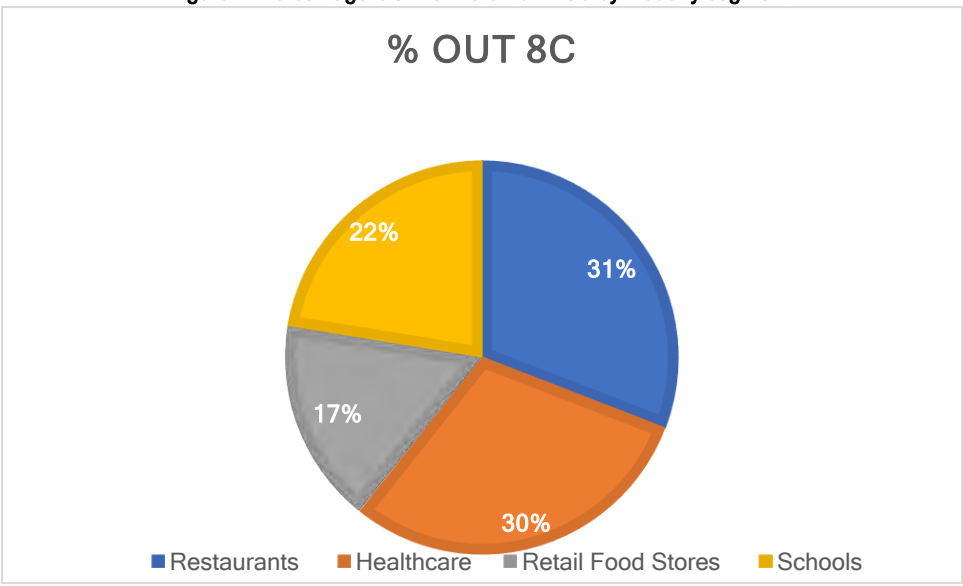
Information on date marking was collected using data items 8A, 8B and 8C. These items ensure compliance with 3-501.17 and 3-501.18 of the Food Code. Data item 8A determines if ready to eat, TCS food (prepared on-site) and held for more than 24 hours is date marked as required in 3-501.17 (A, C, D). Data item 8B determines if opened commercial containers of prepared ready to eat, TCS food held for more than 24 hours are date marked as required in 3-501.17 (B). Disposal of ready to eat, TCS food prepared on-site and/or opened commercial containers exceeding 7 days at 41F is determined by 8C as stated in 3-501.18. Facilities were more out of compliance with 8C indicating that facilities have more difficulty discarding foods beyond the 7-day hold time (See Figure 3).

Figure 3: Percentage OUT for Data Item #8 in all facilities.



According to the data for each industry segment, Restaurants and Healthcare facilities were the most out of compliance with 8C (See figure 4).

Figure 4: Percentage OUT for Data Item #8C by industry segment.

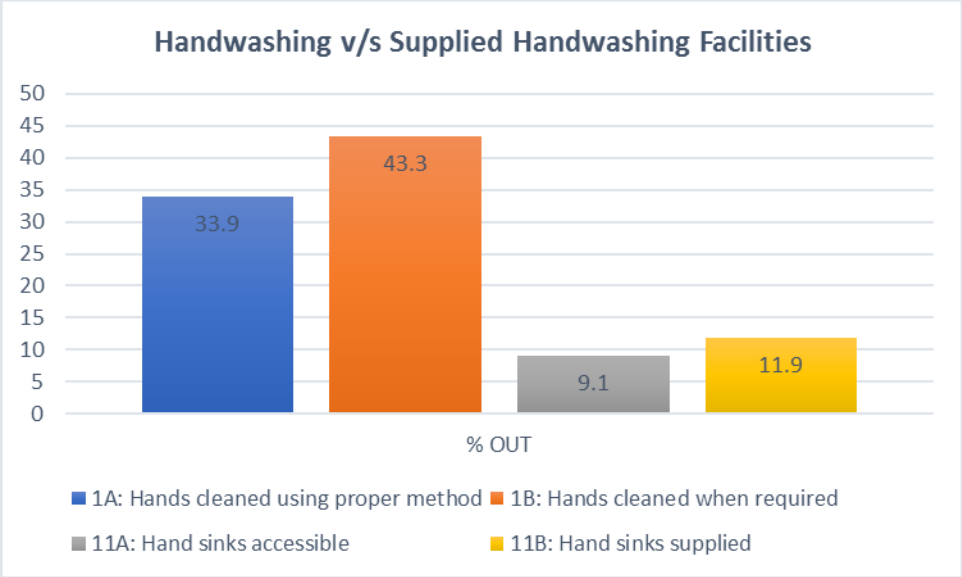


OTHER DATA ITEMS

Handwashing Facilities Accessible and Maintained
In addition to the FDA required data items, data was collected from four additional questions. These four additional questions served to obtain information regarding: handwashing facilities maintained and accessible, consumer advisory, and time as a public health control.

Handwashing facilities maintained and accessible was assessed to measure if handwashing violations were associated with improperly stocked and maintained handwashing facilities. In accordance with 6-301 of the Food Code, data item 11A determined if Handwashing facilities were conveniently located and accessible for employees, while item 11B determined if handwashing facilities were supplied with hand cleanser / disposable towels / hand drying devices. By including this data item, the results could be analyzed to determine if handwashing violations observed under data item 1 correlated with item 11. The results as displayed in Figure 5 indicate that handwashing violations were observed despite handwashing facilities being accessible and fully stocked.

Figure 5: Comparison of % OUT for Handwashing versus Handwashing Facilities being supplied.



Consumer Advisory
Data item 13 was added to determine if consumers were properly advised of risks of consuming raw or undercooked animal foods in facilities that offered undercooked foods. Analysis of the data collected indicated that 81% of facilities that offered undercooked foods had a consumer advisory present in compliance with 3-603.11 of the Food Code. This data indicated that consumer advisory was a low occurring violation in the facilities observed.

Time as a Public Health Control
Data item 14 was added to assess compliance with 3-501.19 of the Food Code. This provision of the Food Code allows facilities to store TCS foods based on written procedures that permit either a 4 hour hold time without temperature control, or a 6-hour old time at a maximum product temperature of 70F. When evaluating all facilities that utilized Time as a Public Health Control (TPHC), almost half of these facilities were observed to be out of compliance. 14A determined compliance with 3-501.19 when food is held without temperature control for four hours while 14B determined compliance when time is used as a public health control for 6 hours. Data collected indicated that facilities struggled more when time is held for four hours versus six hours. The Industry Segments that demonstrated the least compliance with TPHC were Hospitals at 40% and Schools at 23.3%. In schools 80% of observations noted that time was started for TPHC with products measuring above 41F. In Hospitals, 100% of TPHC violations occurred due to products not being marked or otherwise identified to indicate the time that is 4 hours past the point in time where food was removed from temperature control. Since the use of TPHC may increase after North Carolina adopts the 41F and below cold holding requirement, this information will be useful in addressing TPHC deficiencies.

TRENDS

Although the 2011 Baseline Survey will be utilized as a standalone study, general observations were made in comparison to this study. For example, in 2011 it was observed one of the top priority risk factors out of compliance for the county was Improper Holding Time/Temperature. For the 2018 study, this risk factor also served as the top out of compliance risk factor. When looking at specific facility types since 2011, Seafood Departments and Fast Food facilities have improved in the area of Improper Holding Time/Temperature. Produce departments have improved in the area of Personal Hygiene, this may be a result of interventions in 2011 utilized to educate food employees. This intervention included the use of pictorial posters demonstrating proper handwashing as handouts.

RECOMMENDED INTERVENTION STRATEGIES

After conducting the 2018 risk factor study, Mecklenburg County recommends the following interventions to improve the three most out of compliance risk factors. Priority risk factors that will be addressed are cold holding, cooling and date marking. All three risk factors fall under the Improper Holding Time/Temperature Risk Factor Category. Facility types and industry segments seen most out of compliance with these risk factors will be priority target audiences. In addition, the department plans to address and propose interventions to improve handwashing in FY20, which falls under the Poor Personal Hygiene Risk Factor Category.

COLD HOLDING

- Utilize “Time as a Public Health Control” agreements when applicable to give facilities struggling with compliance another option to safely control.
- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41F and below, the letters “OK” are visible in the center of the sticker. At temperatures above 41F the sticker turns black. Other counties, such as Rockingham County, have received positive feedback regarding the distribution of the thermolabel stickers from facility operators.

COOLING

- Increase educational and enforcement efforts.
- Distribute a pictorial based poster visualizing approved cooling methods in accordance with the Food Code. This poster would be designed to demonstrate cooling methods that could be applicable to all languages.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41F and below, the letters “OK” are visible in the center of the sticker. At temperatures above 41F the sticker turns black. Other counties, such as Rockingham County, have received positive feedback regarding the distribution of the thermolabel stickers from facility operators. The use of this tool could prevent cooling non-compliance that is the result of equipment failure.

DATE MARKING

- Increase educational and enforcement efforts.
- Staff will be educated on enforcement of date marking for consistency with the adoption of 41F. Staff will be given informational tools on how to gain compliance with 41F and below.



2023 Technical Report on The Occurrence of Foodborne Illness Risk Factors

Lauren Coles, REHS, RN, MA
Wendy Bell, REHS, MPH

Mecklenburg County Environmental Health

Valerie C. Woodard Center
3205 Freedom Dr. Suite 8000
Charlotte, NC 28208

Contact Info:
Phone: 980-314-1620
Email: EnvHealth@MeckNC.gov
Website: https://eh.mecknc.gov/

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ACRONYMS/ABBREVIATIONS

The subsequent table delineates the acronyms and abbreviations used throughout this document.

Acronym	Meaning
AMC	Active Managerial Control
ANOVA	Analysis of Variance
ANSI	American National Standards Institute
CDC	Centers for Disease Control and Prevention
CDP	Custom Data Processing
CFPM	Certified Food Protection Manager
CFSAN	Center for Food Safety and Applied Nutrition
ESRI	Environmental Systems Research Institute
FDA	U.S. Food and Drug Administration
FSMS	Food Safety Management Systems
HACCP	Hazard Analysis and Critical Control Points
IN	In Compliance
MCHD	Mecklenburg County Health Department
NA	Not Applicable
NO	Not Observed
OUT	Out-of-compliance
TCS	Time/Temperature Control for Safety Food
PIC	Person in Charge
PTM	Procedures, Training, and Monitoring
RFS	Risk Factor Study
RTE	Ready-to-Eat
PS	Voluntary National Retail Food Regulatory Program Standards

EXECUTIVE SUMMARY

Comparative Analysis Highlights

- This study included data collected from 90 Fast-Food restaurants, 91 Full-Service restaurants, 126 Retail Food Establishments, 62 Schools, 11 Hospitals and 43 Long-term care facilities. The sample size totaled 423 facilities, surpassing the minimum required sample size by 18%. The data collection process was rigorous and comprehensive, resulting in 8,855 observations and 435 hours of manpower. This does not include time dedicated to quality assurance, data entry and calibration meetings which accounted for over 700 hours.

- In comparison to the 2018 RFS, the 2023 RFS analyzed 9.6% more facilities for data collection. In the previous 2018 RFS, 7313 observations were made, while this study resulted in 8,855 observations.

- In the previous RFS study, out-of-compliance percentages ranged from 6.7 ─ 78.5%. In comparison, this study observed out-of-compliance percentages from 2.1 ─ 47%.

- When evaluating the percent change of all priority data items from 2018 to 2023, the most notable is that all priority data items improved at a range of 10 ─ 75%. The most improved priority data item was employees not contacting ready-to-eat foods with bare hands, which decreased by 75%. The least improved priority data item was employees practicing proper handwashing at about a 10% percent change.

- Sixty-seven percent of all facilities had well-developed or well-developed and documented FSMS.

- The two most commonly occurring risk factors found out-of-compliance in all industry types were poor personal hygiene and improper holding. The most out-of-compliance data items within these risk factors were employees practicing proper handwashing at 47% (poor personal hygiene), foods requiring refrigeration held at proper temperature at 36.9% (improper holding), and foods being cooled properly at 36.4% (improper holding).

Significant improvement was noted in all priority data items from 2018 to 2023, with percent improvement ranging from 10% to 75%, indicating an overall decrease in foodborne illness risk factors.

BACKGROUND

History

In 1998, the U.S. Food and Drug Administration's (FDA) National Retail Food Team initiated a ten-year voluntary study to assess trends in foodborne illness risk factors.[1] These risk factors encompass preparation practices and employee behaviors frequently associated with foodborne illness outbreaks at the Retail level, as reported by the Centers for Disease Control and Prevention (CDC). The study involved comprehensive data collection inspections conducted at various types of Retail and food service establishments. These inspections occurred at five-year intervals, specifically in 1998, 2003, 2008 and 2013 with the aim of observing and documenting trends in the occurrence of the following foodborne illness risk factors:

1. Food from Unsafe Sources
2. Poor Personal Hygiene
3. Inadequate Cooking
4. Improper Holding/Time and Temperature
5. Contaminated Equipment/Protection from Contamination[1]

In 2014, data collection expanded to include select Institutional food service facilities, and in 2015, select Retail food stores were included in the study.[1] The initial data collection for each type of facility laid the groundwork by establishing a baseline measurement, which continues to serve as the foundation for analyzing trends over time. This ongoing process enables the evaluation and monitoring of changes and developments in risk factors within the respective facilities.

The FDA's Risk Factor Study (RFS) serves as a crucial foundation for the development of program intervention strategies and justifies the allocation of program resources. Tracking the occurrence of foodborne illness risk factors provides a consistent means of monitoring food safety efforts and determining trends over time.[2] Measuring and reporting on the occurrence of foodborne illness risk factors and food safety behaviors/practices at Retail food establishments provide the foundation for identifying where risk-based interventions might have the greatest impact on enhancing public health protection.[2] The FDA promotes and conducts research designed to inform the application of science-based food safety principles in Retail and food service settings to minimize the incidence of foodborne illness. Research results support developing and delivering scientifically based guidance, training, program evaluation, and technical assistance to Retail food regulatory agencies and the industries they regulate.[2]

[1] U.S. Food and Drug Administration. Retail Food Risk Factor Study. U.S. Food and Drug Administration. https://www.fda.gov/food/retail-food-industryregulatory-assistance-training/retail-food-risk-factor-study. June 20, 2023

[2] Association of Food and Drug Officials. Risk Factor Study Approaches Fact Sheet. Association of Food and Drug Officials. Published 2021.

In a new 10-year study, the FDA has incorporated new data points to investigate the relationship between Food Safety Management Systems (FSMS), Certified Food Protection Management (CFPM), and the occurrence of risk factors and food safety behaviors/practices commonly associated with foodborne illness at Retail.[1] This new RFS aspect aims to determine the extent to which FSMS and the presence of a CFPM impact the occurrence of foodborne illness risk factors and food safety behaviors/practices. Food Safety Management System refers to a specific set of actions used by food service establishments to help achieve Active Managerial Control (AMC).[1] Active managerial control is the purposeful incorporation of specific actions or procedures by industry management into the operation of a food establishment to attain control over foodborne illness risk factors.[3] It embodies a preventive rather than reactive approach to food safety through a continuous system of monitoring and verification. While the components of FSMS vary across all industry types, purposeful implementation of procedures, training, and monitoring are consistent components of FSMS. Various systems and tools are available globally to achieve AMC, including the International Organization for Standardization (ISO 22000), Good Manufacturing Practices, Hazard Analysis and Critical Control Points, British Retail Consortium, and Safe Quality Food Institute.[3] However, the extent and effectiveness of the implementation of these or similar systems within Retail food stores in the United States is not well-studied.[3] Inadequate FSMS are believed to contribute to the global burden of foodborne diseases.[4] For instance, while HACCP has been shown to improve food safety, poor implementation due to a lack of robust procedures, training, and monitoring can lead to foodborne illness outbreaks.[4]

Completion of an RFS allows local jurisdictions to align with the FDA's Voluntary National Retail Food Regulatory Program Standards. The Retail Program Standards were implemented to provide national uniformity for food safety programs. These Standards offer a solid and systematic basis for all regulatory programs to enhance their performance through a continuous improvement process. Specifically, Standard 9 requires regulatory programs to conduct an RFS. Standard 9 motivates regulatory agencies to enhance and refine their existing programs by addressing the factors that lead to and contribute to foodborne illness, with the ultimate goal of reducing their occurrence.

Mecklenburg County Environmental Health places significant value on attaining national uniformity in Retail food protection and has actively participated in the FDA's Voluntary National Retail Food Regulatory Program Standards since 2010. It is important to highlight that Mecklenburg County completed their first comprehensive RFS in 2010 but due to the significant changes in regulation through the adoption of the food code in 2012, that study was conducted as a stand-alone study. The data derived from this 2023 RFS will be compared to the 2018 RFS, being the first comparative analysis. In addition to a comparative analysis, this 2023 study has also incorporated data modeled, in part, on the newly adopted FDA data points. Although this incorporation does not encompass an evaluation of CFPM, it

[3] FDA. Managing Food Safety: A Regulator's Manual For Applying HACCP Principles to Risk-based Retail and Food Service Inspections and Evaluating Voluntary Food Safety Management Systems. College Park, MD: FDA; 2006. Report No. OMB Control No. 0910-0578.
[4] FDA Report on the Occurrence of Foodborne Illness Risk Factors in Retail Food Store Deli Departments, 2015-2016. U.S. Food and Drug Administration. 1. Published May 2021.

does evaluate the relationship between FSMS, the occurrence of risk factors and food safety behaviors/practices commonly associated with foodborne illness at Retail. This data is novel, as the 2018 Risk Factor Study did not collect data on these aspects. It should be noted that the evaluation of CFPM has been historically assessed under the North Carolina Food Code and therefore was not considered a new priority data item for this study.

Summary of 2018 Study Design and Findings

Study Design

The 2018 Mecklenburg County Risk Factor Study was conducted by a cohort of 14 highly qualified FDA Standardized Environmental Health Specialists, adept in risk-based inspections and staff training. To guarantee accuracy and validity, the specialists received comprehensive data collection training from FDA Retail Specialist, Donna Wanucha, who also provided ongoing consultation for interpretation-related queries. The Custom Data Processing (CDP) system was utilized to generate a comprehensive list of operating facilities. Operating facilities were meticulously categorized and tallied according to predefined facility definitions. Utilizing an FDA Statistician as validation, a final sample was obtained (n=329, 95% CI) comprised of 11 Hospitals, 35 Institutions, 60 Schools, 55 Retail establishments, 85 Fast-Food restaurants, and 83 Full-Service facilities.

The 2018 sorted facility lists underwent randomization using an online randomizing system and were subsequently organized into individual master lists. These master lists were then divided among the 14 Environmental Health Specialists. In instances where Specialists encountered closed facilities or were denied entry, they were assigned the next facility from the substitute master list. Substitutes were also assigned in cases where industry segments were inaccurately categorized. Rigorous calibration meetings were conducted to harmonize the data collection process, maintaining sole reliance on standardized marking instructions. The 2018 data collection form evaluated the five CDC risk factors associated with foodborne illnesses as outlined in the 2013 Food Code. At the time the 2018 risk factor study was conducted, the North Carolina Food Code Manual was modeled after the 2009 FDA Food Code. The structure of the data collection form was modeled after the "FDA Retail Food Program Foodborne Illness Risk Factor Study Restaurant Data Collection Form" and the Rockingham County, NC data collection form. The 11 primary data collection items 1-10 and 17 were segmented by the specific risk factors they address. By assessing these 11 items, the minimum requirement of Standard 9 was met. Additionally, three supplementary questions were included to evaluate the maintenance and accessibility of handwashing facilities, the presence of consumer advisories, and the implementation of time as a public health control. The Mecklenburg County FOODSHIELD database entry form was customized to match the data collection form (***Appendix I***).

Findings

Data analysis indicated the top priority data item reported out-of-compliance for all industry segments was foods requiring refrigeration being stored at 41F and below. It is important to note that at the time the 2018 Risk Factor Study was conducted, the FDA Food Code required refrigeration at 41F and below; however, the NC Food Code allowed cold foods to be refrigerated at 45F and below. Within the Restaurant industry, both Full-Service and Fast-Food facilities demonstrated non-compliance rates of over 90%. Data collected from Healthcare facilities indicated that Hospitals were out-of-compliance at a 90% rate, while Long-term care facilities were at 63%. In the Retail Food industry, Delis and Produce areas were observed at non-compliance rates around 85%.

The second most frequent out-of-compliance data item was cooling. When further analyzing by industry segment, data collected indicated that Full-Service Restaurants were most out-of-compliance at 96.3%, followed by Hospitals at 90%, Retail Food Delis at 85.2%, Fast-Food at 85%, Retail Produce at 83.3% and Long-term care Facilities at 62.9%.

The third most frequent out-of-compliance data item was date marking. Information on date marking was collected using data items 8A, 8B and 8C. These items ensure compliance with 3-501.17 and 3-501.18 of the Food Code. Data item 8A determined if ready to eat, TCS food (prepared on-site) held for more than 24 hours was date marked as required in 3-501.17 (A, C, D). Data item 8B determined if opened commercial containers of prepared ready to eat, TCS food held for more than 24 hours was date marked as required in 3-501.17 (B). Data item 8C determined if TCS food prepared on-site and/or opened commercial containers, were discarded if they exceeded 7 days at 41F or were undated or incorrectly dated as stated in 3-501.18. Facilities were more out-of-compliance with 8C indicating that facilities have more difficulty discarding foods beyond the 7-day hold time. Data indicated a 30% out-of-compliance rate for 8A, a 30% out-of-compliance rate for 8B and a 40% out-of-compliance rate for 8C. Detailed analysis of 8C by industry segment showed Restaurants were the most out-of-compliance at a compliance rate of 31%, Healthcare at 30%, Schools at 22% and Retail Food Stores at 17%.

Handwashing was also determined to be a higher out-of-compliance risk factor. Handwashing was assessed for compliance under data items 1A and 1B. The data collected indicated that all facilities in the study were 33.9% out-of-compliance with data item 1A and 43.3% out-of-compliance with data item 1B. This data demonstrated that employees had more difficulty with washing hands at the appropriate times. Restaurants and Healthcare facilities saw the highest out-of-compliance rates for handwashing. Data collected from Restaurants showed 64% out-of-compliance rates and Healthcare 57.8%.

Since the 2018 Risk Factor Study was concluded, Mecklenburg County has implemented several intervention strategies aimed at improving compliance in the top three out-of-compliance priority risk factors. The strategies implemented are noted in **Table 1**.

Table 1: **2018 Summary of Implemented Intervention Strategies**

Priority Risk Factor to be Controlled	Intervention Strategy	Applied Work
Cold Holding	Utilize "Time as a Public Health Control" agreements when applicable to give facilities struggling with compliance another option to safely control.	Fillable TPHC forms were created and updated to the most current version of the food code. Training on proper use and expectations of TPHC forms provided to staff.
	Increase educational and enforcement efforts.	https://youtu.be/tXP09IK-1TQ Training videos embedded in all inspection reports when a violation occurs
	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black.	Stickers purchased and provided to facilities.
Cooling	Increase educational and enforcement efforts.	https://youtu.be/P6x8b1ZVOxU Training videos embedded in all inspection reports when a violation occurs

	Design and distribute a poster describing approved cooling methods in accordance with the Food Code. This poster would be designed to focus on visual cues that could apply to all languages. Approved cooling methods will be visually demonstrated on this handout.	**Food Cooling** Cooling Hot Foods Flyer - Arabic | Burmese | Chinese | English | Nepali | Russian | Spanish | Vietnamese Cooling Room Temperature Foods Flyer - Arabic | Burmese | Chinese | English | Nepali | Russian | Spanish | Vietnamese Mecklenburg County Environmental Health Website: https://eh.mecknc.gov/food
	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black.	Stickers purchased and provided to facilities.
Date Marking	Increase educational and enforcement efforts.	https://youtu.be/BOPsSNUajYs Training videos embedded in all inspection reports when a violation occurs

	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black. These stickers will be utilized to gain compliance with products starting at the required 41 degrees F and below temperatures for a maximum date marking allowance of 7 days.	Stickers purchased and provided to facilities.
Handwashing	Increase educational and enforcement efforts.	https://youtu.be/BH6CLGrH10M Training videos embedded in all inspection reports when a violation occurs

Refer to ***Appendix I*** for the 2018 Mecklenburg County Risk Factor Study Report details. Refer to ***Appendix II*** for 2018 Intervention Strategy details.

Purpose

Risk factor studies are a longitudinal examination of the foodborne illness risk factor data occurring at five-year intervals, to ascertain any advancements or setbacks in the occurrence of foodborne illness risk factors, ultimately serving as a means to assess progress in reducing such occurrences. The purpose of the 2023 Risk Factor Study is to conduct a comparative analysis given the minimum of three (3) data points for collection have not been ascertained. By performing a comparative analysis between the current dataset and the 2018 data, this analysis aims to identify potential improvements, regressions, fluctuations, or anomalies, thereby enabling the detection of any shifts in priority risk factors or food safety behaviors. This assessment serves to evaluate the progress made in reducing foodborne illness occurrences specifically in Mecklenburg County, NC. Future evaluations will provide sufficient data to perform a comprehensive trend analysis aiming to identify and evaluate overall patterns, trends, or changes in foodborne illness risk factor data observed more broadly.

STUDY OBJECTIVES

The objectives of this study will be to:

- Establish a 2023 dataset regarding facility compliance with risk factors.
- Analyze the current dataset to identify improvements or regressions when compared to the 2018 dataset.
- Identify the most critical foodborne illness risk factors necessitating priority intervention.
- Devise focused intervention strategies aimed at mitigating the occurrence of the identified priority risk factors.
- Design a comprehensive strategy to assess the effectiveness of the implemented intervention strategies at specific time points to monitor ongoing efficacy.
- Determine the FSMS aspects associated with the most critical foodborne illness risk factors.

Design and Methodology

This section provides an overview of the approach employed to conduct the 2023 Risk Factor Study. The design and methodology strategies aimed to comprehensively understand the dynamics of foodborne illnesses by observing improvements or regressions and identifying potential correlations with various risk factors in comparison to the 2018 Risk Factor Study. The design of the study involved strategically segmenting all permitted establishments into defined industry segments, followed by an intentional selection of data collectors, data collection methods, quality assurance measures and data analysis techniques to ensure robust results. Additionally, this section delves into the specific processes used to collect observation data across all food industry segments and analyze the risk factors contributing to the occurrence of foodborne illnesses in Mecklenburg County, while eliminating possible biases to ensure the reliability and validity of the findings. The design and methodology details provide a clear understanding of the data collection process and provides a historical framework for future risk factor studies thereby creating a reproducible study.

Industry Segments and Facility Types Included in the Study

The 2023 Risk Factor Study surveyed various industry segments as indicated below.

(1) Health Care
(2) Schools (K-12)
(3) Restaurants
(4) Retail Food Stores

The four (4) categories are further subdivided into facility types:

(1) Health Care
    (a) Hospitals
    (b) Long-term care Facilities
(2) Schools
    (a)Base Kitchen
    (b)Onsite Kitchen

(c)Combination Kitchen

(3) Restaurants

(a) Fast-Food

(b) Full-Service

(4) Retail Food Stores

(a) Deli Department

(b) Seafood Department

(c) Produce Department

To ensure consistency in measuring trends from one risk factor study to the next, definitions were written for each facility type. Definitions are noted in **Tables 2-5**.

Data was collected from food service establishments according to defined industry segments. To ensure consistency in measuring trends from one risk factor study to the next, definitions were written for each facility type. For clarification purposes, the 2018 definitions for Fast-Food, Full-Service and Seafood departments were expanded to account for permitting nuances established since the previous risk factor study. In addition to the permitting needs, definitions of Fast-Food and Full-Service were modified to target a process-based approach rather than point of sale. This combines facilities that are similar in process type per Annex 5 and will help target interventions based on those processes. Through the dynamics of the global pandemic, much of industry has changed to include less contact at point of sale which could potentially skew the importance of targeting interventions for facilities that have a higher risk. Rigorous discussions with the FDA Retail Food Specialist were conducted prior to definition modification.

Table 2: Description of Facility Types that Comprise the Health Care Industry

Facility Type	Description
Hospitals	A food service operation that provides for the nutritional needs of inpatients, by preparing meals and transporting them to the patient's room and/or serving meals in a cafeteria setting (meals in the cafeteria may also be served to Hospital staff and visitors).
Long-term Care Facilities	A food service operation that prepares meals for the residents in a group care living setting such as Nursing Homes and Assisted Living facilities.
NOTE:	For the purposes of this study, Healthcare facilities that do not prepare or serve food to a highly susceptible population, such as mental Healthcare facilities, are not included in this facility type category.

Table 3: Description of Facility Types that Comprise the School Industry

Facility Type	Description
Base Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Meals are fully prepared in the onsite kitchen and some meals are shipped to other locations (including multiple locations within the same school).
Onsite Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. All meals are prepared and served on-site.
Combination Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Some meals are prepared and served on-site; while others are fully prepared or partially prepared in a central or base kitchen.
NOTE:	For the purpose of this study, Restaurants or other Retail food operations that provide meals to school facilities are not included as part of the study sample for Schools. Also, Receiving or Satellite Kitchens that obtain partially or fully prepared meals from a base or central kitchen and conduct little or no food preparation are not included as part of this study. Other School food service facilities eliminated from the study sample include those for behavioral health Schools, those serving a high school population only, any Schools which had limited to no food prep such as Schools holding a permit for only handling catered food. Permitted preschool kitchens within a childcare facility were eliminated as they had little to no food prep; however, elementary Schools which also serve preschool children were included.

Table 4: Description of Facility Types that Comprise the Restaurant Industry

Facility Type	Description
Fast-Food	Restaurants that provide food via counter service, wait, or drive-through rather than full table service. Payment is made at a counter, not via check delivered to the table. Facilities in this category are typically listed as a risk II or III with limited processes.
Full-Service Restaurants	Restaurants that ***may*** offer food via full table service, even if they also offer a counter or drive-through option. Food ***may*** be ordered and served, and payment taken at the table. Facilities in this category are typically risk III or IV with the unlimited processes.
NOTE:	For the purpose of this study, the following operations are excluded: mobile food units (food trucks), pushcarts (hot dog carts), gas station/convenience stores, arenas, amusement parks and caterers. Additionally, facilities are categorized based on process flow not just on payment type or where services are rendered. These definitions were updated from the 2018 Risk Factor Study to portray a more accurate representation of the complexity of the food preparation methods, regardless of the service method the food is provided (counter service, wait, drive through or full table service).

Table 5: Description of Facility Types that Comprise the Retail Food Industry

Facility Type	Description
Deli Department	Operations selected from the supermarket and grocery store segments of the industry where food such as luncheon meats and cheeses, are sliced for the customers and where sandwiches and salads are prepared onsite or received from a commissary in bulk containers, portioned and displayed. Parts of the deli operations may include salad bars, pizza stations and any other stations or bars managed by the Deli department. Other areas where meat and poultry products are cooked and offered for sale and managed by the Deli department managers may also be included.

Seafood Department	Operations selected from the supermarket and grocery store segments of the industry where seafood, is cut, prepared, stored, or displayed for sale to the consumer. In some Retail food stores, the Seafood department will be operated under the same manager who has responsibility over the meat and poultry department / operation. When the Seafood department is combined with a meat and poultry department, the data collector will assess only those procedures and practices associated with the processing of seafood.
Produce Department	Operations selected from the supermarket and grocery store segments of the industry where produce is cut, prepared, stored, or displayed for sale to the consumer. A produce operation may include salad bars or juice stations that are managed by the produce manager. If produce is only received prepackaged for display, it would not qualify.
NOTE:	For the purpose of this study, only supermarkets or grocery stores with a permitted Deli facility were included. If the Retail food store also contained a permitted Seafood and/or Produce department where food items are cut, prepared, and stored these facility types were also included. In-store sushi bars operated and managed as part of the Retail food store business are considered part of Seafood department / operation for the purposes of this Study. If the in-store, sushi bar operation is under the management and operated by a separate business from the Retail food store, it is not to be included as part of the data collection. Any standalone facilities that are permitted for sushi production only have been excluded from this study. Convenience stores are not included as part of the Study sample.

Industry Risk Categorizations Utilized in the Study

This study aimed to investigate food safety practices in all industry segments defined in **Tables 2-5** that conduct a significant amount of on-site food preparation. For the purposes of this study the defined risk categorizations utilized differ from the assigned facility industry risk categorizations as defined in the North Carolina Administrative Code 10A NCAC 46 .0213. Each facility was assigned a risk categorization according to the FDA Food Code based on the complexity of food preparation (see **Table 6**). This risk categorization was also used to determine if an establishment was eligible for data collection. For example, facilities that only served pre-packaged food or conducted low-risk food preparation activities were ineligible for selection. Establishments eligible for study selection fell into risk categories 2 through 4, as these establishments represent more complex food preparation activities.

Table 6: **Risk Category Descriptions**

Risk Category	Description
1	Examples include most convenience store operations, hot dog carts, and coffee shops. Establishments that serve or sell only pre-packaged non-time/temperature control for safety (TCS) foods. Establishments that prepare only non-TCS foods. Establishments that heat only commercially processed TCS foods for hot holding. No cooling of TCS foods.
2	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 TCS foods after preparation or cooking. Complex preparation of TCS foods requiring cooking, cooling, and reheating for hot holding is limited to only a few TCS foods.
3	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 TCS foods. Variety of processes require hot and cold holding of TCS food.
4	Examples include preschools, Hospitals, Nursing Homes, and establishments conducting processing at Retail. Includes establishments that serve a highly susceptible population or that conduct specialized process, e.g., smoking and curing; reduced oxygen packaging for extended shelf-life.

Data Collectors

A cohort of 12 highly qualified FDA Standardized Environmental Health Specialists, adept in risk-based inspections and staff training were selected as data collectors. All 12 data collectors have technical expertise in Retail food safety and a solid understanding of food service operations within the Restaurant industry. To guarantee accuracy and validity, the specialists received comprehensive data collection training specific to the data collection protocol and marking instructions both at the start of the study using instructor led training and in-field training from FDA Retail Food Specialist, Donna Wanucha, who also provided ongoing consultation for interpretation-related queries. The data collectors conducted site visits throughout Mecklenburg County at randomly selected restaurants to perform data collection. These visits not only required observation of food safety practices but onsite correction of any observed risk factor violations. To fully grasp and document a facility's procedures, training and monitoring practices, additional time needed to be allotted to allow for thorough interviewing of the person in charge and gathering any necessary documentation to appropriately assess these strategies. Additionally, data collectors were required to set aside time during the observation to individually count all occurrences of handwashing observed during the visit. Data collectors then captured all observations, noting all recorded temperatures, detailed information on the facility processes, any corrective actions taken as

well as any other pertinent information to help provide an accurate assessment of the facility's food safety practices. This ability to manage and document all aspects of the data collection process requires a vast knowledge and experience of the Retail food industry practices, the FDA Food Code, and the data collection protocol. These data collectors were all full-time, permanent MCHD employees tasked with balancing risk factor study tasks along with daily compliance duties.

Dedicated Data Collector

To ensure the efficiency and timely completion of the data collection process for the Risk Factor Study, an experienced, dedicated temporary data collector was hired to assist the existing staff members who had other responsibilities related to territory compliance inspections. This arrangement reduced the workload and stress of the permanent staff and allowed them to focus on their primary tasks. The temporary data collector performed a significant amount of data collection for the study, exceeding the average contribution of the other staff members.

Quality Assurance and Data Entry Analysts

Two part-time FDA Standardized Environmental Health Specialists, both formerly employed at MCHD, were assigned to conduct quality assurance checks and enter all data collection forms into the FDA Retail Risk Factor Study Database. These staff members both planned and participated in the previous 2018 Risk Factor Study and provided not only a historical perspective but also experience with the FDA Retail Risk Factor Study FOODSHIELD Database. This database was specifically designed for this study and allows for entry and storage of all data collection forms and provides various reporting features to aid in statistical analysis. This database contains some pre-programmed series of quality assurance checks to verify the accuracy of the data each time data was entered. Examples of the type of quality assurance checks programmed into the FOODSHIELD database include the following:

- Notifications via dialogue boxes when any data entry field has been inadvertently left blank
- Standard drop-down screens for consistent responses to informational data entry fields
- Automatic calculation of the results of the overall data item based on the markings entered for the information statements under the data items
- Cross-checks to ensure that compliance marking for data items requiring temperature measurements were consistent with the temperatures recorded in the temperature charts
- Automatic calculations for food product temperature summary tables based on the actual temperature recorded in the temperature chart as compared to the required food safety temperature for the data item
- Notifications via dialogue boxes that ensure the FSMS assessment was entered for the selected risk factor area

The Quality Assurance Analysts covered all quality assurance aspects not covered by the FDA Retail Risk Factor Study FOODSHIELD Database, such as ensuring that all observations were properly documented under the correct risk factor item number and subsection, all applicable fields were properly completed, the correct risk categorization and risk factor category was assigned, all comments verified

the IN/OUT/NA/NO assessments, and all cooling rate calculations confirmed the cooling compliance assessments. For any aspects found to be missing or requiring additional information, the data collector was contacted to ask for additional details or to obtain any missing data. Each data collection form was analyzed with no assumptions ensuring all data collection form comments substantiated each compliance assessment. In addition to the items noted above, the Quality Assurance Analysts and Risk Factor Study Coordinator met often to discuss quality assurance needs to ensure consistent information was being disseminated.

Risk Factor Study Coordinator

The Risk Factor Study Coordinator was a full-time, FDA standardized supervisor employed by the MCHD, who had a pivotal role in the design, coordination, and implementation of the study. The coordinator was responsible for conducting and organizing staff training sessions, serving as a liaison to the FDA Food Safety Retail Specialist for any questions related to the Risk Factor Study, disseminating interpretations, and holding calibration meetings to ensure consistency among data collectors and Quality Assurance Analysts. The coordinator's duties required a high level of FDA Food Code and Retail Program Standards knowledge for the successful completion of the study.

Sample Size and Confidence Interval

At the time the sample sizes were analyzed, the establishments meeting the defined industry types totaled 3205. It was determined that a minimum of 357 data collections were needed during the 2023 evaluation period. As detailed in **Table 7**, this sample size provided sufficient observations of food safety practices to be 95% confident that compliance percentages derived from the data collections are within 10% of their actual occurrence. In comparison to the 2018 sample size, the 2023 evaluation resulted in the same 95% confidence level but with 28 additional facilities needed for data collection.

Table 7: Sample Size Calculations

2023 Facilities by Type			
Facility type	Inventory	95/5	**95/10**
Hospitals	13	13	**13**
Long-term care	76	64	**43**
Schools	168	118	**62**
Retail	139	103	**58**
Fast-Food	1214	292	**90**
Full-Service	1595	310	**91**
Total Facilities	3205	900	**357**

Data Collection Form

The data collection form utilized was adapted from the FDA (2013-2014) Retail Food Program-Foodborne Illness Risk Factor Data Collection Form. ***Appendix III*** provides the data collection form used to collect observations in this study. Marking instructions for the data collection form were also adapted from the FDA (2017), Retail Food Program Foodborne Illness Risk Factor Study – Marking Instructions for the Data Collection Form and noted in ***Appendix III***. The focus of the data collection was based on the five (5) risk factors for foodborne illness identified by the Centers for Disease Control and Prevention (CDC). Similar to the 2018 Risk Factor Study, data collection items 1 through 10, 11 and 17 were assessed. Data collection items 1 through 10 and 17 served as the key indicators for statistical analysis of the five (5) risk factors per the current FDA protocol. Data item 11 served as an additional assessment of access and supply of handwashing facilities. In 2023, the other areas of interest data collection section was expanded to include food allergy training and awareness. Additionally, new assessments such as the FSMS, and handwashing frequency assessments were added which provide additional details supporting the foodborne illness risk factors. Each of those data items has been placed under the following CDC foodborne illness risk factor category (**Table 8**).

Summary of Risk Factors Analyzed

Table 8: Foodborne Illness Risk Factors and Coordinating Data Items

Foodborne Illness Risk Factor	Associated Data Item Numbers or Assessment and Description
Poor Personal Hygiene	Data Item #1- Employees practice proper handwashing
	Data Item #2- Employees do not contact RTE foods with bare hands
	Handwashing Frequency Assessment
Contaminated Equipment/Protection from Contamination	Data Item #3- Food is protected from cross-contamination during storage, preparation, and display
	Data Item #4- Food contact surfaces are properly cleaned and sanitized.
Improper Holding Time/Temperature	Data Item #5- Foods requiring refrigeration are held at the proper temperature.
	Data Item #6- Foods displayed or stored hot are held at the proper temperature.
	Data Item #7- Foods are cooled properly.

	Data Item #8- Refrigerated, RTE foods are properly date marked and discarded within 7 days of preparation or opening.
Inadequate Cooking	Data Item #9- Raw animal foods are cooked to the required temperatures.
	Data Item #10- Cooked foods are reheated to required temperatures.
Food From Approved Sources	Data Item #17- Food is received from safe sources
Other Areas of Interest	Data Item #11- Handwashing facilities are accessible and properly maintained.
	Data Item #13- Consumers are properly advised of risks of consuming raw and undercooked animal foods.
	Data Item #14- Time alone used as a public health control
	Data Item #19- Management and food employees are trained in food allergy awareness as it relates to their assigned duties.
FSMS	An assessment of each of the three (3) food safety management system elements (Procedures, Training, and Monitoring) for varying risk factor data items resulting in a PTM rating based on an effective interview process by the data collector to solicit information from the PIC.

Additional resources provided to data collectors included information on new data points for the 2023 Risk Factor Study and instructions for proper assessment of Food Safety Management Systems of the following priority risk factors:

- Attachment A: Instructions for Conducting the Food Safety Management System Assessment (Poor Personal Hygiene Risk Factor)
- Attachment B: Instructions for Conducting the Food Safety Management System Assessment (Contaminated Equipment/Protection from Contamination Risk Factor)
- Attachment C: Instructions for Conducting the Food Safety Management System Assessment (Improper Holding/Time & Temperature Risk Factor)
- Attachment D: Instructions for Conducting the Food Safety Management System Assessment (Inadequate Cooking Risk Factor)

Logistics

For this study, the sample size was 357 data collections for all industry types. To ensure the validity and reliability of the study, Raosoft (Raosoft Inc, 2004), a free access website that provides sample size calculators for different research designs, was used to determine the sample size for each facility type. After the sample size was determined, RANDOM.ORG (Randomness and Integrity Services, Ltd, 2023), was used to generate randomized numbers for each facility type. Once the list of randomized numbers was generated, those numbers were placed in columns along with each facility. This process was repeated for each facility type and substitute list. Facilities were then sorted by the new number to allow for the randomization component. From this sorting each facility type was reduced to only include the amount required for sample size. The same process was used to randomly assign a food safety management system (FSMS) data point to each facility. The data points ranged from 1 to 4 and represented different levels of FSMS implementation and compliance.

The sample establishment inventory was distributed among the 12 data collectors using a shared excel spreadsheet database located on OneDrive for distribution and tracking purposes. The shared spreadsheet included the assigned FSMS to be observed, the permit identification number, name and address of the facility, current permit status, and the name of the assigned data collector. Data collectors and Quality Assurance Analysts were given access to a shared OneDrive Risk Factor Study folder which contained all necessary documents to complete data collection. The Risk Factor Study Folder consisted of the following resource documents: RFS questions and answers, an RFS facility assignment list, a risk factor checklist, a data collection temperature chart, a printable data collection form, a fillable data collection form, RFS marking instructions, FSMS marking instructions and a printable assignment list (see ***Appendix III***). An empty shared folder was also provided for data collectors who preferred to submit their completed data collection forms electronically. Data collectors were given view-only access to eliminate the risk of incidental errors being made to the assignments. Although every effort was made to allow for assigned facilities to be located near assigned territories, this was not possible in every case.

Before initiation of the study, data collectors were trained using a comprehensive presentation of the study protocol for data collection along with the marking instructions. The presentation discussed the following topics: the background and purpose of the Risk Factor Study, the main findings and actions from the 2018 Risk Factor Study, a comparison of the 2018 and 2023 Risk Factor Studies sample sizes, the methodology for completing the study, the industry type definitions, the proposed timeline for collecting data and contact list for needed guidance. For details of this presentation, refer to ***Appendix III***. In addition to this training, FDA Food Retail Specialist, Donna Wanucha, completed a detailed four-hour training on the data collection form expectations, the importance of using the data collection form marking instructions, and how to evaluate an FSMS. In addition to this in-classroom training, Donna Wanucha conducted in-field training that consisted of an evaluation of Retail food operations. Donna Wanucha was able to provide training for staff in real time for the evaluation of the information along with the proper marking of the data collection form. Once all formal training was completed, every data collector was expected to complete 1-2 data collections on their own and submit the data collection form

for review by the Risk Factor Study Coordinator and the Quality Assurance Analysts. From those findings, a calibration meeting for troubleshooting was completed before data collectors were provided the full listing of facilities.

The data collector conducted an unannounced, non-regulatory visit to each assigned establishment. Upon arrival at the establishment, the data collector explained the purpose of the visit to the owner or person in charge (PIC). Since industry participation in the study was voluntary, a list of substitute facilities was provided for distribution by the Risk Factor Study Coordinator to a data collector for establishments that were found to be misclassified, closed, or otherwise unable or unwilling to participate. The Risk Factor Study Coordinator maintained the inventory of substitute establishments.

All data collectors used the current version of the Food Code (FDA, 2017) as the standard of measurement for compliance markings for observations of employee food safety behaviors/practices.

Quantitative measurements of food product temperatures, sanitizer concentrations, and dish machine final rinse temperatures were collected using calibrated equipment such as thermocouples, heat-sensitive tape, and maximum registering stem thermometers. Visual observations of food safety practices were supplemented by asking questions of food employees and/or managers to ensure data collectors had a clear understanding of food processes and procedures. To facilitate this discussion, the owner or PIC of the restaurant was encouraged to accompany the data collector during the data collection.

Using the FDA RFS marking instructions, the data collector marked observations and findings on the data collection form in four compliance categories (see **Appendix III**). The data collector determined whether observations of employee food safety practices or behaviors contained in the information statements were:

- **In Compliance (IN):** One or more information statements that are part of the data item were recorded as in compliance, and none of the information statements that are part of the data item were recorded as out-of-compliance.
- **Out-of-compliance (OUT):** One or more information statements that are part of the data item were recorded as out-of-compliance.
- **Not Observed (NO):** None of the information statements that are part of the data item were recorded as in compliance or out-of-compliance, and one or more information statements that are part of the data item were recorded as not observed. The “NO” marking was used when an information statement was a usual practice in the food establishment, but the data collector did not observe the practice during the data collection.
- **Not Applicable (NA):** All information statements that are part of the data item were recorded as not applicable. The “NA” marking was used when a data item or information statement was not a function of the food establishment.

Data collectors were also encouraged to record any additional detailed information to support their findings.

New 2023 Data Collection Points

Assessing Food Safety Management Systems

While FSMS vary across the Retail and Food Service industry, consistent components include procedures, training, and monitoring (PTM). For this study, these three key elements were used to assess an establishment's FSMS:

- **Procedures (P):** A defined set of actions adopted by food service management for accomplishing a task in a way that minimizes food safety risks.
- **Training (T):** The process of management's informing employees of the food safety procedures within the establishment and teaching employees how to carry them out.
- **Monitoring (M):** Routine observations and measurements conducted to determine if food safety procedures are being followed and maintained.

Taken collectively, these elements are referred to as an establishment's "PTM" rating.

Data collectors assessed each facility's FSMS to determine the extent to which it was developed and implemented. The risk factor for which an FSMS assessment was conducted in each restaurant was randomly selected based on the four (4) foodborne illness risk factors.

For each of the three (3) FSMS key elements, the data collector interviewed the PIC to determine if the assessment criteria for the assigned foodborne illness risk factor were addressed. The assessment criteria focused on determining if:

- Management is able to describe the critical limits for (*the specific risk factor procedure or practice*) as they apply to the restaurant.
- Management is able to describe the steps/tasks (how and when) that are performed to ensure the identified critical limits for (*the specific risk factor procedure or practice*) are achieved.
- Management is able to identify specific employees that have been assigned the responsibility to correctly perform (*the specific risk factor procedure or practice*).
- Management is able to produce written materials (standard operating procedures, posters, wall charts, wallet cards, etc.) that support implementing the system to control (*the specific risk factor procedure or practice*) within the restaurant.

Based on management responses for each area described above, the data collector used a standardized system to rate each FSMS element (PTM).

For this study, rating numbers (0 through 4) were defined as follows:

- **Nonexistent:** No system in place or system haphazardly implemented (no defined structure or frequency for implementation).
- **Underdeveloped:** System is in early development. Efforts are being made, but there are crucial gaps in completeness and/or consistency.
- **Well-developed:** System is complete, consistent, and oral or a combination of oral and written. The preponderance of the management system is oral.
- **Well-developed and Documented:** System is complete, consistent, and primarily written. The preponderance of the management system is written.

The study calculated a single overall PTM rating for each restaurant by adding all individual PTM ratings for each data item and dividing by the number of individual ratings given.
The FSMS score can be treated as a continuous variable with possible values ranging from 0 (complete absence of management systems) to 4 (well-developed and documented management systems). The score may also be analyzed as a categorical variable as illustrated in **Table 9**.

Table 9: Food Safety Management Category by Score

Category	Score
Nonexistent	≤ 1
Underdeveloped	1 to <3
Well-developed	3 to <4
Well-developed and documented	4

Handwashing Frequency Assessment

A handwashing frequency assessment tool was utilized to properly observe and record handwashing practices. The data collector recorded all handwashing observations during the regular data collection using the "Handwashing Frequency Assessment" located under Data Item number one- Employees practice proper handwashing on the Data Collection Form. Over the course of the data collection visit, the data collector recorded a tally of each time an employee was observed doing the following:

- C1- Washing hands properly and when required,
- C2- Washing hands improperly, or
- C3- Failing to wash hands when required.

Additional time was not allocated for the observation of handwashing practices but collected through the normal course of conducting observations of other food safety procedures during the data collection visit. Data collectors used the tool to determine handwashing deficiencies during the course of the visit, while providing education and correction where needed. The assessment was not intended to draw statistical considerations, but rather used to provide a broad-based indicator of handwashing practices. Given that in each data collection visit it would be difficult to assess every activity during which handwashing should occur, the precision needed for any statistical analysis would not be accurate. Additionally, although data collectors assessed the handwashing frequency, observations regarding priority risk factor behaviors were to be prioritized. Assessing handwashing frequency was intended to provide some context to the IN/OUT marking for Data Item number one- Employees practice proper handwashing. Handwashing frequencies were recorded as hashmarks under the appropriate C1, C2 and C3 columns, notating any exceptions for data quality assurance purposes.

Food Allergen Training and Awareness

The food allergen training and awareness data item was utilized to assess a facility's knowledge and training on the eight (8) major food allergens and their associated symptoms as stated in 2-102.11 C (9) and 2-103.11 N. This data item evaluates the ability of the PIC to provide responses to questions that demonstrate knowledge of these major food allergens and their associated symptoms and to verify training methods in place to establish this knowledge. This entailed the data collector interviewing the PIC to determine their knowledge and if they could provide a description of the food employee allergen training program that covers the 8 major allergens as they relate to the employees' assigned duties and symptoms associated with the major food allergens. An accepted training program could be verbal or written. Assessment of this data item required the data collector to be aware of the eight (8) major food allergens including: Milk; Egg; Fish (such as bass, flounder, or cod); Crustacean shellfish (such as crab, lobster, or shrimp); Tree nuts (such as almonds, pecans, or walnuts): Wheat; Peanuts; and Soybeans. The data collector also needed to be aware of the symptoms associated with a food allergic response including hives or other itchy rashes; nausea; abdominal pain; vomiting and/or diarrhea; wheezing; shortness of breath; and swelling of various parts of the body, etc.

Statistical Analysis

The statistical analysis of the data involved basic calculations provided within the FOODSHIELD platform and excel functions, such as the mean and average values of the variables, as well as the percentages and percent changes of the relevant compliance indicators. The mean and average values were used to measure the central tendency and dispersion of the compliance data, while the percentages and percent changes were used to compare the 2018 and 2023 RFS data.

Percent change was chosen to compare the % out of compliance data in 2018 versus the 2023 data. Percent change was calculated as: as $((y_{2018} - y_{2023}) / y_{2023}) *100$. This calculation allows a comparison of the change relative to the original values and sample size acquired in 2018. It answers the question: "How much has the value changed in proportion to its initial state?" Percent change normalizes the change by dividing it by the original value, thereby making it easier to compare changes across different contexts and providing a consistent scale for comparison. Given that the sample size may vary in each study, the use of percent change seeks to normalize the different sample size populations to allow the data to be compared effectively. Additionally, percent change helps express trends over time and whether values are increasing, decreasing, or remaining stable. The results of the statistical analysis were presented in tables and graphs and interpreted in determine the effectiveness of the 2018 intervention strategies. The statistical analysis provided evidence to support a decrease or increase in foodborne illness risk factors, and to draw conclusions about the study objectives.

RESULTS AND DISCUSSION

Descriptive Statistics

- This study included data collected from 90 Fast-Food restaurants, 91 Full-Service restaurants, 126 Retail food establishments (58 Delis, 41 Produce and 27 Seafood), 62 Schools, 11 Hospitals and 43 Long-term care facilities. The sample size totaled 423 facilities, surpassing the minimum required sample size by 18%. The data collection process was rigorous and comprehensive, resulting in 8,855 observations and 435 hours of manpower. This does not include time dedicated to quality assurance, data entry and calibration meetings which accounted for over 700 hours.

- Risk categories varied from/differed between Fast-Food, Full-Service restaurants, and Retail facilities. Eighty-nine percent of Fast-Food restaurants were risk category 2, while 11% were risk category 3. Full-Service restaurants consisted of 4.4% risk category 4s, 86% risk category 3s and 3.3% risk category 2. In School lunchrooms, 54.1% were risk category 2s, 1.6% were risk category 3s, and 44.3% were risk category 4s.

- The majority of Fast-Food restaurants (83%) were part of a multiple-unit operation, while over half of Full-Service operations (51%) were not.

- The majority of Schools operated as onsite kitchens (90%) while a smaller amount served as base kitchens or a combination kitchen.

- The number of meals served per day in restaurants ranged from 10-2500 meals. The number of meals served per day in Schools ranged from 180-1600. The number of meals served per day in Health Care facilities ranged from 60-7500.

- Sixty-seven (67) percent of all facilities had well-developed or well-developed and documented FSMS.

Occurrence of Risk Factors and Out-of-Compliance Data Items

All Industry Percent Out-of-Compliance

The occurrence of foodborne illness risk factors and the associated food safety behaviors/practices was studied among 425 facilities (90 Fast-Food restaurants, 91 Full-Service restaurants, 126 Retail food establishments, 62 Schools, 11 Hospitals and 43 Long-term care facilities). **Table 10** below shows the percent and total number of observations for in and out-of-compliance risk factors (1-10, 17). The two most commonly occurring risk factors found out-of-compliance in all industry types were poor personal hygiene and improper holding. The most out-of-compliance data items within these risk factors were employees practicing proper handwashing at 47% (poor personal hygiene), foods requiring refrigeration held at proper temperature at 36.9% (improper holding), and foods are cooled properly at 36.4%

(improper holding). Inadequate cooking was the least out-of-compliance risk factor, followed by food from approved sources. Two hundred and fifty-one (251) observations were made to evaluate the practice of cooking raw animal foods and reheating cooked foods to required temperatures. Although every attempt was made to observe these practices, the timing of the data collection visit may have influenced the data collector's ability to observe this risk factor.

Table 10: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for All Industry Types (Report 1A and #17-Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	224	53	199	47
2	Food employees do not contact ready-to-eat foods with bare hands.	414	97.9	9	2.1
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	303	71.6	120	28.4
4	Food contact surfaces are properly cleaned and sanitized.	347	82	76	18
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	267	63.1	156	36.9
6	Foods displayed or stored hot are held at the proper temperature.	210	78.9	56	21.1
7	Foods are cooled properly.	118	63.4	68	36.6
8	Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening.	263	65.8	137	34.3
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	134	93.1	10	6.9
10	Cooked foods are reheated to required temperatures.	101	94.4	6	5.6
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	402	95.0	21	5.0

In other areas of interest (**Table 11**), 1490 observations were made across all industry types. The findings indicate that food allergen awareness and training was the most out-of-compliance data item across all industries, with a non-compliance rate of 55.1%. It is noteworthy that at the time of data collection for the 2023 Risk Factor Study, although the North Carolina Food Code evaluated the ability of the PIC to demonstrate knowledge of major food allergens, the associated symptoms, and food employee training programs in food allergy awareness, assessment of these factors was not currently defined. While this data point is the most out-of-compliance, it cannot be considered a significant measure of compliance. Rather, it serves as a baseline assessment of the current status of food safety management awareness and employee training programs in place across all industries. The second most occurring out-of-compliance data item was time alone being properly used as a public health control according to a four- (4) or six (6) -hour time limit. Across all industry types, this data item was observed at a 39% out-of-compliance rate. With respect to observations made based on time limits, 132 observations were made for four (4) -hour time limits, while only three (3) observations were made for six (6) -hour time limits. The consumer advisory data item was observed as the most in compliance (93.2%).

Table 11: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for All Industry Types (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	337	79.7	86	20.3
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	82	93.2	6	6.8
14	Time alone is properly used as a public health control.	81	60.9	52	39.1
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	190	44.9	233	55.1

Percent Out-of-Compliance by Industry Type

Restaurants- Fast-Food

Data indicates poor personal hygiene is the highest out-of-compliance risk factor in the Fast-Food industry, followed by improper holding time/temperatures. Similar to all industry personal hygiene data item results, Fast-Food employees were found to be highly compliant with non-bare hand contact (97.6%), but highly non-compliant with handwashing (56.7%). The high out-of-compliance percentage of the improper holding risk factor (**Table 12**) in Fast-Food restaurants was largely due to the high number of out-of-compliance observations in data items five (5) (foods requiring refrigeration are held at proper temperature), seven (7) (foods are cooled properly), and eight (8) (refrigerated, RTE foods are properly date marked and discarded within seven days of preparation or opening). These data items had out-of-compliance percentages of 38.9%, 55.2%, and 38.1%, respectively. In the majority of

observations in which foods requiring refrigeration were observed to be out-of-compliance, foods were stored in refrigerated open top make tables (59.7%). One notable observation is the Fast-Food industry was observed to have 100% compliance with raw animal foods being cooked to required temperatures. It is imperative to also consider that 89% of Fast-Food facilities in this study met risk category 2 criteria.

Table 12: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Restaurant Industry- Fast-Food

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	39	43.3	51	56.7
2	Food employees do not contact ready-to-eat foods with bare hands.	87	96.7	3	3.3
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	69	76.7	21	23.3
4	Food contact surfaces are properly cleaned and sanitized.	75	83.3	15	16.7
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	55	61.1	35	38.9
6	Foods displayed or stored hot are held at the proper temperature.	44	80	11	20
7	Foods are cooled properly.	13	44.8	16	55.2
8	Refrigerated, ready-to-eat foods are properly date-marked and discarded within 7 days of preparation or opening.	52	61.9	32	38.1
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	36	100	0	0
10	Cooked foods are reheated to required temperatures.	16	88.9	2	11.1
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	88	97.8	2	2.2

In other areas of interest (**Table 13**), 215 observations were made across Fast-Food facilities. The findings indicate that food allergen awareness and training was the most out-of-compliance data item across all industries, with a non-compliance rate of 71.1%. The second most occurring out-of-compliance data item was time alone being properly used as a public health control according to a four (4) -hour time limit. In Fast-Food facilities this data item was observed at a 39% out-of-compliance rate. With respect to observations made based on time limits, all observations were made with respect to four (4) -hour time limits, no six (6) -hour time limit observations were made. Handwashing facilities being accessible and properly maintained was observed as the most in compliance data item (72.2%). When considering this against the high non-compliance rate for proper handwashing, it is evident that improper handwashing was not a result of access to maintained handwashing facilities.

Table 13: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Fast-Food (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	65	72.2	25	27.8
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	4	66.7	2	33.3
14	Time alone is properly used as a public health control.	18	62.1	11	37.9
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	26	28.9	64	71.1

Restaurants- Full-Service

Similar to the Fast-Food industry, Full-Service industry data indicates poor personal hygiene is the highest out-of-compliance risk factor, followed by contaminated equipment/protection from contamination. Food employees again demonstrated a high level of compliance with no-bare hand contact (94.5%) but a high level of non-compliance with respect to improper handwashing (68.1%). Foods being protected from cross-contamination during storage, preparation, and display was the second highest out-of-compliance data item (53.8%). The most out-of-compliance data item related to cross-contamination was the result of potential environmental contamination. Refrigerated, ready-to-eat foods being properly date-marked and discarded within seven (7) days of preparation or opening was observed to be at a slightly lower compliance rate of 52.7%.

Table 14: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Restaurant Industry- Full-Service

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	29	31.9	62	68.1
2	Food employees do not contact ready-to-eat foods with bare hands.	86	94.5	5	5.5
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	42	46.2	49	53.8
4	Food contact surfaces are properly cleaned and sanitized.	54	59.3	37	40.7
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	56	61.5	35	38.5
6	Foods displayed or stored hot are held at the proper temperature.	54	72	21	28
7	Foods are cooled properly.	34	58.6	24	41.4
8	Refrigerated, ready-to-eat foods are properly date-marked and discarded within 7 days of preparation or opening.	43	47.3	48	52.7
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	41	82	9	18
10	Cooked foods are reheated to required temperatures.	15	88.2	2	11.8
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	83	91.2	8	8.8

In the Full-Service industry, 252 observations were made in other areas of interest. The findings indicate that food allergen awareness and training was the most out-of-compliance data item across all industries, with a non-compliance rate of 78.0%. The second most occurring out-of-compliance data item was time alone being properly used as a public health control according to a four-hour time limit. In Fast-Food facilities, this data item was observed at a 56% out-of-compliance rate. With respect to observations made based on time limits, all observations were made with respect to four-hour time limits, no six (6)-hour time limit observations made. Consumers being properly advised of the risks of consuming raw or undercooked animal foods was observed as the most in compliance data item (95.6%).

Table 15: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Full-Service (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	68	74.7	23	25.3
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	43	95.6	2	4.4
14	Time alone is properly used as a public health control.	11	44.0	14	56.0
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	20	22	71	78.0

Retail Food Stores- Delis

In facilities meeting the Deli industry criteria, 533 observations were made to assess risk factors (**Table 16**). Three (3) risk factor data items in this industry segment were observed to be in compliance at a rate of 95% or more (food employees do not contact ready-to-eat foods with bare hands, 100%; raw animal foods cooked to required temperatures, 100%; food is received from approved sources, 96.6%). Similar to other food industry segments, although no bare hand contact was observed to have no non-compliance issues, the top out-of-compliance risk factor was poor personal hygiene due to the 53.4% proper handwashing non-compliance rate. Improper holding time/temperature was the second most out-of-compliance risk factor as a result of a 50% non-compliance rate related to foods requiring refrigeration stored at proper temperatures.

Table 16: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Retail Food Stores Industry- Delis

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	27	46.6	31	53.4
2	Food employees do not contact ready-to-eat foods with bare hands.	58	100	0	0
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	39	67.2	19	32.8
4	Food contact surfaces are properly cleaned and sanitized.	49	84.5	9	15.5

Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	29	50	29	50
6	Foods displayed or stored hot are held at the proper temperature.	39	81.3	9	18.8
7	Foods are cooled properly.	18	69.2	8	30.8
8	Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening.	34	58.6	24	41.4
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	36	100	0	0
10	Cooked foods are reheated to required temperatures.	16	94.1	1	5.9
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	56	96.6	2	3.4

In other areas of interest (**Table 17**), 148 observations were made in Deli facilities. Data item number 19, evaluating food allergy awareness, was the most out-of-compliance (48.3%), closely followed by data item number 14, time alone being properly used as a public health control (48.1%). Consumers being properly advised of risks associated with consuming raw or undercooked foods indicated a 100% in compliance rate, however only five (5) observations were made.

Table 17: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Delis (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	49	84.5	9	15.5
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	5	100	0	0
14	Time alone is properly used as a public health control.	14	51.9	13	48.1
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	30	51.7	28	48.3

Retail Food Stores- Produce

Following the study design and methodology, if the Retail food store sampled for data collection also contained a permitted Produce department where food items are cut, prepared, this facility type was also included. This methodology prompted the sampling of 41 Produce facilities. For facilities in the Produce industry, a total of 301 observations were made to assess the risk factors. Of the data items observed, seven (7) were reported at a compliance rate of greater than 90% (data items 1, 2, 3, 4, 7, 8 and 17). Improper holding time/temperature was the most out-of-compliance risk factor for this industry type, as a result of a 39% non-compliance rate observed for foods requiring refrigeration being held at proper temperatures.

Table 18: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Retail Food Stores Industry- Produce

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	37	90.2	4	9.8
2	Food employees do not contact ready-to-eat foods with bare hands.	41	100	0	0
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	40	97.6	1	2.4
4	Food contact surfaces are properly cleaned and sanitized.	40	97.6	1	2.4
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	25	61	16	39
6	Foods displayed or stored hot are held at the proper temperature.	N/A[5]	N/A*	N/A*	N/A*
7	Foods are cooled properly.	13	92.9	1	7.1
8	Refrigerated, ready-to-eat foods are properly date-marked and discarded within 7 days of preparation or opening.	39	95.1	2	4.9

[5] Per the defined Produce criteria, facilities falling under this industry type do not engage in food processes, such as hot holding, cooking raw animal foods or reheating cooked foods. Therefore, these particular risk factors are not applicable to this industry type.

Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	N/A*	N/A*	N/A*	N/A*
10	Cooked foods are reheated to required temperatures.	N/A*	N/A*	N/A*	N/A*
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	39	95.1	2	4.9

Eighty-three (83) observations in Other Interest Data Items were made for Produce facilities. It is important to highlight that although time alone as a public health control was observed at 100% non-compliance rate, this rate was observed at a low sample size of only one observation made. Therefore, this rate may not accurately reflect non-compliance for this industry type. Food allergy training was observed to be the second most out-of-compliance data item. Handwashing facilities being accessible and properly maintained were found to be the most in compliance at 82.9%.

Table 19: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Produce (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	34	82.9	7	17.1
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	N/A	N/A	N/A	N/A
14	Time alone is properly used as a public health control.	0	0	1	100
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	24	58.5	17	41.5

Retail Food Stores- Seafood

Following the study design and methodology, if the Retail food store sampled for data collection also contained a permitted Seafood department where food items are cut, and prepared, this facility type was also included. This methodology prompted the sampling of 27 Seafood facilities. Data indicates improper holding time/temperature was the most out-of-compliance risk factor in the Seafood industry (**Table 20**). Within this priority risk factor category, foods requiring refrigeration being held at the proper temperature was observed at a 48.1% non-compliance rate and foods being properly cooled at a 36.4% non-compliance rate. The second most out-of-compliance risk factor was contaminated equipment/protection from contamination. Within this risk factor category, food being protected from cross-contamination during storage, preparation, and display was observed at a 22.2% non-compliance rate. The Seafood industry facilities demonstrated the highest compliance rate for poor personal hygiene.

Table 20: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Retail Food Stores Industry – Seafood

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	22	81.5	5	18.5
2	Food employees do not contact ready-to-eat foods with bare hands.	27	100	0	0
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	21	77.8	6	22.2
4	Food contact surfaces are properly cleaned and sanitized.	26	96.3	1	3.7
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	14	51.9	13	48.1
6	Foods displayed or stored hot are held at the proper temperature.	1	100	0	0
7	Foods are cooled properly.	7	63.6	4	36.4
8	Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening.	21	80.8	5	19.2
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	1	100	0	0
10	Cooked foods are reheated to required temperatures.	0	0	0	0
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	23	85.2	4	14.8

A total of 82 observations were made in other areas of interest for the Seafood industry. The most out-of-compliance observations were related to food allergen awareness and training (22.2%). Time alone as a public health control was the most in compliance data item reported at 100%, however the limited sample of two (2) should be considered. Within the Seafood industry time alone as a public health control may have been observed in instances in which sushi preparation was conducted.

Table 21: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Seafood (Report 1B)

Data Item	Description	IN	IN%	OUT	OUT%
11	Handwashing facilities are accessible and properly maintained.	23	85.2	4	14.8
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	25	96.2	1	3.8
14	Time alone is properly used as a public health control.	2	100	0	0
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	21	77.8	6	22.2

Healthcare – Hospital

In Healthcare facilities, one notable detail is this industry type had a small sample size of only six (6), which is the total of all Hospitals in Mecklenburg County, NC. The three (3) most out-of-compliance risk factors were improper holding time/temperature, contaminated equipment/protection from contamination and poor personal hygiene. Under the poor personal hygiene risk factor, employees practicing proper handwashing was observed at a 54.5% non-compliance rate. Under the contaminated equipment/protection from contamination risk factor category, foods being protected from cross-contamination during storage, preparation and display was also observed at a 54.5% non-compliance rate. This same non-compliance rate was also observed in the foods requiring refrigeration are held at the proper temperature. Risk categories such as inadequate cooking and foods from approved sources where the most in compliance in this industry type.

Table 22: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Healthcare Industry- Hospital

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	5	45.5	6	54.5
2	Food employees do not contact ready-to-eat foods with bare hands.	11	100	0	0
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	5	45.5	6	54.5
4	Food contact surfaces are properly cleaned and sanitized.	9	81.8	2	18.2
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	5	45.5	6	54.5
6	Foods displayed or stored hot are held at the proper temperature.	6	66.7	3	33.3
7	Foods are cooled properly.	7	77.8	2	22.2
8	Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening.	6	54.5	5	45.5
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	8	100	0	0
10	Cooked foods are reheated to required temperatures.	7	87.5	1	12.5
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	11	100	0	0

A total of 33 observations were made in other interest data items. The most out-of-compliance data item found was number 14 (time alone is properly used as a public health control) at 88.9%. The most in compliance data items were related to consumer advisory (100%), followed by food allergy awareness and training (72.7%).

Table 23: Total Number and Percentage of In/ Out-of-Compliance Other Interest Data Items for Healthcare- Hospitals (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	6	54.5	5	45.5
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	2	100	0	0
14	Time alone is properly used as a public health control.	1	11.1	8	88.9
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	8	72.7	3	27.3

Healthcare- Long-term Care

The two (2) most out-of-compliance items in Long-term care facilities were the improper holding time/temperature and poor personal hygiene risk factors. In the poor personal hygiene category, employees practicing proper handwashing was seen at a non-compliance rate of 46.5%. In the improper holding time/temperature risk category, improper cooling was observed at a non-compliance rate of 50%. Most of the observations noted were a result of improper cooling methods. Food being properly reheated was the most in compliance data item under the inadequate cooking risk factor.

Table 24: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for Healthcare Industry- Long-term care

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	23	53.5	20	46.5
2	Food employees do not contact ready-to-eat foods with bare hands.	42	97.7	1	2.3
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	30	69.8	13	30.2
4	Food contact surfaces are properly cleaned and sanitized.	39	90.7	4	9.3
Improper Holding Time/Temperature					

5	Foods requiring refrigeration are held at the proper temperature.	25	58.1	18	41.9
6	Foods displayed or stored hot are held at the proper temperature.	23	85.2	4	14.8
7	Foods are cooled properly.	12	50	12	50
8	Refrigerated, ready-to-eat foods are properly date-marked and discarded within 7 days of preparation or opening.	27	62.8	16	37.2
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	12	92.3	1	7.7
10	Cooked foods are reheated to required temperatures.	13	100	0	0
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	41	95.3	2	4.7

With respect to the Other Interest Data Items, 90 observations were made in Long-term care facilities. Management and food employee allergy awareness and training was out-of-compliance at a rate of 60.5%. Time as a public health control being used properly was the most in compliance at 100%, however this was observed in a small sample size of one (1) observation. The second most in compliance data item was handwashing facilities being accessible and properly maintained at 79.1%.

Table 25: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Healthcare- Long-term care (Report 1B)

Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	34	79.1	9	20.9
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	2	66.7	1	33.3
14	Time alone is properly used as a public health control.	1	100	0	0
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	17	39.5	26	60.5

Schools

In the School industry type, poor personal hygiene and improper holding time/temperature were the most out-of-compliance priority risk factors. Employees practicing proper handwashing was observed at a non-compliance rate of 32.3% in the poor personal hygiene category. In the improper holding time/temperature priority risk factor, foods being hot held at proper temperatures was out-of-compliance at a rate of 15.7%. Cooked foods being properly reheated and food employees not contacting ready-to-eat foods with bare hands were both observed at a 100% compliance rate.

Table 26: Total Number and Percentage of In/Out-of-Compliance Risk Factor Data Items for School Industry

Data Item	Description	IN	IN %	OUT	OUT %
Poor Personal Hygiene					
1	Employees practice proper handwashing.	42	67.7	20	32.3
2	Food employees do not contact ready-to-eat foods with bare hands.	62	100	0	0
Contaminated Equipment/Protection from Contamination					
3	Food is protected from cross-contamination during storage, preparation, and display.	57	91.9	5	8.1
4	Food contact surfaces are properly cleaned and sanitized.	55	88.7	7	11.3
Improper Holding Time/Temperature					
5	Foods requiring refrigeration are held at the proper temperature.	58	93.5	4	6.5
6	Foods displayed or stored hot are held at the proper temperature.	43	84.3	8	15.7
7	Foods are cooled properly.	14	93.3	1	6.7
8	Refrigerated, ready-to-eat foods are properly date-marked and discarded within 7 days of preparation or opening.	41	89.1	5	10.9
Inadequate Cooking					
9	Raw animal foods are cooked to required temperatures.	0	0	0	0
10	Cooked foods are reheated to required temperatures.	34	100	0	0
Food Obtained From Unsafe Sources					
17	Food is received from safe sources.	61	98.4	1	1.6

In other areas of interest, 164 observations were made in School lunchrooms. Management and food employee allergy awareness and training was the most out-of-compliance, at a rate of 71%. Consumers being properly advised of risks of consuming raw or undercooked animal foods was noted to be the most in compliance at a rate of 100%, however due to the small sample size of only one (1) observation, this rate cannot be considered accurate and representative of the industry type. Handwashing facilities being accessible and properly stocked was the second most in compliance (93.5%).

Table 27: Total Number and Percentage of In/Out-of-Compliance Other Interest Data Items for Schools (Report 1B)

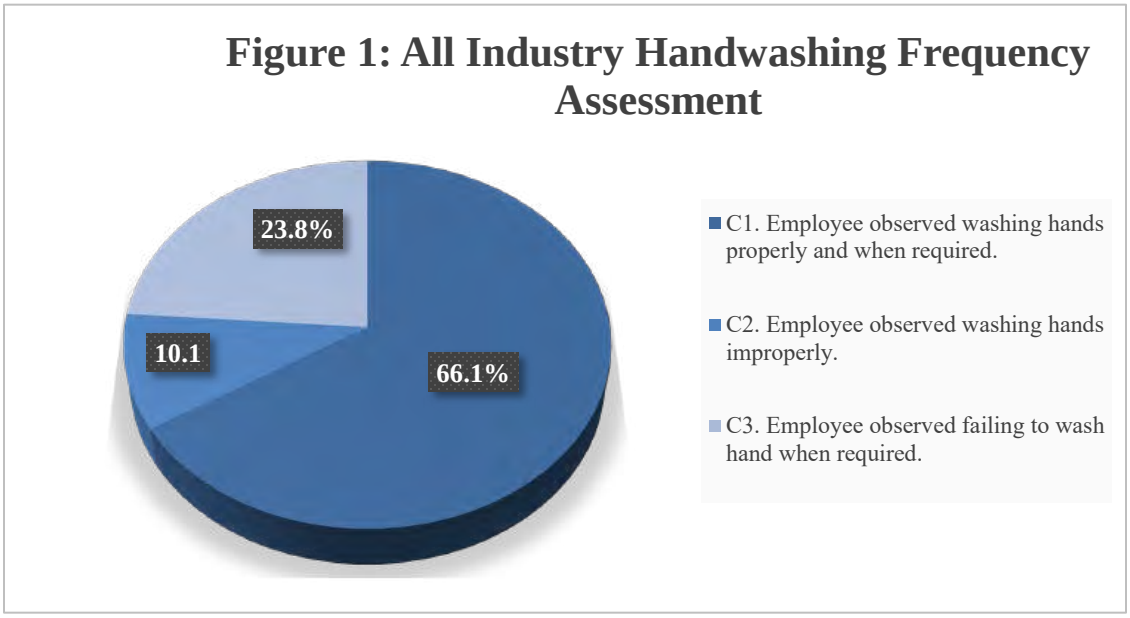
Data Item	Description	IN	IN %	OUT	OUT %
11	Handwashing facilities are accessible and properly maintained.	58	93.5	4	6.5
13	Consumers are properly advised of risks of consuming raw or undercooked animal foods.	1	100	0	0
14	Time alone is properly used as a public health control.	34	87.2	5	12.8
19	Management and food employees are trained in food allergy awareness as it relates to their assigned duties.	44	71	18	29

All Industry Handwashing Frequency Assessment

The handwashing frequency assessment tool was utilized to properly observe and record handwashing practices in all industry types. The data collector recorded a tally of each time an employee was observed doing the following:

- C1- Washing hands properly and when required,
- C2- Washing hands improperly, or
- C3- Failing to wash hands when required.

This was a new data point, not previously collected in past risk factor studies. Based on the results of the Handwashing Frequency Assessment tool, data collectors observed employees washing their hands properly and when required (C1) at an overall percentage of 66.1%.



Handwashing Frequency Assessment by Industry Type

The Restaurant industry had the highest out-of-compliance observations for failing to wash hands when required (30.83%). Conversely, School lunchrooms were found to have the highest percentage of employees observed washing hands properly and when required. The percentages reflect the proportion of C1, C2 or C3 handwashing practices observed, irrespective of the number of correct practices observed in the same survey.

Table 28: Handwashing Frequency Assessment by Industry Type

Industry Type	C1: Employees observed washing hands properly and when required	C2: Employee observed washing hands improperly	C3: Employee observed failing to wash hands when required
Restaurants	54.52	14.65	30.83
Retail Food Stores	74.93	4.58	20.49
Healthcare	74.24	7.42	18.34
Schools	83.78	5.86	10.36

All Industry Food Safety Management System Assessment

Determining the FSMS aspects associated with the most critical foodborne illness risk factors for all industry types is another objective of this study. The FSMS is a set of procedures, training, and monitoring (PTM) activities that aim to prevent or reduce associated food safety risk factors and demonstrate active managerial control. Data collectors assessed each of the three (3) FSMS elements utilizing an interview process, focusing on priority risk factors such as poor personal hygiene, contaminated equipment/protection from contamination, improper holding/time and temperature, and inadequate cooking. This assessment resulted in a PTM rating for each facility on one of the randomly assigned priority risk factors. The study calculated a single overall PTM rating for each restaurant by adding all individual PTM ratings for each data item and dividing by the number of individual ratings given. This rating can be treated as a continuous variable with possible values ranging from 1 (complete absence of management systems) to 4 (well-developed and documented management systems). The PTM rating is a numerical indication of how well-developed and documented a FSMS is. According to the FDA, the more well-developed and well-documented a FSMS is, the more likely the operator can achieve Long-term and continuous active managerial control of the foodborne illness risk factors that affect their operation.[6] The FSMS data collected indicates most facilities (39%) were considered to have well-developed and well-documented systems in place. A small percentage of facilities were not evaluated due to the data items being randomly selected for the PTM evaluation and found to be not applicable to the facility; therefore, a FSMS score could not be calculated in these cases and is indicated as N/A. Additional data items were not assigned for evaluation of PTM if the first set of randomly selected data items could not be evaluated.

Table 29: All Industry Food Safety Management System- FSMS Assessment

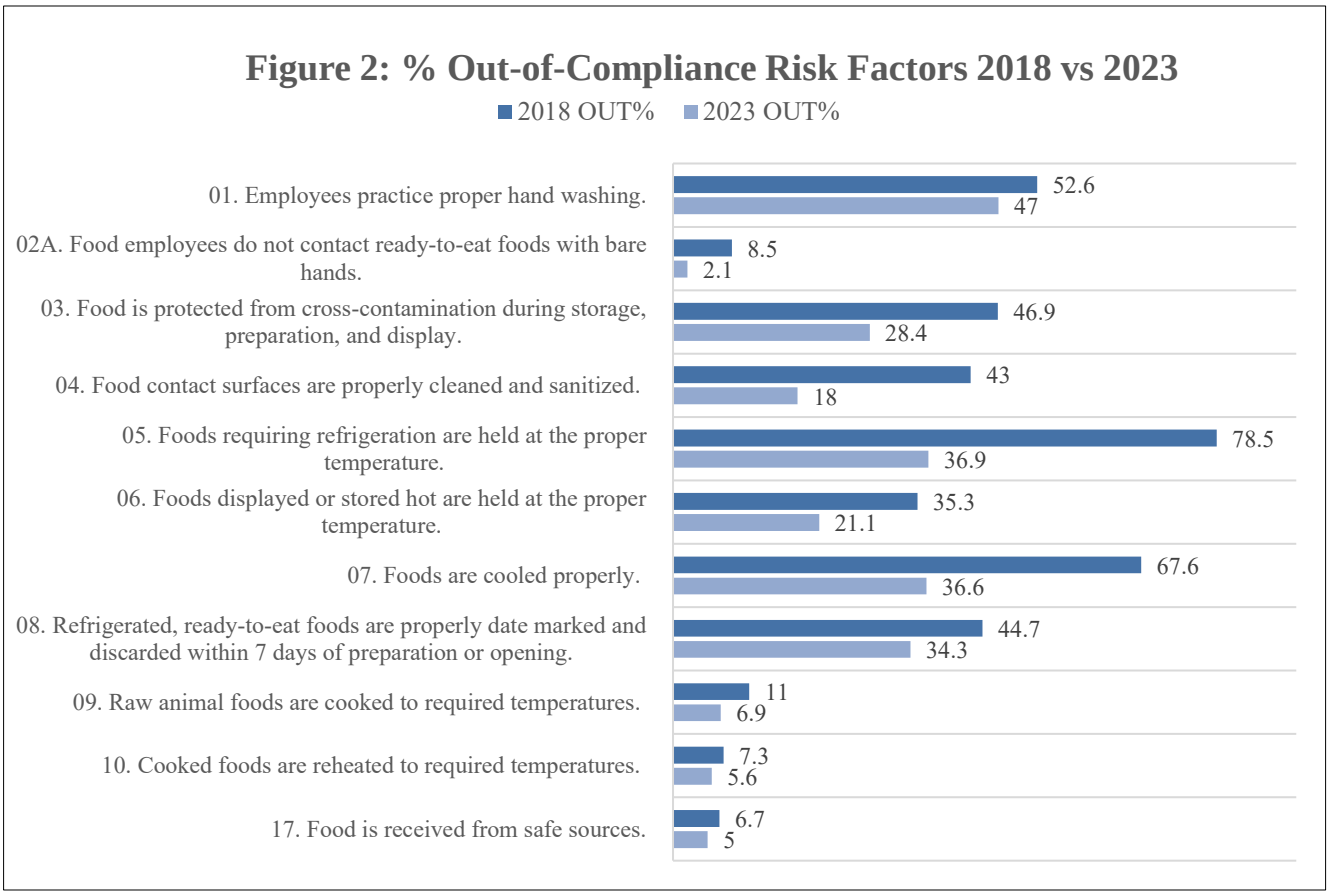
PTM Score to Text	%
N/A	5.9
Non-existent	2.4
Underdeveloped	27.9
Well-developed	24.6
Well-developed and Well-documented	39

[6] FDA. Managing Food Safety: A Regulator's Manual For Applying HACCP Principles to Risk-based Retail and Food Service Inspections and Evaluating Voluntary Food Safety Management Systems. College Park, MD: FDA; 2006. Report No. OMB Control No. 0910-0578.

COMPARATIVE ANALYSIS

All Industry Percent Out-of-Compliance Comparison

In comparison to the 2018 RFS, the 2023 RFS analyzed 9.6% more facilities for data collection. In the previous 2018 RFS, the 7,313 observations were made, while this study resulted in 8,855 observations. In the previous RFS study, out-of-compliance percentages ranged from 6.7 ─ 78.5%. In comparison, this study observed out-of-compliance percentages from 2.1 ─ 47%. Previously the most out-of-compliance priority data item observed was food requiring refrigeration being held at proper temperatures, while in 2023 proper handwashing was observed as the most out-of-compliance. This observation shifts the focus of priority interventions from improper holding temperature/time to personal hygiene in 2023.



Given the goal of the intervention strategies is to reduce the out-of-compliance rate of priority data items observed, the success of these intervention strategies can be evaluated based on a decrease in out-of-compliance behaviors over time. As such, the percent change of out-of-compliance priority data items would indicate whether the 2018 intervention initiatives were effective in improving these items. A negative percent change would indicate the out-of-compliance rate has decreased since 2018 and a positive percent change would indicate the observations have increased. For the purposes of this study,

a notation of ↓% would indicate an improvement in the percentage of observations seen, while a notation of ↑% would indicate worsening compliance. For example, percent change is calculated as $((y_{2018} - y_{2023}) / y_{2023}) *100$. Utilizing the proper handwashing data, percent change would be calculated as, (52.6 – 47)/52.6 = 10.65%. Given this is a positive number, the percent change would be interpreted as an improvement of 10.65% or a decrease in observed out of compliance handwashing practices, this decrease is visually represented as ↓10.65%. When evaluating the percent change of these data times from 2018 to 2023, most notable is that all priority data items improved at a range of 10 ─ 75%. The most improved priority data item was employees not contacting ready-to-eat foods with bare hands, which decreased by over 75%. The least improved priority data item was employees practicing proper handwashing at about 10%.

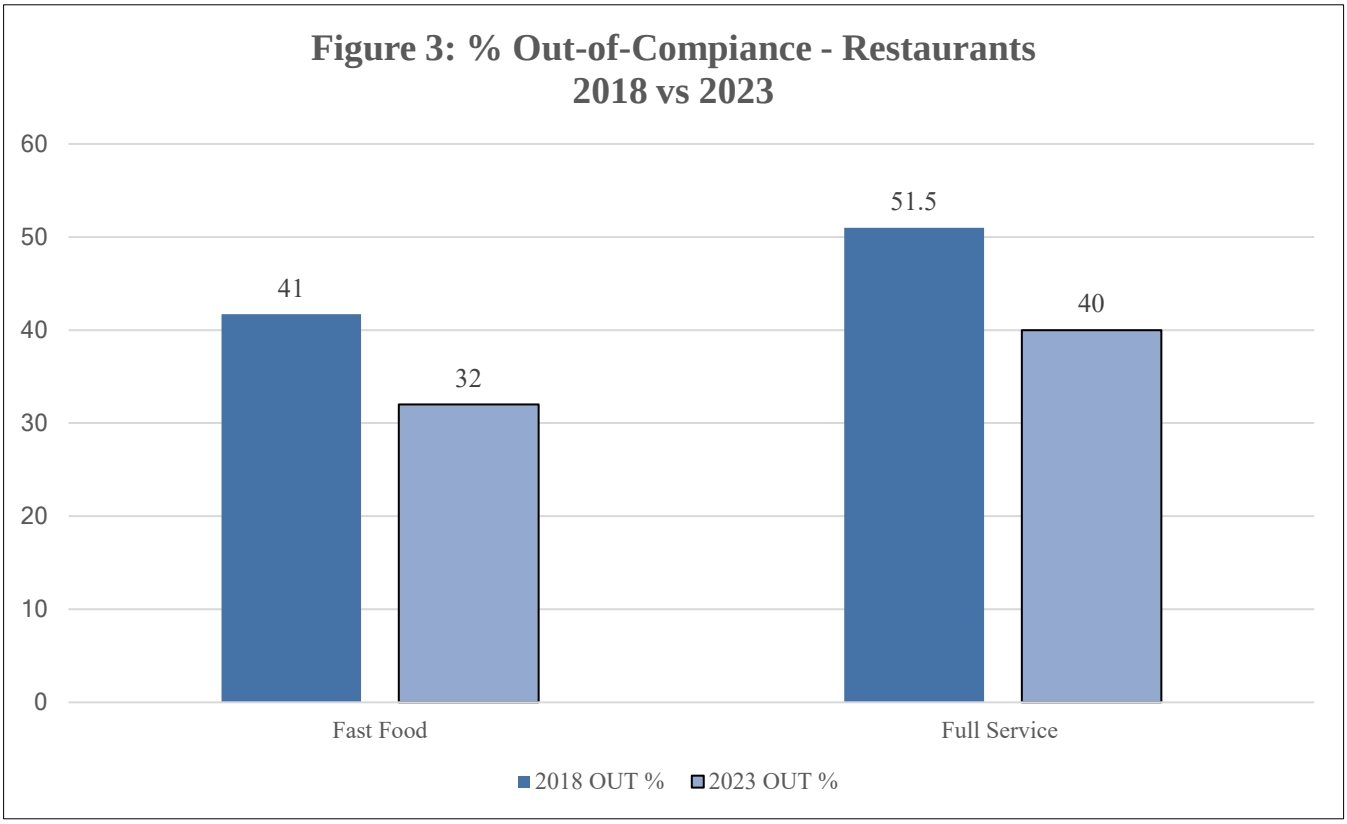
Table 30: **Percent Change in Out-of-Compliance Priority Data Items from 2018 to 2023**

Data Item	Priority Data Item Description	% Change
1	Employees practice proper handwashing.	↓ 10.65%
2	Food employees do not contact ready-to-eat foods with bare hands.	↓ 75.29%
3	Food is protected from cross-contamination during storage, preparation, and display.	↓ 39.45%
4	Food contact surfaces are properly cleaned and sanitized.	↓ 58.14%
5	Foods requiring refrigeration are held at the proper temperature.	↓ 52.99%
6	Foods displayed or stored hot are held at the proper temperature.	↓ 40.23%
7	Foods are cooled properly.	↓ 45.86%
8	Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening.	↓ 23.27%
9	Raw animal foods are cooked to required temperatures.	↓ 37.27%
10	Cooked foods are reheated to required temperatures.	↓ 23.29%
17	Food is received from safe sources.	↓ 25.37%

Percent Out-of-Compliance Comparison

Restaurants

When analyzing the Restaurant industry, the non-compliance percentage decreased in both the Full-Service and the Fast-Food industry.



The decrease in percent change for the Fast-Food industry indicates more improvement was seen in this industry segment than the Full-Service industry in 2023.

Table 31: Percent Change Out-of-Compliance- Restaurant Industry Comparison

Facility Type	% Change
Fast-Food	↓23.3
Full-Service	↓21.6

Retail

When comparing 2023 to 2018 data for all data items in the Retail food industry, the most improved industry segment was the Produce Retail industry. These facilities were observed to have a 38.6% decrease in non-compliance, while the Seafood facilities were found to have a 21.3% decrease and the Deli industry a 25% decrease.

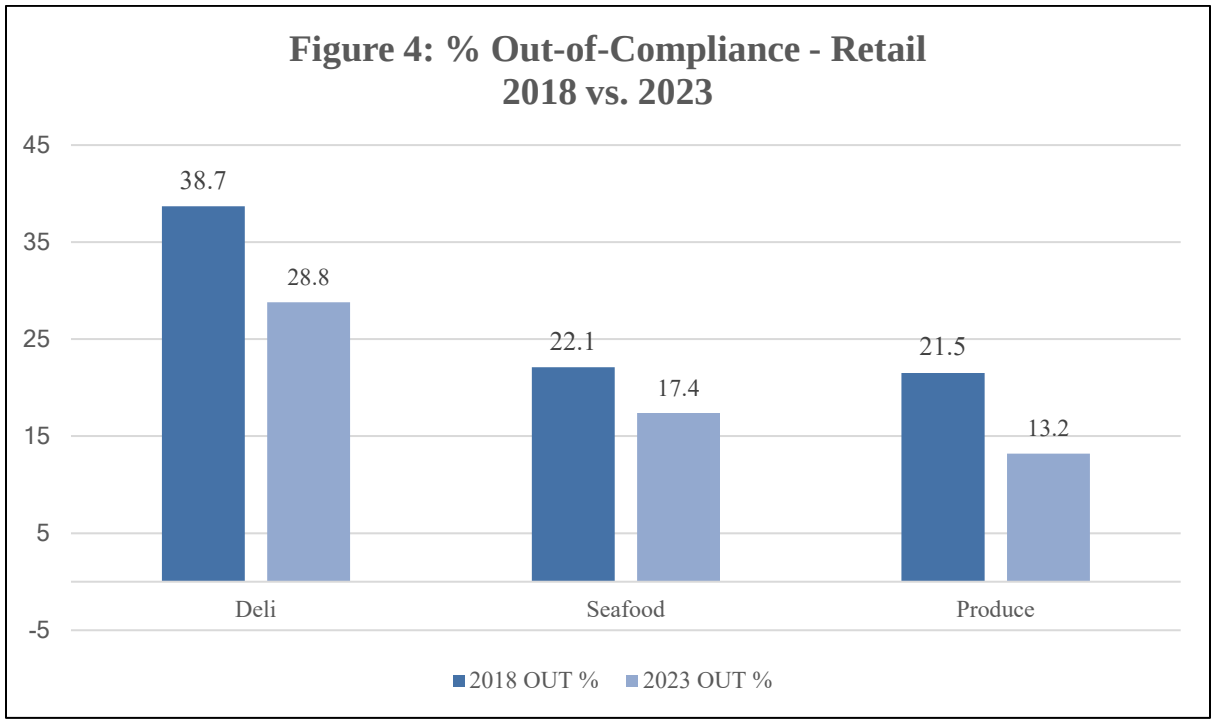


Table 32: Percent Change Out-of-Compliance- Retail Industry Comparison

Facility Type	% Change
Deli	↓25
Full-Service	↓21.3
Produce	↓38.6

Healthcare

With respect to the Healthcare industry, Long-term care facilities were observed to have a greater improvement than Hospitals. Hospitals saw a decrease in out-of-compliance percentages by 21%, while Long-term care facilities saw a decrease of 30.1%.

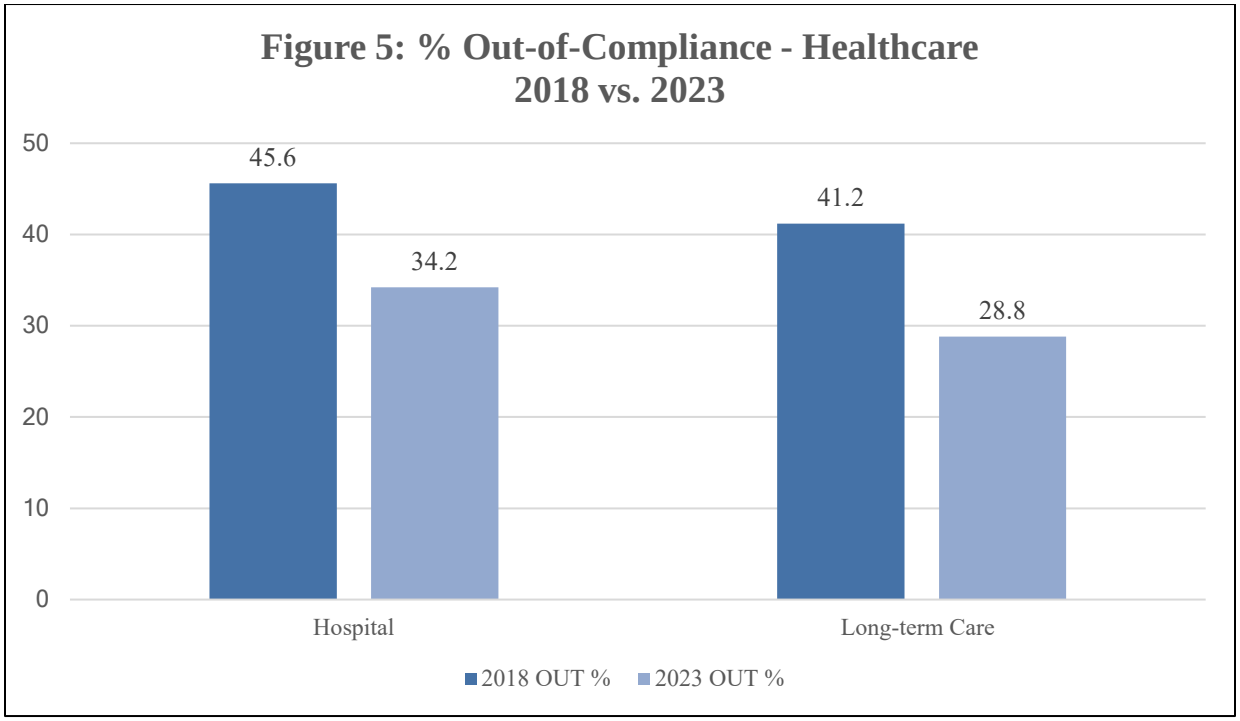


Table 33: Percent Change Out-of-Compliance- Healthcare Industry Comparison

Facility Type	% Change
Hospital	↓41
Long-term Care	↓59

Schools

When analyzing RFS data from School lunchrooms, it is important to note that no base kitchens or combination kitchens were observed in 2018. As such, a comparative analysis for these School lunchroom types is not applicable for this study. Given that the 2023 data collection period extended into the summer months, it is possible that the School lunchrooms may have varied their operation procedures to function as summer lunch feeding sites, either serving as a base kitchen where food was prepared, then transported to secondary locations for service only or as a base kitchen and a service location where food is also served onsite.

Table 34: School Lunchroom 2018 vs 2023 Comparison and Percent Change

Facility Type	2018 OUT %	2023 OUT %	% Change
Base Kitchen	0	13.7	N/A
Onsite Kitchen	23.5	12.6	45.7
Combination Kitchen	0	41.7	N/A

The onsite kitchen segment does allow for a comparative analysis indicating a 45.7% decrease in out-of-compliance observations noted in 2023 than 2018.

Comparison of Top Three Out-of-Compliance Risk Factors

When comparing the top three (3) out-of-compliance data items from 2018 to 2023 there are only subtle changes in priority. Although the rate of non-compliance has decreased in 2023, compliance with cold holding, cooling, and proper handwashing remain top priority in 2023. Proper handwashing has increased in priority from ranking number three (3) to first in priority. Compliance with cooling has decreased in priority from second to third and cold holding has decreased from first priority to second priority.

Table 33: 2018 vs 2023 Top Out-of-Compliance Comparison

2018 Top Three (3) Out-of-Compliance Data Items	2023 Top Three (3) Out-of-Compliance Data Items
Foods requiring refrigeration are held at the proper temperature.	Employees practice proper handwashing.
Foods are properly cooled.	Foods requiring refrigeration are held at the proper temperature.
Employees practice proper handwashing.	Foods are properly cooled.

INTERVENTION STRATEGIES

Mecklenburg County intervention strategies aim to reduce the occurrence of out-of-compliance data items by implementing a comprehensive Food Safety Management System (FSMS). This holistic approach serves as a tool for developing procedures, providing training, and implementing monitoring practices—all designed to ensure adherence to food safety regulations and promote active managerial control.

At the core of this strategy is the Mecklenburg County FSMS Guide, a foundational resource that offers various tools to educate and foster a culture of food safety. The guide provides templates, checklists, and training materials, emphasizing the importance of FSMS. It recognizes that food safety is not just about meeting regulatory requirements; it's crucial for safeguarding public health and maintaining consumer trust.

By adopting this three-tiered approach, the FSMS Guide will support every member of the food service team. The Food Safety Manager will gain tools to implement or strengthen current Active Managerial Control, the food service employees will be provided easy-to-read training tools, and the Environmental Health Specialist will be properly training on how to use the toolkit during onsite visits. Each tier plays a vital role in upholding superior food quality standards. The ultimate goal is to instill not only knowledge but also a deep commitment to safe food handling practices, creating a lasting food safety culture within the organization.

Tailored specifically to address the principal risk factors for non-compliance identified in this study, the overall objective is to improve food safety and quality across the food service industry, reflecting a proactive and dedicated approach to public health.

CONSIDERATIONS FOR FUTURE RISK FACTOR STUDIES

Training

One of the limitations of our study was the adequacy of staff training prior to data collection. Staff were trained on the study protocol and procedures, but it was found that some aspects of the data collection required more intensive and specific training. For example, conducting handwashing assessments and evaluating FSMSs were challenging tasks that needed more practice and guidance. Therefore, we recommend that future studies allocate more time and resources for staff training, especially on these aspects, to ensure the quality and reliability of the data.

Dedicated Quality Assurance and Data Entry Staff

One of the key factors that contributed to the success of the study was the allocation of Quality Assurance Analysts. Staff members with previous experience conducting risk factor studies were assigned to these roles, contributing to their ability to conduct quality assurance and data entry accurately and efficiently. These roles were exclusively assigned without data collection duties. This decision proved to be very

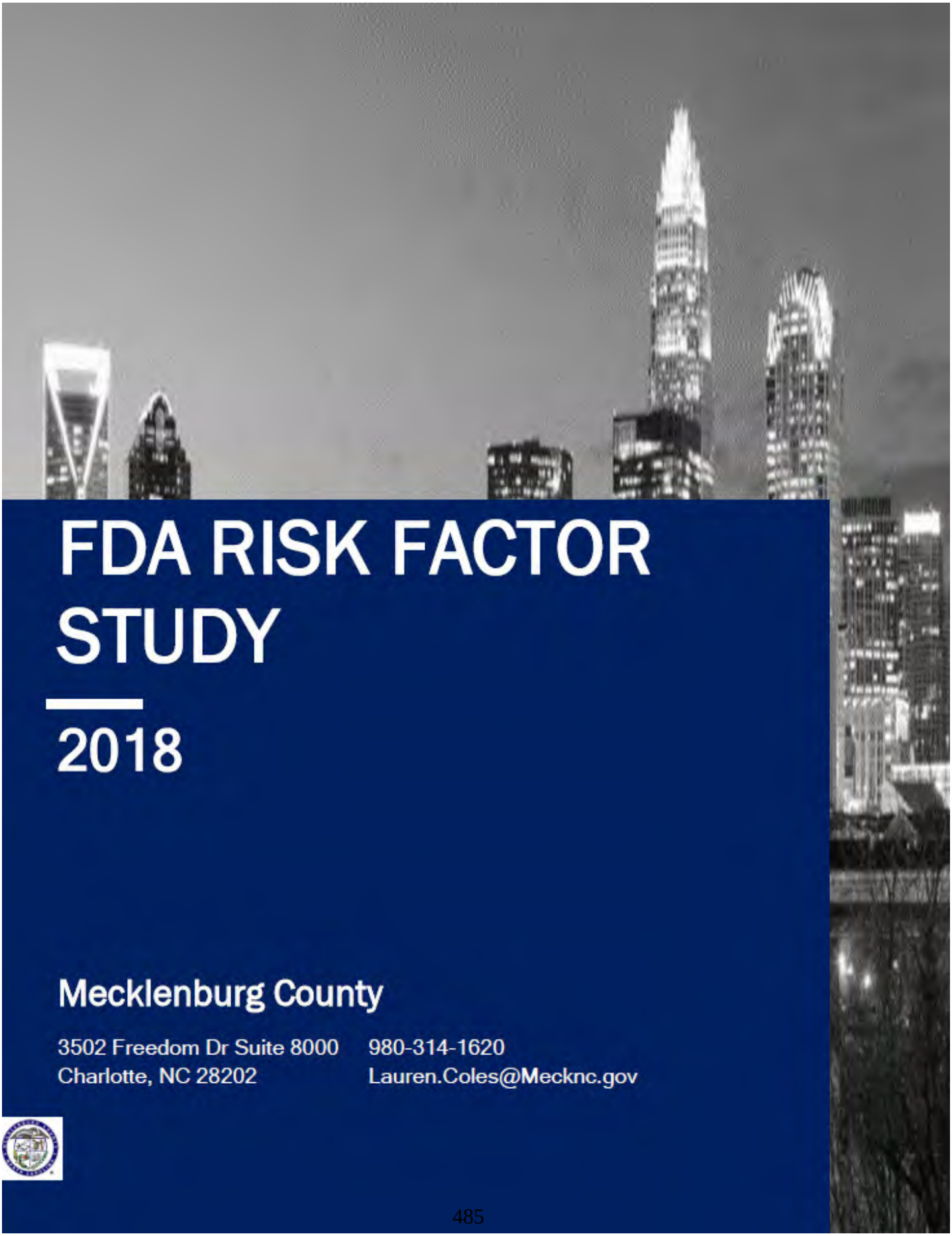
beneficial for the quality and accuracy of the data we collected, as it allowed them to focus on their specific duties and apply consistent standards and procedures. Moreover, it increased the efficiency of the data collection process, as it reduced the errors, delays and redundancies that could have occurred if these roles were not exclusively assigned. Therefore, we recommend that future studies adopt a similar approach to staff allocation, as it can greatly enhance the reliability and validity of the data.

Electronic Data Collection Form and Document Management

Another study strength was the use of electronic fillable data collection forms and shared files for data collection form submission. This method enabled our staff to enter data directly on their computers or iPads, without the need for paper forms or manual transcription. Moreover, the staff could submit their completed forms instantly by dropping them into a shared folder on OneDrive, which was accessible to the Quality Assurance Analysts. This facilitated timely submission for not only quality assurance checks, but also data entry and reduced the risk of data loss or errors. We believe that this approach enhanced the efficiency and accuracy of our data collection process.

APPENDICES

Appendix I: 2018 Risk Factor Study Report



2018 Mecklenburg County NC Risk Factor Study of Foodborne Illness Risk Factors

Background

In 1998, the US Food and Drug Administration's (FDA) National Retail Food Team initiated a ten-year voluntary study to measure trends in the occurrence of foodborne illness risk factors- preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention (CDC) as contributing factors to foodborne illness outbreaks at the retail level. Specifically, the study included data collection inspections of various types of retail and foodservice establishments at five-year intervals (1998, 2003, and 2008) in order to observe and document trends in the occurrence of the following foodborne illness risk factors:

- Food from Unsafe Sources
- Poor Personal Hygiene
- Inadequate Cooking
- Improper Holding/Time and Temperature
- Contamination Equipment/Protection from Contamination

The FDA risk factor study provides a solid foundation for developing program intervention strategies and justifies program resources. Volunteering in the National Retail Food Regulatory Standards allows local agencies to adopt this solid foundation to achieve national uniformity. Mecklenburg County values achieving national uniformity for retail food protection and has been enrolled in this voluntary program since 2010. Mecklenburg County last conducted a risk factor study in 2011. Since 2011, extensive changes have been made to the Voluntary National Retail Food Regulatory Program Standard guidelines. As a result, the data from the 2011 risk factory study will be considered a stand-alone study. It is also important to note that the 2011 risk factor study was conducted before North Carolina adopted the 2009 FDA Food Code.

STUDY OBJECTIVES AND PURPOSE

The purpose of the 2018 risk factor study is to collect data to establish a baseline against which future performance can be measured. Over time, this data will also determine the following for each facility type included in the study:

- Trends of improvement or regression in foodborne illness risk factor occurrence over time;
- Whether progress has been made toward the goal of reducing the occurrence of foodborne illness risk factors

The objectives of this study will be to:

- Establish baseline data for facility compliance with risk factors
- Determine the foodborne illness risk factors that are in most need of priority attention
- Design intervention strategies focused on reducing the occurrence of the risk factors determined to need priority attention

INDUSTRY SEGMENTS AND FACILITY TYPES INCLUDED IN THE STUDY

Data was collected from the following industry segments:
(1) Health Care
(2) Schools (K-12)
(3) Restaurants
(4) Retail Food Stores

The four categories are further subdivided into facility types:
(1) Health Care
(a) Hospitals
(b) Long-term Care Facilities
(2) Schools
(a)Base Kitchen
(b)Onsite Kitchen
(c)Combination Kitchen
(3) Restaurants
(a) Fast Food
(b) Full Service
(4) Retail Food Stores
(a) Deli Department
(b) Seafood Department
(c) Produce Department

To ensure consistency in measuring trends from one risk factor study to the next, definitions were written for each facility type. Definitions are noted in Tables 1-4.

Table 1: Description of Facility Types that Comprise the Health Care Industry

Facility Type	Description
(a) Hospitals	A food service operation that provides for the nutritional needs of inpatients, by preparing meals and transporting them to the patient's room and/or serving meals in a cafeteria setting (meals in the cafeteria may also be served to hospital staff and visitors).
(b) Long-term Care Facilities	A food service operation that prepares meals for the residents in a group care living setting such as nursing homes and assisted living facilities.
NOTE:	For the purposes of this study, healthcare facilities that do not prepare or serve food to a highly susceptible population, such as mental healthcare facilities, are not included in this facility type category.

Table 2: Description of Facility Types that Comprise the School Industry

Facility Type	Description
(a) Base Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Meals are fully prepared in the onsite kitchen and some meals are shipped to other locations (including multiple locations within the same school).

(b) Onsite Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. All meals are prepared and serviced on-site.
(c) Combination Kitchen	Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. Some meals are prepared and served on-site; while others are fully prepared or partially prepared in a central or base kitchen.
NOTE:	For the purpose of this study, Central Kitchens that prepare meals for serving at receiving/satellite schools, but do not serve any student meals on-site at the Central Kitchen, are not included as part of the study sample. In addition, restaurants or other retail food operations that provide meals to school facilities are not included as part of the study sample for schools. Also, Receiving or Satellite Kitchens that obtain partially or fully prepared meals from a base or central kitchen and conduct little or no food preparation are not included as part of this study. Other school food service facilities eliminated from the study sample include those for behavioral health schools, those serving a high school population only, any schools which had limited to no food prep such as schools holding a permit for only handling catered food. Permitted preschool kitchens within a childcare facility were eliminated as they had little to no food prep; however, elementary schools which also serve preschool children were included.

Table 3: Description of Facility Types that Comprise the Restaurant Industry

Facility Type	Description
(a) Fast Food	Restaurants that provide food via counter service, wait, or drive through rather than full table service. Payment is made at a counter, not via check delivered to the table.
(b) Full Service Restaurants	Restaurants that offer food via full table service, even if they also offer a counter or drive through option. Food can be ordered and served, and payment taken at the table.
NOTE:	For the purpose of this study, the following operations are excluded: mobile food units (food trucks), pushcarts (hot dog carts), gas station/convenience stores, and caterers.

Table 4: Description of Facility Types that Comprise the Retail Food Industry

Facility Type	Description
(a) Deli Department	Operations selected from the supermarket and grocery store segments of the industry where food such as luncheon meats and cheeses, are sliced for the customers and where sandwiches and salads are prepared onsite or received from a commissary in bulk containers, portioned and displayed. Parts of the deli operations may include salad bars, pizza stations and any other stations or bars managed by the deli department. Other areas where meat and poultry products are cooked and offered for sale and managed by the deli department managers may also be included.
(b) Seafood Department	Operations selected from the supermarket and grocery store segments of the industry where seafood, is cut, prepared, stored, or displayed for sale to the consumer. In some retail food stores, the seafood department will be operated under the same manager who has responsibility over the meat and poultry department / operation. When the seafood department is combined with a meat and poultry department, the data collector will assess only those procedures and practices associated with the processing of seafood.

(c) Produce Department	Operations selected from the supermarket and grocery store segments of the industry where produce is cut, prepared, stored, or displayed for sale to the consumer. A produce operation may include salad bars or juice stations that are managed by the produce manager.
NOTE:	For the purpose of this study, only supermarkets or grocery stores with a permitted deli facility were included. If the retail food store also contained a permitted seafood and/or produce department where food items are cut, prepared and stored these facility types were also included. In-store sushi bars operated and managed as part of the retail food store business are considered part of seafood department / operation for the purposes of this Study. If the in store, sushi bar operation is under the management and operated by a separate business from the retail food store, it is not to be included as part of the data collection. Convenience stores, are not included as part of the Study sample.

SELECTION OF DATA COLLECTORS

Mecklenburg County selected a small group of 14 FDA Standardized Environmental Health Specialists to serve as data collectors for this study. These specialists also are regularly selected to serve as trainers for new staff and have a solid understanding of conducting risk-based inspections. This group was purposefully chosen to be a small group so that consistency in data collection could be maintained. Each of these specialists received data collection training by Donna Wanucha, the FDA Retail Specialist. All data collectors met at least weekly as needed to calibrate the collection process and consistent use of the marking instructions. The FDA Retail Specialist was consulted regularly for interpretation questions.

RANDOM SELECTION OF ESTABLISHMENTS

All facilities were pulled from a CDP system report and sorted according to the facility definitions and listed in an excel spreadsheet. All sorted facilities were tallied, and these numbers were given to the FDA Statistician to obtain the appropriate sample sizes as listed in Table 5.

Table 5: Statistical Breakdown of Facility Types

Facility type	Inventory	95/5	95/10
Hospitals	11	11	11
Long-term Care	54	48	35
Schools	156	112	60
Retail	124	94	55
Fast food	727	252	85
Full service	579	232	83

Mecklenburg County selected the sample size calculated by the FDA statistician for a 95% confidence with an estimate that would be within a 10% margin of error. Sorted facility lists were than randomized using an online randomizing system and put into individual master lists. This list was then divided amongst the 14 Environmental Health Specialists. If Specialists encountered any closed facilities or were denied entry, they were assigned the

next substitute from the master list. Substitutes were also assigned in cases where listed full-service facilities were discovered to be fast food facilities by definitions in Table 3.

DATA COLLECTION FORM

A data collection form was developed to assess the five CDC risk factors for foodborne illnesses for the 2013 Food Code. Currently North Carolina utilizes a version of the 2009 Food Code. The data collection format was modeled after the "FDA Retail Food Program Foodborne Illness Risk Factor Study Restaurant Data Collection Form" and the Rockingham County, NC data collection form. Data collection items 1-10 and 17 are segmented by the risk factors that they address. Assessing these 11 basic items meets the minimum standard of Standard 9. In addition, three questions were added to assess: handwashing facilities maintained and accessible, consumer advisory and time as a public health control. The Mecklenburg County FOODSHIELD database entry form was customized to match the data collection form (See Appendix A).

For each data collection item on the form, Specialists indicated the following compliance options, in accordance with the 2013 Food Code:

- **IN –** means that all observed occurrences were **IN** Compliance with the appropriate *FDA Food Code* provision for the data item or information statement.
- **OUT** – means that one or more of the observations made were **OUT** of Compliance with the appropriate *FDA Food Code* provision for the data item or information statement. An explanation of the specific criteria used for determining **OUT** of Compliance for each data item is to be recorded by the data collector on the data collection form.
- **NO** – means the data item or information statement was **Not Observed** during the inspection. The **NO** marking is used when an information statement is a usual practice in the food establishment, but the practice is **NOT** observed during the time of the inspection. For example, if a restaurant that seasonally serves shellfish was selected for the study, but the inspection occurred during non-shellfish season, then the information statements "B" and "F" are marked NO for the overarching data item **#17 – Food is received from safe sources** as illustrated below.
- **NA** – means the data item or information statement is Not Applicable. The NA marking is used when a data item or information statement is NOT a function of the food establishment. Using the data item table below as an example, if a restaurant does NOT cool cooked foods (information statement "A"), or does NOT cool foods prepared at ambient temperatures (information statement "B"), then ALL the information statements pertaining to cooling foods under data item 7 are marked NA. Since all the information statements (A through D) for this data item were marked NA, the data item will also be marked NA. More on the marking relationships between information statements and data items is presented in the next section.

CONDUCTING THE DATA COLLECTION

The 14 Environmental Health Specialists collected data by conducting unannounced visits independent of a routine compliance inspection. Upon arrival the EHS explained that the facility had been randomly selected to participate in a voluntary Risk Factor Study. The purpose and benefits of the Risk Factor Study were explained to the operators. It was also explained that data collected would not affect their score or replace a routine compliance inspection. Once granted access, data collectors began with a review of the facilities menu to determine processes conducted. This activity was followed by a quick walk through to identify the critical food processes being conducted at the time of the visit. The flow of the data collection is then prioritized, and observations recorded on the data collection form using the marking instructions (Appendix B).

DATA COLLECTION QUALITY ASSURANCE

Two Environmental Supervisors and one retired Environmental Health Program Manager hired as a temporary employee were assigned to enter and conduct quality assurance checks on all completed data collection forms. Although other staff could be granted access to enter data into the FOODSHIELD site, access was limited to only 3-4 people ensure uniform quality assurance on all items entered.

Data Collectors were provided all required materials: marking instructions, data collection forms (paper and electronic), facility assignments, 2013 food codes, a standardized acronyms list for equipment, and the 2013 FDA Food Establishment Risk Categorization of chart (See Appendix C). Staff were allowed to conduct no more than 2 risk factor study inspections the week prior to training by the FDA Retail Specialist. This allowed sufficient time to acclimate to the form and present the Specialist with any questions during training.

Environmental Health Specialists were contacted to discuss observations for clarification of any conflicting or unclear data that was collected. Large-scale inconsistencies, such as capturing ambient air temperatures for raw shell eggs, were addressed and discussed during calibration meetings. These meeting interpretations were captured in “RFS Clarification” documents and distributed to staff conducting data collection surveys.

TROUBLE SHOOTING

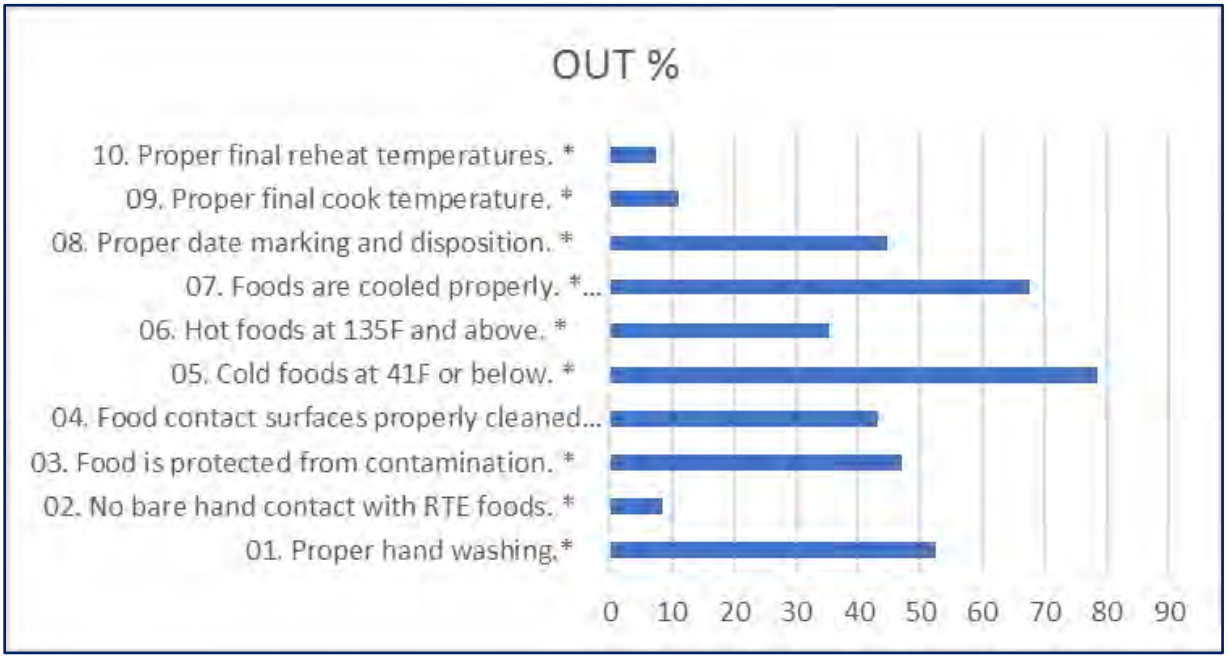
Some technical issues were encountered with the FOODSHIELD site while entering the data. When entering establishment information all data must be accurate prior to saving. If inaccurate data is saved, the establishment record would need to be deleted to correct the entry. Another technical issue encountered was after submitting a record, an error box would indicate item 1 was not answered, despite this information having been entered. Issues were reported to and resolved by the University of Minnesota Food Protection and Defense Institute.

To alleviate workload concerns by staff, provisions were made to account for data collection visits by designating a specific activity code in the Custom Data Processing system for these visits. To encourage staff to conduct thorough data collection visits, selected staff were permitted to include these visits in their monthly required inspection totals.

RESULTS

After all the data was entered into the FOODSHIELD database for statistical analysis, reports generated by FOODSHIELD were used to determine priority risk factors requiring intervention. Report 3A was utilized for an overview of out of compliance risk factors for the primary data items 1-10 of all facility types (Figure 1):

Figure 1: Percentage OUT for Primary Data Items 1-10.



COLD HOLDING

When analyzing Figure 1, the top priority data item reported out of compliance for all industry segments is foods requiring refrigeration being stored at 41F and below, data item number 05. It is important to note that the 2013 FDA Food Code requires refrigeration at 41F and below; however, at the time the data was collected, the NC Food Code required cold foods to be refrigerated at 45F and below. Maintaining proper cold holding temperatures helps to control the growth of Listeria Monocytogenes. Listeria Monocytogenes is a type of bacteria that can cause serious illness in immunocompromised populations. Listeria grows at a much faster rate at 45F than at 41F. North Carolina adopted a requirement of 41F and below on January 1, 2019, after the study was completed. When looking at this data it is important to note that having one food product above 41F would place the facility out of compliance with data item 05 in accordance with the marking instructions. Several other counties across the state have reported similar noncompliance rates for cold holding. The top industry segments out of compliance with cold holding were Restaurants and Retail Food Stores (See Table 6).

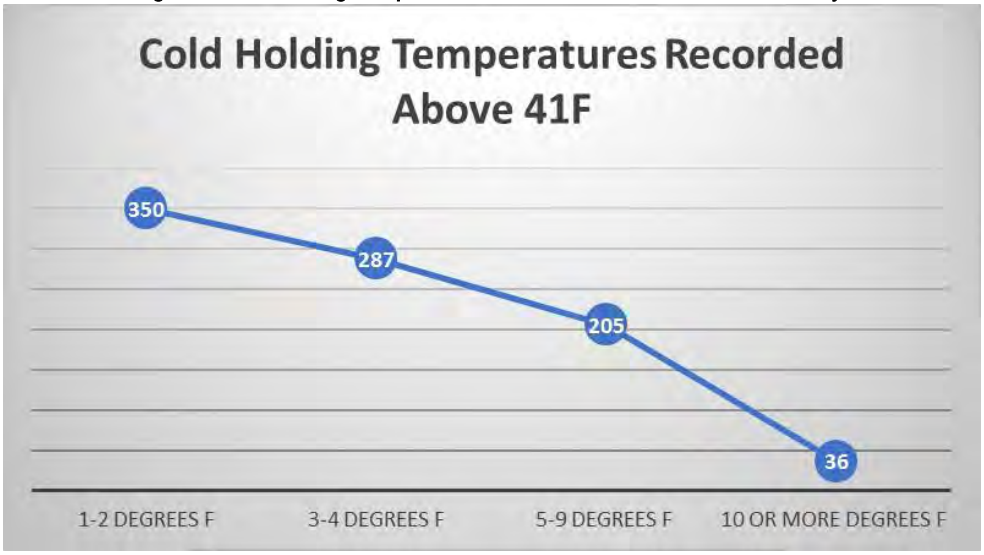
Table 6: Cold Holding Compliance by Industry Segments

Industry Segment	% OUT
Restaurants	94.3
Healthcare	68.9
Retail Food Stores	79.4
Schools	38.3

Within the restaurant industry both Full Service and Fast Food facilities demonstrated non-compliance rates over 90%. Data collected from Healthcare facilities indicated that Hospitals were out of compliance at a 90% rate, while Long-Term-Care facilities were at 63%. In the Retail Food industry, Delis and Produce areas saw non-compliance rates around 85%.

Food products within the Restaurant Industry were further analyzed to determine how many degrees above 41F products were found. The data presented in Figure 2 indicates that products found above 41F were most commonly found 1-2 degrees above 41F.

Figure 2: Cold Holding Temperatures Recorded for the Restaurant Industry.



COOLING

The second most frequent out of compliance data items is cooling. Proper cooling is assessed in item numbers 7A, 7B, 7C and 7D on the data collection report. Data item 7A determines whether cooked TCS food is cooled from 135F to 70F within 2 hours and from 135F to 41F or below within a total of 6 hours. Data item 7B determines compliance with cooling TCS foods prepared at ambient temperature and cooled to 41F or below within 4 hours. Data item 7C evaluates whether proper cooling methods or equipment was used. Compliance with data item 05 appeared to directly affect compliance with data item 07. If equipment within a facility is incapable of maintaining products at 41F as stated in data item 05 (cold holding) then the facility will not comply with data item 07 (cooling).

When compliance with cooling was further segmented by Industry, the data collected indicates that Full Service Restaurants were most out of compliance at 96.3%, followed by Hospitals at 90%, Retail Food Delis at 85.2%, Fast Food at 85%, Retail Produce at 83.3 and Long-Term Care Facilities at 62.9%. Schools and Retail Seafood departments were the most in compliance with cold holding at 41F. Retail Seafood departments were only 24.1% out of compliance and Schools were 38.3% out of compliance. Full Service industry segments are most out of compliance with data item 7A requiring food to be properly cooled from 135F. Data collected indicates that Hospitals, Retail Food Delis and Fast Food industry segments were most out of compliance with ambient air cooling under 7B.

HANDWASHING

Handwashing is assessed for compliance under data items 1A and 1B. Item 1A ensures hands are washed using proper procedure in accordance with 2-301.12 of the Food Code. Item 1B confirms employees are appropriately washing hands when required in accordance with 2-301.14 of the Food Code. The data collected indicated that all facilities in the study were 33.9% out of compliance with data item 1A and 43.3% out of compliance with data item 1B. This data demonstrates that employees had more difficulty with washing hands at the appropriate times. Restaurants and Healthcare facilities saw the highest out of compliance rates for handwashing. Data collected from restaurants showed 64% out of compliance rates and healthcare 57.8% (Table 7).

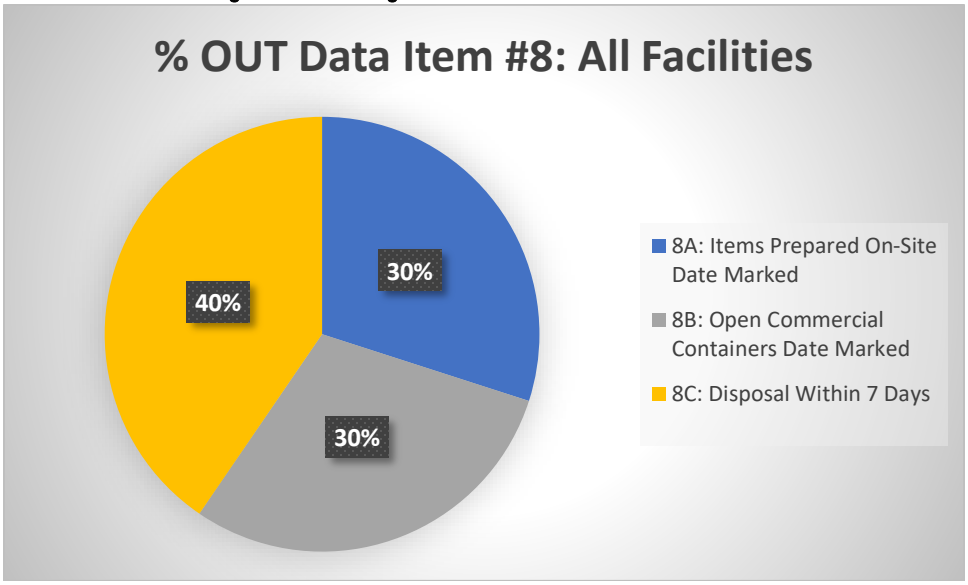
Table 7: Handwashing Compliance by Industry Segments

Industry Segment	% OUT
Restaurants	64.4
Healthcare	57.8
Retail Food Stores	40.2
Schools	36.7

DATE MARKING

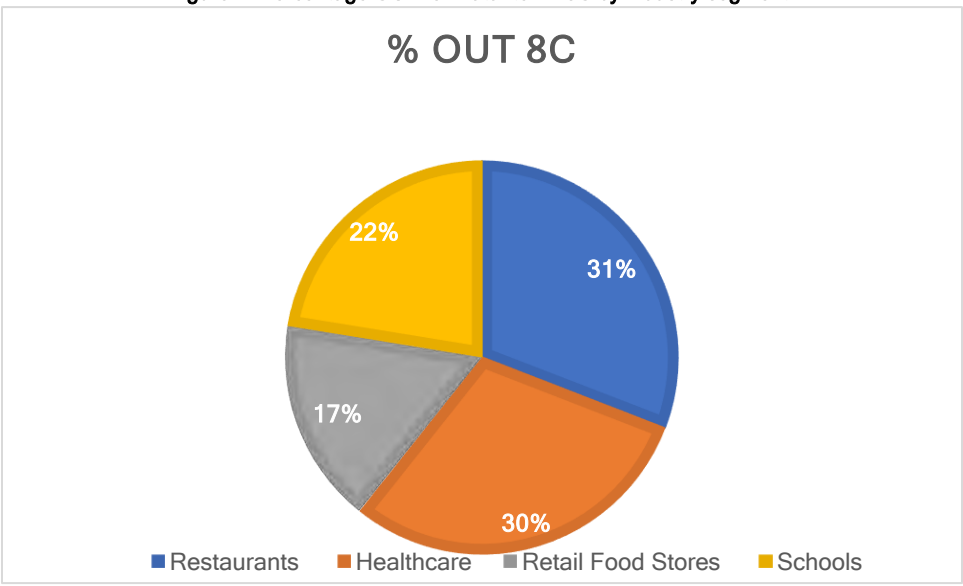
Information on date marking was collected using data items 8A, 8B and 8C. These items ensure compliance with 3-501.17 and 3-501.18 of the Food Code. Data item 8A determines if ready to eat, TCS food (prepared on-site) and held for more than 24 hours is date marked as required in 3-501.17 (A, C, D). Data item 8B determines if opened commercial containers of prepared ready to eat, TCS food held for more than 24 hours are date marked as required in 3-501.17 (B). Disposal of ready to eat, TCS food prepared on-site and/or opened commercial containers exceeding 7 days at 41F is determined by 8C as stated in 3-501.18. Facilities were more out of compliance with 8C indicating that facilities have more difficulty discarding foods beyond the 7-day hold time (See Figure 3).

Figure 3: Percentage OUT for Data Item #8 in all facilities.



According to the data for each industry segment, Restaurants and Healthcare facilities were the most out of compliance with 8C (See figure 4).

Figure 4: Percentage OUT for Data Item #8C by industry segment.

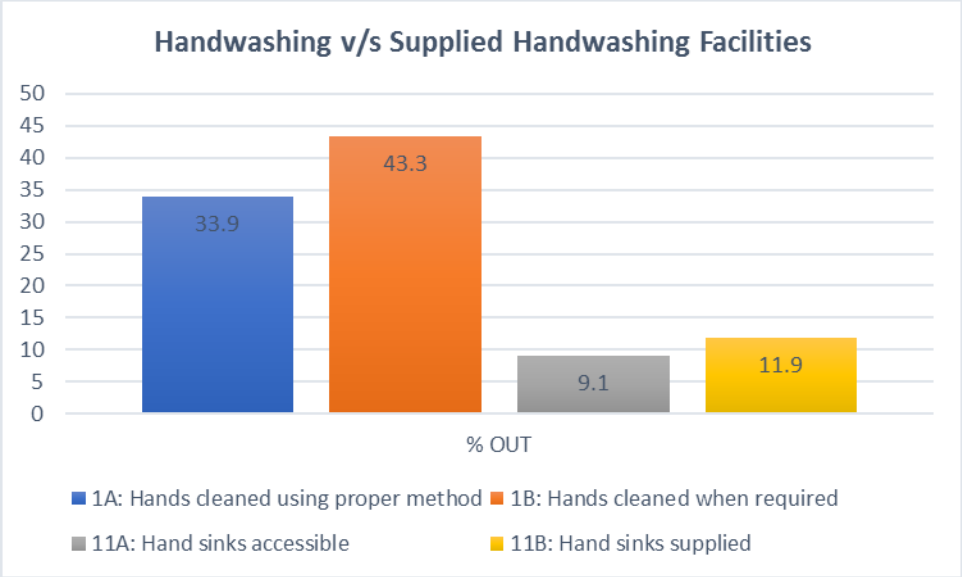


OTHER DATA ITEMS

Handwashing Facilities Accessible and Maintained
In addition to the FDA required data items, data was collected from four additional questions. These four additional questions served to obtain information regarding: handwashing facilities maintained and accessible, consumer advisory, and time as a public health control.

Handwashing facilities maintained and accessible was assessed to measure if handwashing violations were associated with improperly stocked and maintained handwashing facilities. In accordance with 6-301 of the Food Code, data item 11A determined if Handwashing facilities were conveniently located and accessible for employees, while item 11B determined if handwashing facilities were supplied with hand cleanser / disposable towels / hand drying devices. By including this data item, the results could be analyzed to determine if handwashing violations observed under data item 1 correlated with item 11. The results as displayed in Figure 5 indicate that handwashing violations were observed despite handwashing facilities being accessible and fully stocked.

Figure 5: Comparison of % OUT for Handwashing versus Handwashing Facilities being supplied.



Consumer Advisory
Data item 13 was added to determine if consumers were properly advised of risks of consuming raw or undercooked animal foods in facilities that offered undercooked foods. Analysis of the data collected indicated that 81% of facilities that offered undercooked foods had a consumer advisory present in compliance with 3-603.11 of the Food Code. This data indicated that consumer advisory was a low occurring violation in the facilities observed.

Time as a Public Health Control
Data item 14 was added to assess compliance with 3-501.19 of the Food Code. This provision of the Food Code allows facilities to store TCS foods based on written procedures that permit either a 4 hour hold time without temperature control, or a 6-hour old time at a maximum product temperature of 70F. When evaluating all facilities that utilized Time as a Public Health Control (TPHC), almost half of these facilities were observed to be out of compliance. 14A determined compliance with 3-501.19 when food is held without temperature control for four hours while 14B determined compliance when time is used as a public health control for 6 hours. Data collected indicated that facilities struggled more when time is held for four hours versus six hours. The Industry Segments that demonstrated the least compliance with TPHC were Hospitals at 40% and Schools at 23.3%. In schools 80% of observations noted that time was started for TPHC with products measuring above 41F. In Hospitals, 100% of TPHC violations occurred due to products not being marked or otherwise identified to indicate the time that is 4 hours past the point in time where food was removed from temperature control. Since the use of TPHC may increase after North Carolina adopts the 41F and below cold holding requirement, this information will be useful in addressing TPHC deficiencies.

TRENDS

Although the 2011 Baseline Survey will be utilized as a standalone study, general observations were made in comparison to this study. For example, in 2011 it was observed one of the top priority risk factors out of compliance for the county was Improper Holding Time/Temperature. For the 2018 study, this risk factor also served as the top out of compliance risk factor. When looking at specific facility types since 2011, Seafood Departments and Fast Food facilities have improved in the area of Improper Holding Time/Temperature. Produce departments have improved in the area of Personal Hygiene, this may be a result of interventions in 2011 utilized to educate food employees. This intervention included the use of pictorial posters demonstrating proper handwashing as handouts.

RECOMMENDED INTERVENTION STRATEGIES

After conducting the 2018 risk factor study, Mecklenburg County recommends the following interventions to improve the three most out of compliance risk factors. Priority risk factors that will be addressed are cold holding, cooling and date marking. All three risk factors fall under the Improper Holding Time/Temperature Risk Factor Category. Facility types and industry segments seen most out of compliance with these risk factors will be priority target audiences. In addition, the department plans to address and propose interventions to improve handwashing in FY20, which falls under the Poor Personal Hygiene Risk Factor Category.

COLD HOLDING

- Utilize “Time as a Public Health Control” agreements when applicable to give facilities struggling with compliance another option to safely control.
- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41F and below, the letters “OK” are visible in the center of the sticker. At temperatures above 41F the sticker turns black. Other counties, such as Rockingham County, have received positive feedback regarding the distribution of the thermolabel stickers from facility operators.

COOLING

- Increase educational and enforcement efforts.
- Distribute a pictorial based poster visualizing approved cooling methods in accordance with the Food Code. This poster would be designed to demonstrate cooling methods that could be applicable to all languages.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41F and below, the letters “OK” are visible in the center of the sticker. At temperatures above 41F the sticker turns black. Other counties, such as Rockingham County, have received positive feedback regarding the distribution of the thermolabel stickers from facility operators. The use of this tool could prevent cooling non-compliance that is the result of equipment failure.

DATE MARKING

- Increase educational and enforcement efforts.
- Staff will be educated on enforcement of date marking for consistency with the adoption of 41F. Staff will be given informational tools on how to gain compliance with 41F and below.

RETAIL FOOD PROGRAM
FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

ESTABLISHMENT INFORMATION			
Date:		**Data Collector:**	
Time In:	**Time Out:**	**Total Time in Minutes:**	
Establishment Name:			
Street Address:			
City:	**State:**	**Zip:**	**County:**
Industry Segment:	**Facility Type:**	**Risk Categorization:**	
Seating Capacity:		**Average Number of Meals Per Day:**	
Maximum Number of Employees Per Shift:		**Number of Employees Present at Time of Visit:**	
Activity level at the time of visit (*Select* ***ONE*****):** ☐ **Light** ☐ **Moderate** ☐ **Heavy**			

ESTABLISHMENTS THAT ARE PART OF MULTI-UNIT OPERATIONS
Establishment is part of a Multi-Unit Operation: ☐ **YES** ☐ **NO**
Number of Individual Units that are part of the Multi-Unit Operation *(Enter the number of units provided by the person in charge)***:**
Ownership of Establishment *(Select* ***ONE*** *of the following)***:** ☐ **Company-Owned** ☐ **Franchise** ☐ **Unsure**
If Franchise – number of units owned by the franchisee *(Enter the number of units provided by the person in charge)***:**

RETAIL FOOD PROGRAM
FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

Risk Factor – Poor Personal Hygiene (Items 1&2)

IN	OUT	NO	NA	
☐	☐			**1. Employees practice proper handwashing**
IN	**OUT**	**NO**	**NA**	**Description of HANDWASHING OBSERVATIONS**
☐	☐			A. Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*
☐	☐			B. Hands are cleaned and washed when required as specified in Section 2-301.14 of the *Food Code*
COMMENTS:				

IN	OUT	NO	NA	
☐	☐			**2. Food employees do not contact ready-to-eat foods with bare hands**
COMMENTS:				

RETAIL FOOD PROGRAM
FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

Risk Factor – Contaminated Equipment / Protection from Contamination (Items 3&4)

IN	OUT	NO	NA	
☐	☐			**3. Food is protected from cross-contamination during storage, preparation, and display**
IN	**OUT**	**NO**	**NA**	**Description of FOOD Contamination OBSERVATIONS**
☐	☐	☐	☐	**A.** Raw animal foods are separated from ready-to-eat foods
☐	☐	☐	☐	**B.** Different raw animal foods are separated from each other
☐	☐			**C.** Food is protected from environmental contamination – actual contamination observed
☐	☐			**D.** Food is protected from environmental contamination – potential contamination
☐	☐		☐	**E.** Other (*describe in the comments section below)*
COMMENTS:				

IN	OUT	NO	NA	
☐	☐			**4. Food contact surfaces are properly cleaned and sanitized**
IN	**OUT**	**NO**	**NA**	**Description of Food Contact Surfaces OBSERVATIONS**
☐	☐			**A.** Food contact surfaces and utensils are clean to sight and touch and sanitized before use
☐	☐	☐	☐	**B.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using manual warewashing procedures
☐	☐	☐	☐	**C.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using mechanical warewashing equipment
☐	☐		☐	**D.** Other (*describe in the comments section below)*
COMMENTS:				

RETAIL FOOD PROGRAM
FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

Risk Factor – Improper Holding / Time and Temperature Risk (Items 5-8)

IN	OUT	NO	NA	
☐	☐			**5. Foods requiring refrigeration are held at the proper temperature**
IN	**OUT**	**NO**	**NA**	**Description of Cold Holding Temperature OBSERVATIONS**
☐	☐			**A.** TCS Food is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling, or when time is used as a public health control
☐	☐	☐	☐	**B.** Raw shell eggs are stored under refrigeration that maintains ambient air temperature of 45ºF (7ºC) or less
☐	☐		☐	**C.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Cold Holding Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF COLD HOLDING EQUIPMENT	FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF COLD HOLDING EQUIPMENT

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COLD HOLDING PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** above *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** above *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** above *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** above *Food Code* critical limits

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FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

IN	OUT	NO	NA	
☐	☐	☐	☐	**6. Foods displayed or stored hot are held at the proper temperature**

IN	OUT	NO	NA	Description of Hot Holding Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** TCS Food is maintained at 135°F (57°C) or above, except during preparation, cooking, cooling, or when time is used as a public health control.
☐	☐	☐	☐	**B.** Roasts are held at a temperature of 130°F (54°C) or above
☐	☐	■	☐	**C.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Hot Holding Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF HOT HOLDING EQUIPMENT	FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF HOT HOLDING EQUIPMENT

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY HOT HOLDING PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

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FDA FOODBORNE ILLNESS RISK FACTOR STUDY
RETAIL FOOD STORE DATA COLLECTION FORM

IN	OUT	NO	NA	
☐	☐	☐	☐	**7. Foods are cooled properly**

IN	OUT	NO	NA	Description of Cooling Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☐	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☐	**C.** Proper cooling methods / equipment are used
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Cooling Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD COOLING TEMP. #1	FOOD COOLING TEMP. #2	TOTAL TIME IN MINUTES	*FOOD CODE* CRITICAL LIMIT	TYPE OF EQUIPMENT USED TO COOL FOOD

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RETAIL FOOD STORE DATA COLLECTION FORM

IN	OUT	NO	NA	
☐	☐	☐	☐	**8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening**

IN	OUT	NO	NA	Description of Date Marking OBSERVATIONS
☐	☐	☐	☐	**A.** Ready-to-eat, TCS Food (prepared on-site) held for more than 24 hours is date marked as required
☐	☐	☐	☐	**B.** Open commercial containers of prepared ready-to-eat TCS Food held for more than 24 hours are date marked as required
☐	☐	☐	☐	**C.** Ready-to-eat, TCS Food prepared on-site and/or opened commercial container exceeding 7 days at ≤ 41°F is discarded
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

COMMENTS:

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RETAIL FOOD STORE DATA COLLECTION FORM

Risk Factor – Inadequate Cooking (Items 9&10)

IN	OUT	NO	NA	
☐	☐	☐	☐	**9. Raw animal foods are cooked to required temperatures**

IN	OUT	NO	NA	Description of Cooking Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** Raw shell eggs broken for immediate service are 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
☐	☐	☐	☐	**B.** Pork; Fish; Beef; Commercially-raised Game Animals are cooked to 145°F (63°C) for 15 seconds
☐	☐	☐	☐	**C.** Comminuted Fish, Meats, Commercially-raised Game Animals are cooked to 155°F (68°C) for 15 seconds
☐	☐	☐	☐	**D.** Poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratite; or stuffing containing fish, meat, poultry, or ratites; wild game animals are cooked to 165°F (74°C) for 15 seconds
☐	☐	☐	☐	**E.** Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as Chart specifies 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).***
☐	☐	☐	☐	**F.** Other Cooking Observations (describe in the Comment Section and Temperature Chart below)

COMMENTS:

Cooking Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FINAL COOK TEMP.	*FOOD CODE* CRITICAL LIMIT	CONSUMER ADVISORY		FOOD PRODUCT	FINAL COOK TEMP.	*FOOD CODE* CRITICAL LIMIT	CONSUMER ADVISORY	
			YES	NO				YES	NO
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COOKING FOOD PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

RETAIL FOOD PROGRAM
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RETAIL FOOD STORE DATA COLLECTION FORM

IN	OUT	NO	NA	
☐	☐	☐	☐	**10. Cooked foods are reheated to required temperatures**

IN	OUT	NO	NA	Description of Reheating Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** TCS Food that is cooked and cooled on premises is rapidly reheated to 165°F (74°C) for 15 seconds for hot holding
☐	☐	☐	☐	**B.** Commercially-processed ready-to-eat food, reheated to 135°F (57°C) or above **for hot holding**
☐	☐	■	☐	**C.** Other Reheating Observations (describe in the Comments Section and Temperature Chart below)

COMMENTS:

Reheating Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FINAL REHEAT TEMP.	*FOOD CODE* CRITICAL LIMIT	FOOD PRODUCT	FINAL REHEAT TEMP.	*FOOD CODE* CRITICAL LIMIT

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COOKING FOOD PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

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IN	OUT	NO	NA	
☐	☐			**11. Handwashing facilities are accessible and properly maintained**
IN	**OUT**	**NO**	**NA**	**Description of OBSERVATIONS of Handwashing Facilities**
☐	☐			**A.** Handwashing facilities are conveniently located and accessible for employees
☐	☐			**B.** Handwashing facilities are supplied with hand cleanser / disposable towels / hand drying devices

COMMENTS:

IN	OUT	NO	NA	
☐	☐		☐	**13. Consumers are properly advised of risks of consuming raw or undercooked animal foods**

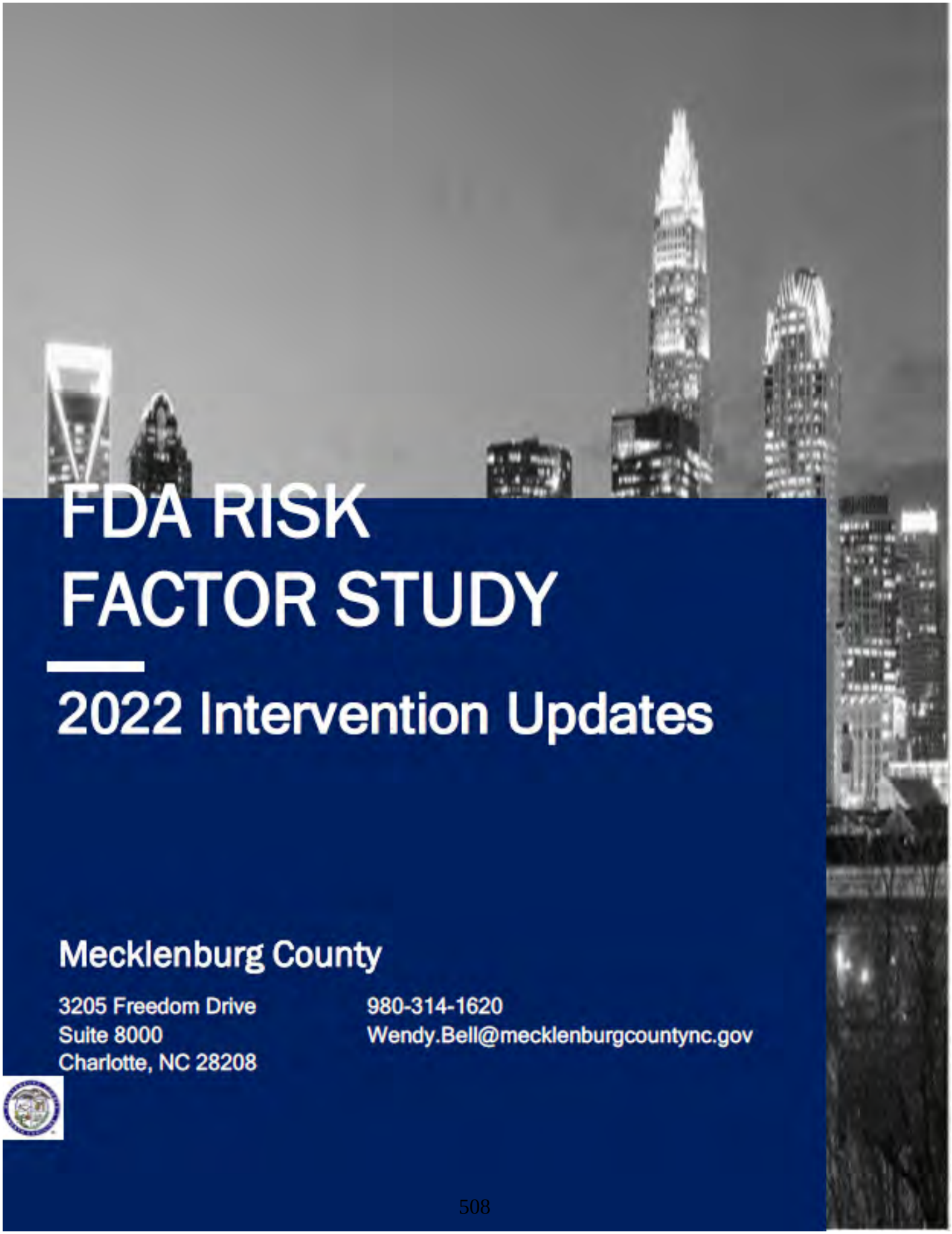
COMMENTS:

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IN	OUT	NO	NA	
☐	☐	☐	☐	**14. Time alone is properly used as a public health control**
IN	**OUT**	**NO**	**NA**	**Description of Time as a public health control OBSERVATIONS**
☐	☐	☐	☐	**A.** When time only is used as a public health control for **4 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐	☐	☐	**B.** When time only is used as a public health control for **6 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐	■	☐	**C.** Other (describe in the comments section below)
COMMENTS:				

IN	OUT	NO	NA	
☐	☐	■	■	**17. Food is received from safe sources**
IN	**OUT**	**NO**	**NA**	**Description of FOOD SOURCE OBSERVATIONS**
☐	☐	■	■	**A.** All food is from regulated food processing plants / No home prepared/canned foods
☐	☐	☐	☐	**B.** Shellfish are from NSSP-listed sources. No recreationally caught shellfish are received/sold
☐	☐	☐	■	**C.** Food is protected from contamination during transportation/receiving
☐	☐	☐	■	**D.** TCS Food is received at a temperature of 41°F (5ºC) or below OR according to Law
☐	☐	■	■	**E.** Food is safe and unadulterated
☐	☐	☐	☐	**F.** Shellstock tags/labels are retained for 90 days and filed in chronological order from the date the container is emptied
☐	☐	☐	☐	**G.** Written documentation of parasite destruction is maintained for 90 days for fish products
☐	☐	■	☐	**H.** Other (*describe in Comments Section below*)
COMMENTS:				

Appendix II: 2018 Intervention Strategy Educational Handouts



RECOMMENDED INTERVENTION STRATEGIES

After conducting the 2018, Mecklenburg County recommends the following interventions to improve the most out of compliance risk factors. Priority risk factors that will be addressed are cold holding, cooling and date marking. All three risk factors fall under the Improper Holding Time/Temperature Risk Factor Category. Facility types and industry segments seen most out of compliance with these risk factors will be priority target audiences. The department plans to address and propose interventions to improve handwashing in FY20, which falls under the Poor Personal Hygiene Risk Factor Category.

COLD HOLDING

- Utilize "Time as a Public Health Control" agreements when applicable to give facilities struggling with compliance another option to safely control.
- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black. Other counties, such as Rockingham County have received positive feedback regarding the distribution of the thermolabel stickers from facility operators.

COOLING

- Increase educational and enforcement efforts.
- Design and distribute a poster describing approved cooling methods in accordance with the Food Code. This poster would be designed to focus on visual cues that could be applicable to all languages. Approved cooling methods would be visually demonstrated on this handout.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black. Other counties, such as Rockingham County have received positive feedback regarding the distribution of the thermolabel stickers from facility operators. The use of this tool could prevent cooling non-compliance that is the result of equipment failure.

DATE MARKING

- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black. Other counties, such as Rockingham County have received positive feedback regarding the distribution of the thermolabel stickers from facility operators. These stickers will be utilized to gain compliance with products starting at the required 41 degrees F and below temperatures for a maximum date marking allowance of 7 days.

Risk Factor to be Controlled	Interventions	Applied Work
Cold Holding	Utilize "Time as a Public Health Control" agreements when applicable to give facilities struggling with compliance another option to safely control.	Fillable TPHC forms created and updated to the most current version of the food code. Training on proper use and expectations of TPHC forms provided to EH staff.
	Increase educational and enforcement efforts.	https://youtu.be/tXP09IK-1TQ Training videos embedded in all inspection reports when a violation occurs
	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black.	Stickers purchased and provided to facilities.
Cooling	Increase educational and enforcement efforts.	https://youtu.be/P6x8b1ZVOxU Training videos embedded in all inspection reports when a violation occurs
	Design and distribute a poster describing approved cooling methods in accordance with the Food Code. This poster would be designed to focus on visual cues that could be applicable to all languages. Approved cooling methods would be visually demonstrated on this handout. MeckNC.gov	Cooling Hot Food Products Cooling Hot Foods Arabic 2020 Cooling Hot Foods Burmese 2020 Cooling Hot Foods Chinese 2020 Cooling Hot Foods English 2020 Cooling Hot Foods Nepali 2020 Cooling Hot Foods Russian 2020 Cooling Hot Foods Spanish 2020 Cooling Hot Foods Vietamese 2020 Cooling Room Temperature Food Products Cooling Process for Room Temperature Foods - Arabic 2020 Cooling Process for Room Temperature Foods - Burmese 2020 Cooling Process for Room Temperature Foods - Chinese 2020 Cooling Process for Room Temperature Foods - English 2020 Cooling Process for Room Temperature Foods - Nepali 2020 Cooling Process for Room Temperature Foods - Russian 2020 Cooling Process for Room Temperature Foods -Vietamese 2020 Cooling Process for Room Temperature Foods - Spanish 2020
	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black.	Stickers purchased and provided to facilities.

Date Marking	Increase educational and enforcement efforts.	https://youtu.be/BOPsSNUajYs Training videos embedded in all inspection reports when a violation occurs
	Purchase cold holding stickers to distribute to facility management and operators. These thermosensitive stickers are manufactured by Hallcrest. These stickers can be used to aid in visual checks of ambient air temperatures for refrigeration units. When the temperature of the refrigerator/chiller/freezer is functioning correctly at 41 degrees F and below, the letters "OK" are visible in the center of the sticker. At temperatures above 41 degrees F the sticker turns black. These stickers will be utilized to gain compliance with products starting at the required 41 degrees F and below temperatures for a maximum date marking allowance of 7 days.	Stickers purchased and provided to facilities.
Hand washing	Increase educational and enforcement efforts.	https://youtu.be/BH6CLGrH1OM Training videos embedded in all inspection reports when a violation occurs

Appendix III: 2023 Risk Factor Resource Documents

MECKLENBURG COUNTY
FOODBORNE ILLNESS RISK FACTOR STUDY

MARKING INSTRUCTIONS FOR THE DATA COLLECTION FORM

Updated 1/20/2023

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I. ESTABLISHMENT INFORMATION / DATA

Four food industry segments are included in FDA's Retail Food Risk Factor Study.

- Restaurants (comprised of Fast Food and Full-Service Restaurants)
- Health Care (comprised of Hospitals and Long-Term Care Facilities)
- Schools (K-12)
- Retail Food Store (supermarkets / grocery stores that must have a deli department / operation)

Detailed marking instructions will be provided for each of the sections of the data collections form. The flow and description of the information sections of the data collection form correspond to the FoodSHIELD database data entry fields. The FoodSHIELD retail food risk factor study database will be used to maintain, store, and produce reports for data analysis.

ESTABLISHMENT INFORMATION

INDUSTRY SEGMENT			
Food Safety Management System Risk Factor Category:			
Industry Segment:	☐ **Restaurant** ☐ **Health Care** ☐ **Schools** ☐ **Retail Food Store**	**Facility Type:**	☐ **Full-Service or** ☐ **Fast Food** ☐ **Hospital or** ☐ **Nursing Home** ☐ **K-12** ☐ **Deli or** ☐ **Seafood or** ☐ **Produce**
DATA COLLECTION INFORMATION			
Date:		**Data Collector:**	
Time In:	**Time Out:**	**Total Time in Minutes:**	
Risk Categorization: ☐ **2** ☐ **3** ☐ **4**			
ESTABLISHMENT INFORMATION			
Establishment Name:			
Street Address:			
City:	**State: North Carolina**	**Zip:**	**County: Mecklenburg**
Maximum Number of Employees Per Shift:		**Number of Employees Present at Time of Visit:**	
Activity level at the time of visit (*Select ONE*): ☐ **Light**	☐ **Moderate**	☐ **Heavy**	
Average Number of Meals Per Day:		**Seating Capacity:**	
ESTABLISHMENTS THAT ARE PART OF MULTI-UNIT OPERATIONS			
Establishment is part of a Multi-Unit Operation: ☐ **YES** ☐ **NO**			
Number of Individual Units that are part of the Multi-Unit Operation *(Enter the number of units provided by the person in charge)*:			
Ownership of Establishment *(Select **ONE** of the following)*: ☐ **Company-Owned** ☐ **Franchise** ☐ **Unsure**			
If Franchise – number of units owned by the franchisee *(Enter the number of units provided by the person in charge)*:			

A. Industry Segment

- ***Food Safety Management System Risk Factor Category.*** Each food establishment selected for the study will have a food safety management system assessment conducted for **one** of the four risk factor areas described below. A randomly selected risk factor will be selected to be the focus of the food safety management system assessment within each of the establishments. The data collector enters the number associated with the risk factor category for which a food safety management system assessment has been conducted.

    1. Poor Personal Hygiene
    2. Contaminated Equipment / Protection from Contamination
    3. Improper Holding / Time and Temperature
    4. Inadequate Cooking

- ***Industry Segment***: The FDA Study focuses on four industry segments listed below. The data collector enters the description of the industry segment within which the data collection was conducted

    1. Health Care
    2. Schools
    3. Restaurants
    4. Retail Food Stores

- ***Facility Type:*** The data collector enters the appropriate restaurant facility type based on the definitions below.

Definitions – 2017 Risk Factor Study
Risk factor study – includes all facility categories under regulation by the jurisdiction.

The four categories are further subdivided as follows:

(1) Health Care
  (a) Hospitals
  (b) Long-Term Care Facilities
(2) Schools
(3) Restaurants
  (a) Fast Food
  (b) Full Service
(4) Retail Food Stores

In order to be able to measure meaningful trends from one risk factor study to the next, it is important to ensure the facility types surveyed remain the same. To this end, definitions were written for each facility type.

1. Healthcare

1. **Hospitals** – A food service operation that provides for the nutritional needs of inpatients, by preparing meals and transporting them to the patient's room and/or serving meals in a cafeteria setting (meals in the cafeteria may also be served to hospital staff and visitors). Because of the low sample size, we plan to include all 13 hospital food service facilities present in the county.

2. **Long-Term Care Facilities** – A food service operation that prepares meals for the residents in a group care living setting such as nursing homes and assisted living facilities.

NOTE: For the purposes of this study, healthcare facilities that do not prepare or serve food to a highly susceptible population, such as mental healthcare facilities, are not included in this facility type category.

2. Schools

Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. A school food service may be part of a public or private institution.

NOTE: For the purpose of this study, Central Kitchens that prepare meals for serving at receiving/satellite schools, but do not serve any student meals on-site at the Central Kitchen, are not included as part of the study sample. In addition, restaurants or other retail food operations that provide meals to school facilities are not included as part of the study sample for schools. Also, Receiving or Satellite Kitchens that obtain partially or fully prepared meals from a base or central kitchen and conduct little or no food preparation are not included as part of this study. Other school food service facilities eliminated from the study sample include those for behavioral health schools, those serving a high school population only, any schools which had limited to no food prep such as schools holding a permit for only handling catered food. Permitted preschool kitchens within a childcare facility were eliminated as they had little to no food prep; however, elementary schools which also serve preschool children were included.

3. Restaurants

1. **Fast Food Restaurants** – restaurants that provide food via counter service, wait, or drive through rather than full table service. Payment is made at a counter, not via check delivered to the table. Facilities in this category are typically listed as a risk II or III with limited processes.

2. **Full-Service Restaurants** – restaurants that ***may*** offer food via full table service, even if they also offer a counter or drive through option. Food ***may*** be ordered and served, and payment ***may*** be taken at the table. Facilities in this category are typically risk III or IV with unlimited processes.

   NOTE: For the purpose of this study, the following operations are excluded: mobile food units (food trucks), pushcarts (hot dog carts), gas station/convenience stores, arenas, amusement parks and caterers. For the purpose of this study facilities should be categorized based on process flow not just on payment type or where services are rendered.

4. Retail Food Stores

Retail food stores are operations selected from the supermarket and grocery store segments of the industry. For this study, only supermarkets or grocery stores with a permitted deli facility were included. Data should be collected if the retail food store also contained a permitted seafood and/or produce department where food items are cut, prepared and stored. The deli, seafood and produce department operation descriptions are listed below:

1. **Deli Department/Operation**- Areas in a retail food store where food such as luncheon meats and cheeses, are sliced for the customers and where sandwiches and salads are prepared on site or received from a commissary in bulk containers, then portioned and displayed. Parts of the deli operations may include salad bars, pizza stations and any other stations or bars managed by the deli department. Other areas where meat and poultry products are cooked and offered for sale and managed by the deli department managers may also be included.

2. **Seafood Department/Operation** – Areas in a retail food store where seafood is cut, prepared, stored, or displayed for sale to the consumer. In some retail food stores, the seafood department will be operated under the same manager who has responsibility over the meat and poultry department / operation. When the seafood department is combined with a meat and poultry department, the data collector will assess only those procedures and practices associated with the processing of seafood.

   NOTE: In-store sushi bars operated and managed as part of the retail food store business, whether located within the deli or seafood department, are considered part of seafood department / operation for the purposes of this study. Standalone facility that are permitted for sushi production ***only*** have been excluded from this study.

3. **Produce Department/Operation** – Areas in a retail food store where produce is cut, prepared, stored, and displayed for sale to the consumer. A produce operation may include salad bars or juice stations that are managed by the produce manager. If produced is only received prepackaged for display, it would not qualify.

   NOTE: Convenience stores, are not included as part of the Study sample.

B. Data Collection Form Information

- ***Date*:** The date on which the data collection was conducted at the randomly selected restaurant.

- ***Data Collector***: First and last name of the individual conducting the data collection and completing the data collection form.

- ***Time In*:** The time the data collection is initiated at the randomly selected facility. Time to prepare for the data collection and travel time to the restaurant are **not** included. Military time is used for this entry. For example, if the data collection began at 9:15AM the entry in the time in field would be 0915. Likewise, if the data collection began at 3:30PM the entry in the time in field would be 1530.

- ***Time Out***: The time data collection observations are completed and include the time to conduct the exit interview with the person-in-charge. Time to complete the data collection form and enter it into the database, as well as travel time, are **not** included. Military time is used for this entry.

- ***Total Time in Minutes***: The total time in minutes needed to conduct the data collection at the restaurant. It encompasses the difference between the recorded "Time In" entry and the "Time Out" entry. The database program will automatically calculate total time in minutes based on the data collector's entries for "Time In" and "Time Out" but this function is dependent on the use of military time.

- ***Risk Categorization:*** The risk categories listed in Annex 5, Table 1 – Risk Categorization of Food Establishments of FDA *Food Code* contain the descriptions used to classify the selected establishments. An establishment must meet one of the descriptions provided for risk categories 2, 3, or 4. The data collector should confirm the risk categorization of the establishment when contacting the jurisdiction with regulatory oversight responsibility prior to initiating the data collection. An establishment that falls into risk category 1 is not eligible for the Study. The data collector must select a substitute from the restaurant substitution list.

RISK CATEGORY	DESCRIPTION	FREQUENCY #/YR
1 (Excluded)	Examples include most convenience store operations, hot dog carts, and coffee shops. Establishments that serve or sell only pre-packaged, non- time/temperature control for safety (TCS) foods. Establishments that prepare only non-TCS foods. Establishments that heat only commercially processed, TCS foods for hot holding. No cooling of 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.	1
2	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 TCS foods after preparation or cooking. Complex preparation of TCS foods requiring cooking, cooling, and reheating for hot holding is limited to only a few 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.	2
3	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 TCS foods. Variety of processes require hot and cold holding of 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.	3
4	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.	4

C. Establishment Information

- ***Establishment Name:*** Business name of the randomly selected restaurant. If the name is different than the one contained in the GIS database used for the selection of restaurants for the Study, enter the current name the restaurant is doing business under. **NOTE:** Should a restaurant name-change be recorded, the data collector is to notify the study coordinator via e-mail of the name change.

- ***Street Address:*** Common street listing for the selected restaurant.

- ***City:*** City where the selected restaurant is located.

- ***Zip:*** Zip code for the selected restaurant.

- ***County:*** Mecklenburg

- ***Maximum Number of Employees Per Shift***: The maximum number of food employees that can be

assigned to a designated restaurant work shift regardless of their job responsibility. The data collector can use the information provided by the person-in-charge.

- ***Number of Employees Present at Time of Visit*** – The total number of food employees that are working in the restaurant at the time of the data collection regardless of their job responsibility. The data collector can use the information provided by the person-in-charge.

- ***Activity level at the time of the visit:*** This element is specific to the activity level occurring in the kitchen and other food preparation areas at the time of the data collection. Based on high peak volume periods that occur within the restaurant, the person-in-charge should be asked if the current activity level in the kitchen is light, moderate or heavy. The data collector checks the appropriate box based on the response provided by the person-in-charge.

- ***Average Number of Meals Per Day***: The average number of meals per day is to include the total number served for **ALL** meal periods during the day. The data collector can use the information provided by the person-in-charge. In providing an estimate number of meals per day, the person-in- charge should base the average on a 7-day, Sunday – Saturday business cycle or weekly cycle. If the person in charge is unable to provide an estimate on the average number of meals per day, the data collector is to enter "0" in the data entry field. The "0" entry will denote an "Unsure" response from the person in charge.

- ***Seating Capacity***: Total number of customer seats provided in the restaurant where dining occurs, including bar area seating. Seating capacity is to be determined for Fast Food Restaurants as well as Full-Service Restaurants. The data collector does not have to physically count the number of seats provided but can use the information provided by the person-in-charge.

Establishments that are Part of Multi-Unit Operations

- ***Establishment is part of a Multi-Unit Operation***: The data collector will determine if the restaurant is part of a multi-unit operation. The data collector can use the information provided by the person-in-charge to complete this element.
  - ✓ ***YES*** – Restaurant is part of a multi-unit operation.
  - ✓ ***NO*** – Restaurant is not part of a multi-unit operation.

If the restaurant is part of a multi-unit operation, the data collector will complete the following three information fields:

- ***Number of Individual Units that are Part of the Multi-Unit Operation:*** Represents the total number of individual restaurants that comprise the multi-unit operation. The total number of food restaurants includes both company owned and franchise units. The data collector will enter the number of units provided by the person in charge. If the person in charge is unsure or does not know the number of units, enter "0".

- ***Ownership of Establishment***: The data collector will complete this information field by selecting **ONE** of the following categories and can use the information provided by the person-in-charge for this element.
  - ✓ ***Company Owned*** – Restaurant is part of multi-unit operation that is a legally incorporated business association (brand) or owned by an individual or group of individuals. The incorporated business or individual owns the facility and is responsible for its day-to-day operations.
  - ✓ ***Franchise*** – Restaurant is part of a multi-unit operation that is a legally incorporated business (brand). The corporation has granted ownership privileges to an individual who is responsible for the day-to-day operations of the facility. The owner is responsible for operating the facility in accordance with business specifications outlined by the corporation.
  - ✓ ***Unsure*** – The person-in-charge is not the owner of the restaurant and is unable to confirm whether the unit is company owned or a franchise.

- ***IF Franchise – number of units owned by franchisee:*** Represents the total number of restaurants that are owned by the individual or group of individuals responsible for the day-to-day operations of the facility. Restaurants that are part of the multi-unit operation, but company owned or associated with another franchisee are **NOT i**ncluded in this element because they would not be under the direct control of the franchisee whose establishment has been selected for the Study. The data collector will enter the number of units provided by the person in charge. If the person in charge is unsure or does not know the number of units, enter "0".

II. GENERAL MARKING INSTRUCTIONS

A. Orientation to the Data Collection Form

IN	OUT	NO	NA	
☐	☐			**1. Employees practice proper handwashing**
IN	**OUT**	**NO**	**NA**	**Description of HANDWASHING OBSERVATIONS**
☐	☐			A. Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*
☐	☐			B. Hands are cleaned and washed when required as specified in Section 2-301.14 of the *Food Code*
COMMENTS:				

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT											
PROCEDURES			**TRAINING**			**MONITORING**					
☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**			
☐	**2**		☐	**2**		☐	**2**				
☐	**3**		☐	**3**		☐	**3**				
☐	**4**		☐	**4**		☐	**4**				
☐	**NA**		☐	**NA**		☐	**NA**				

Data Items – The data collection form consists of 19 data items. The data items are listed numerically and in **BOLD TYPE**. In the above illustration, **Employees practice proper handwashing** is the data item. For the purposes of this Study, data items 1 through 10 are considered "primary data items". The information collected for these data items will be the Study focus for assessing control of foodborne illness risk factors and determining improvement and/or regression trends over time.

Primary Data Items

Each of the primary data items has been placed under the appropriate FDA Foodborne Illness Risk Factor category.

- **Risk Factor – Poor Personal Hygiene**
  #1 – Employees practice proper handwashing
  #2 – Food Employees do not contact ready-to-eat foods with bare hands

- **Risk Factor – Contaminated Equipment / Protection from Contamination**
  #3 – Food is protected from cross-contamination during storage, preparation, and display #4 – Food contact surfaces are properly cleaned and sanitized

- **Risk Factor – Improper Holding / Time and Temperature**
  #5 – Foods requiring refrigeration are held at the proper temperature #6 – Foods displayed or stored hot are held at the proper temperature #7 – Foods are cooled properly
  #8 – Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening

Public

- **Risk Factor – Inadequate Cooking**
  #9 – Raw animal foods are cooked to required temperatures #10 – Cooked foods are reheated to required temperatures

Other Areas of Interest
Data items 11 through 19 presented below are listed under a section titled "Other Areas of Interest"

- **Other Areas of Interest included in Mecklenburg County Study**
  #11 – Handwashing facilities are accessible and properly maintained
  #13 – Consumers are properly advised of risks of consuming raw or undercooked animal foods #14 – Time alone is properly used as a public health control
  #17 – Food is received from safe sources
  #19 – Management and food employees are trained in food allergy awareness as it relates to their assigned duties

Information Statements / Descriptors – Under most of the data items, a list of information statements is provided. These information statements are preceded by a letter for organization purposes and describe a specific observation (food safety practice) associated with the overarching data item it is listed under. Using the illustration from the previous page, the information statements for the data item – **Employees practice proper handwashing** are:

a) Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*.
b) Hands are cleaned and washed when required as specified in 2-301.14 of the *Food Code*

B. Markings for Data Items and Information Statements

Using the current version of the *FDA Food Code,* the data collector will determine whether the observations made of the employee food safety practices or behaviors contained in the information statements were **IN** Compliance, **OUT** of Compliance, Not Observed (**NO**), or Not Applicable (**NA**). The recorded markings of the information statements are then used to determine the compliance status of the corresponding data item.

An observation is based on an evaluation of one or more occurrences of a data item or information statement at an establishment. Specific instructions for marking each data item and information statement are presented later in this document. The four marking options are defined as follows:

- **IN –** means that all observed occurrences were **IN** Compliance with the appropriate *FDA Food Code* provision for the data item or information statement.
- **OUT** – means that one or more of the observations made were **OUT** of Compliance with the appropriate *FDA Food Code* provision for the data item or information statement. An explanation of the specific criteria used for determining **OUT** of Compliance for each data item is to be recorded by the data collector on the data collection form.
- **NO** – means the data item or information statement was **Not Observed** during the inspection. The **NO** marking is used when an information statement is a usual practice in the food establishment, but the practice is **NOT** observed during the time of the inspection. For example, if a restaurant that seasonally serves shellfish was selected for the study, but the inspection occurred during non-shellfish season, then the information statements "B" and "F" are marked NO for the overarching data item **#17 – Food is received from safe sources** as illustrated below.

IN	OUT	NO	NA	
☐	☐			**17. Food is received from safe sources**
IN	**OUT**	**NO**	**NA**	**Description of FOOD SOURCE OBSERVATIONS**
☐	☐			**A.** All food is from regulated food processing plants / No home prepared/canned foods
☐	☐	☒	☐	**B.** Shellfish are from NSSP-listed sources. No recreationally caught shellfish are received/sold
☐	☐	☐		**C.** Food is protected from contamination during transportation/receiving
☐	☐	☐		**D.** TCS Food is received at a temperature of 41°F (5°C) or below OR according to Law
☐	☐			**E.** Food is safe and unadulterated
☐	☐	☒	☐	**F.** Shellstock tags/labels are retained for 90 days and filed in chronological order from the date the container is emptied
☐	☐	☐	☐	**G.** Written documentation of parasite destruction is maintained for 90 days for fish products
☐	☐		☐	**H.** Other (*describe in Comments Section below*)

- **NA –** means the data item or information statement is Not Applicable. The NA marking is used when a data item or information statement is **NOT** a function of the food establishment. Using the data item table below as an example, if a restaurant does NOT cool cooked foods (information statement "A"), or does NOT cool foods prepared at ambient temperatures (information statement "B"), then ALL the information statements pertaining to cooling foods under data item **7** are marked NA. Since all the information statements (A through D) for this data item were marked NA, the data item will also be marked NA. More on the marking relationships between information statements and data items is presented in the next section.

IN	OUT	NO	NA	
☐	☐	☐	☒	**7. Foods are cooled properly**
IN	**OUT**	**NO**	**NA**	**Description of Cooling Temperature OBSERVATIONS**
☐	☐	☐	☒	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☒	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☒	**C.** Proper cooling methods / equipment are used
☐	☐	■	☒	**D.** Other (describe in the temperature chart and comments section below)

Not all four marking options (IN, OUT, NO, NA) are used for every data item. For instance, in the case of cold holding, all restaurants included for this data collection period will need to cold hold PHF/TCS food (Data item **5 – Food requiring refrigeration are held at the proper temperature**. As a result, the "Not Observed" (NO) and "Not Applicable" (NA) marking options are inappropriate and are "blacked out" in the graphic displayed below, given that an observation for cold holding is not only applicable in every case, but is also observable during the data collection.

IN	OUT	NO	NA	
☐	☐	■	■	**5. Foods requiring refrigeration are held at the proper temperature**
IN	**OUT**	**NO**	**NA**	**Description of Cold Holding Temperature OBSERVATIONS**
☐	☐	■	■	**A.** TCS Food is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling, or when time is used as a public health control
☐	☐	☐	☐	**B.** Raw shell eggs are stored under refrigeration that maintains ambient air temperature of 45°F (7°C) or less
☐	☐	■	☐	**C.** Other (describe in the temperature chart and comments section below)

C. Relationship Between Data Items and Information Statements

The marking of a data item is predicated on the observations the data collector has made and recorded for the information statements. **REMINDER:** The information statements listed under each data item pertain to specific food safety practices related to the overarching data item.

Rule #1 for Marking Data Items

One of the four marking options, (IN, OUT, NO, NA) **MUST** be completed by the data collector for **EACH** of the information statements listed under an overarching data item.

Using the illustration below, the two information statements (A and B) under the data item #1 – **Employees practice proper handwashing** contains an "**X**" for one of the marking options.

IN	OUT	NO	NA	
☐	☒			**1. Employees practice proper handwashing**
IN	**OUT**	**NO**	**NA**	**Description of HANDWASHING OBSERVATIONS**
☐	☒			**A.** Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time
☒	☐			**B.** Hands are cleaned and washed when required as specified in Section 2-301.14 of the Food Code
COMMENTS: 1A - Observed food employee washing hands at hand sink located near flat grill. Food employee did not use any type of hand soap or cleanser as part of the handwashing procedure.				

Rule #2 for Marking Data Items

If **ANY** of the information statements are marked **OUT** of Compliance, the data collector must mark the overarching data item **OUT** of Compliance.

Using the above illustration, note the markings of observations for the two information statements under the Employees practice proper handwashing data item. Since information statement "A" is marked OUT of Compliance, the Employees practice proper handwashing data item must be marked OUT of Compliance.

Rule #3 for Marking Data Items

If an observation (IN or OUT) is made of any information statement, the overarching data item **CANNOT** be marked Not Observed (NO) or Not Applicable (NA).

In the illustration presented below, note the markings of observations for the 6 information statements under the data item **#9 – Raw animal foods are cooked to required temperatures**.

IN	OUT	NO	NA	
☒	☐	☐	☐	**9. Raw animal foods are cooked to required temperatures**
IN	**OUT**	**NO**	**NA**	**Description of Cooking Temperature OBSERVATIONS**
☐	☐	☐	☒	**A.** Raw shell eggs broken for immediate service are 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
☐	☐	☒	☐	**B.** Pork; Fish; Beef; Commercially-raised Game Animals are cooked to 145°F (63°C) for 15 seconds
☒	☐	☐	☐	**C.** Comminuted Fish, Meats, Commercially-raised Game Animals are cooked to 155°F (68°C) for 15 seconds
☐	☐	☒	☐	**D.** Poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratite; or stuffing containing fish, meat, poultry, or ratites; wild game animals are cooked to 165°F (74°C) for 15 seconds
☐	☐	☐	☒	**E.** Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as Chart specifies 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).***
☐	☐	☐	☒	**F.** Other Cooking Observations (describe in the Comment Section and Temperature Chart below)

In the example above, the data collector was only able to observe and record the final cooking temperatures for hamburgers which would be included under information statement "C". All the other animal food product statements were marked either Not Observed (NO) or Not Applicable (NA). Since one of the food safety procedures is observed (information statement "C"), the data item **Raw animal foods are cooked to required temperatures** is observed and must reflect the marking (IN for this example) for that observation. This would be true regardless of the number of Not Observed (NO) or Not Applicable (NA) markings that may be associated with the other information statements for that data item.

Rule #4 for Marking Data Items

If **no observations** (IN or OUT) are made of any information statements but **one or more** of the information statements is marked **Not Observed** (NO) the overarching data item **MUST** be marked **Not Observed** (NO) regardless of the number of information statements for that data item that are marked Not Applicable (NA).

The graphic below illustrates the data item marking instruction for Rule #4.

IN	OUT	NO	NA	
☐	☐	☒	☐	**16. Special processes are conducted in compliance with issued variance / HACCP Plan, when required**
IN	**OUT**	**NO**	**NA**	**Description of OBSERVATIONS of Specialized Processes**
☐	☐	☒	☐	**A.** Food establishment conducts reduced oxygen packaging without a variance as specified in Section 3-502.12 of the *Food Code*
☐	☐	☐	☒	**B.** Food establishment performs specialized process in accordance with approved variance and HACCP Plan when required
☐	☐	☐	☒	**C.** Juice packaged in the food establishment is treated under a HACCP Plan to reduce pathogens or labeled as specified in Section 3-404.11 of the *Food Code*
☐	☐	■	☒	**D.** Other (describe in the comments section below)

A data item can only be marked Not Applicable (NA) if **ALL** the information statements listed are also marked Not Applicable (NA).

Rule #5 for Marking Data Items

If the observations for all the information statements under a given data item are marked the same, then the overarching data item **MUST** be marked the same as the information statements. This is illustrated in the following graphic where the information statements A through D are marked NA (Not Applicable), therefore Data Item 7 – **Foods are Cooled Properly** is also marked NA.

IN	OUT	NO	NA	
☐	☐	☐	☒	**7. Foods are cooled properly**
IN	**OUT**	**NO**	**NA**	**Description of Cooling Temperature OBSERVATIONS**
☐	☐	☐	☒	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☒	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☒	**C.** Proper cooling methods / equipment are used
☐	☐	■	☒	**D.** Other (describe in the temperature chart and comments section below)

Rule #6 for Marking Data Items

If the information statement labeled **"Other"** is selected to describe a specific food safety practice related to the overarching data item, the data collector **MUST** describe that food safety practice in the "**Comment"** section box.

Most of the data items have an information statement labeled "Other". The inclusion of this information statement is intended to provide the data collector the opportunity to record an observation of a food safety practice or procedure that applies to the overarching data item but does not fit into one of the other pre-determined information statements.

Summary of the Six Rules for Marking Data Items

NOTE: All six rules for marking data items, summarized in the table below, have been programmed into the database. The correct marking for the overarching data item will automatically be entered into the system based on the data collector's markings for the listed information statements.

Rule	Summary of the Six Rules for Marking Data Items
Rule 1	**One** of the four marking options, (IN, OUT, NO, NA) **MUST** be completed by the data collector for **EACH** of the information statements listed under an overarching data item.
Rule 2	If **ANY** of the information statements are marked **OUT** of Compliance, the data collector must mark the overarching data item **OUT** of Compliance.
Rule 3	If an observation (IN or OUT) is made of any information statement, the overarching data item **CANNOT** be marked Not Observed (NO) or Not Applicable (NA).
Rule 4	If **no observations** (IN or OUT) are made of any information statements but **one or more** of the information statements is marked **Not Observed** (NO,) the overarching data item **MUST** be marked **Not Observed** (NO) regardless of the number of information statements for that data item that are marked Not Applicable (NA).
Rule 5	If the observations for all the information statements under a given data item are marked the same, then the overarching data item **MUST** be marked the same as the information statements.
Rule 6	If the information statement labeled **"Other"** is selected to describe a specific food safety practice related to the overarching data item, the data collector **MUST** describe that food safety practice in the "**Comment"** section box.

D. Comment Section for Each Data Item

A "Comments" section is provided for each of the data items as presented in the illustration below.

IN	OUT	NO	NA	
☐	☒			**3. Food is protected from cross-contamination during storage, preparation, and display**
IN	**OUT**	**NO**	**NA**	**Description of FOOD Contamination OBSERVATIONS**
☐	☒	☐	☐	**A.** Raw animal foods are separated from ready-to-eat foods
☒	☐	☐	☐	**B.** Different raw animal foods are separated from each other
☒	☐			**C.** Food is protected from environmental contamination – actual contamination observed
☒	☐			**D.** Food is protected from environmental contamination – potential contamination
☐	☐		☒	**E.** Other (*describe in the comments section below)*
COMMENTS: 3A - Observed raw chicken breasts stored in direct contact with ready-to-eat deli meats in the Walk-in Cooler				

The data collector is to use the comment section to provide a complete description or clarity to the observations made of the data item. If a data item or information statement is marked **OUT** of Compliance, a clear description of the observation **must** be provided by the data collector.

Anytime the "**Other"** information statement is selected as "IN" or "OUT", the data collector **must** provide a complete description of the observation regardless of whether it is IN or OUT of Compliance with the *Food Code*.

III. FOOD PRODUCT TEMPERATURE CHARTS

A. Data Items with Food Product Temperature Charts

Food product temperature charts are included for the following five data items:

- #5 – Foods requiring refrigeration are held at the proper temperature
- #6 – Foods displayed, or stored hot are held at the proper temperature
- #7 – Foods are cooled properly
- #9 – Raw animal foods are cooked to required temperatures
- #10 – Cooked foods are reheated to required temperatures

An illustration of the food product temperature chart for data item **#5 – Foods requiring refrigeration are held at the proper temperature** is presented below.

Table 1: Cold Holding Temperature Recorded During the Data Collection (List all temperatures taken)

Cold Holding Temperatures Recorded During the Data Collection (List all temperatures taken)							
FOOD PRODUCT	**FOOD TEMP.**	***FOOD CODE* CRITICAL LIMIT**	**TYPE OF COLD HOLDING EQUIPMENT**	**FOOD PRODUCT**	**FOOD TEMP.**	***FOOD CODE* CRITICAL LIMIT**	**TYPE OF COLD HOLDING EQUIPMENT**
Cooked Chicken	**40ºF**	**41ºF**	**Walk-in Cooler**	**Diced Ham**	**44ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**
Raw Hamburger Patty	**52ºF**	**41ºF**	**Refrigeration Drawer Preparation Line**	**Cooked Pasta**	**39ºF**	**41ºF**	**Walk-in Cooler**
Sliced Tomatoes	**48ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**	**Cooked Ribs**	**41ºF**	**41ºF**	**Walk-in Cooler**
Egg Salad	**42ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**	**Tuna Salad**	**42ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**

Food product temperatures **must** be taken to make a determination of compliance or non-compliance for data items 5, 6, 7, 9, and 10. Data collectors are **not** to rely solely upon discussions with managers or foodservice personnel to make a determination of compliance or non-compliance.

The data collector is **not** to stop taking temperature because an OUT of Compliance observation was recorded. During this version of the Study, FDA is attempting to better quantify the scope of the problem. It is understood that taking a temperature of every food product is not feasible nor is it necessary. It is essential for the data collector to obtain a representative sampling of product temperatures held in temperature storage units or observed being cooked, reheated, or cooled. Quantifying the scope of the problem will be important when attempts are made during the data analysis to draw correlations related to the impact of food safety management systems on controlling risk factors that are dependent upon a temperature critical limit for controlling food safety hazards.

All food product temperature observations (both IN and OUT) **must** be entered by the data collector into the food product temperature charts provided. If **one** food item is found OUT of temperature the overarching data item covering the specific food safety practice **must** be marked OUT of Compliance.

Description of Column Headings Contained in Temperature Charts

- **Consumer Advisory (specific to the temperature chart for data item #9 – Raw animal foods are cooked to required temperatures)** – Using the current version of the FDA Food Code, the data collector will determine whether a consumer advisory containing both a disclosure and reminder as specified with Section 3-603.11 of the Food Code accompanied the raw animal food product from which a final cooking temperature was obtained. The data collector will select either **YES or NO** using the following criteria:
  - ✓ ***YES –*** means that the customer ordered the raw animal food to be undercooked **and** the food establishment had a consumer advisory for that menu item that met the disclosure and reminder requirements specified in Section 3-603.11 of the *Food Code*.
  - ✓ ***NO*** – means that the customer did **not** specifically order the raw animal food to be undercooked **or** the food establishment did **not** have a consumer advisory for that menu item that met the disclosure and reminder requirements specified in Section 3-603.11 of the *Food Code*.

- ***Final Cook Temp.*** – Final internal temperature of a food product measured by the data collector immediately upon completion of the cooking process, using a calibrated temperature measuring device.

- ***Final Reheat Temp.*** – Final internal temperature of a food product measured by the data collector immediately upon completion of the reheating process, using a calibrated food temperature measuring device.

Food Code Critical Limit – The quantitative temperature measurement provided in the FDA Food Code for controlling microbiological food safety hazards associated with the data item.

- ***Food Product*** – Common name or menu designation associated with the food product. The data collector is **not** expected to list all ingredients that may be part of a product, such as a casserole. Identifying the primary ingredient is sufficient, such as the designation tuna casserole.

- ***Food Temp.*** – Internal food product temperature measured by the data collector using a calibrated food temperature measuring device.

- ***Food Cooling Temp. #1*** – Initial internal product temperature of cooked TCS food or TCS food prepared from ambient ingredients that are in the process of cooling. The data collector **must** make every effort to assess cooling processes in the early part of the data collection and record this *Food Temp. #1* at the beginning, or near the beginning, of the establishment visit.

  ***NOTE*:** The data collector may encounter instances where a cooked time-temperature control for safety food product was prepared the day before and is still going through the cooling process the next morning. In such cases, the data collector will enter "**UNK**" in the Food Cooling Temp. #1 data entry field because the product was put into the cooling process the night before and an initial temperature was not obtainable.

- ***Food Cooling Temp. #2*** – Internal product temperature of cooked TCS food or TCS food prepared from ambient ingredients that the data collector assessed near the end of the data collection. This second temperature reading is from the same food product observed cooling at the beginning of the inspection from which Food Cooling Temp. #1 (above) was obtained. It provides a method for assessing the cooling rate based on the elapsed time between the first and second temperature measurements.

- ***Total Time in Minutes*** – Represents the total elapsed time in minutes between the data collector's *Food Temp. #1* measurement and their *Food Temp. #2* measurement of the cooked TCS food or TCS food prepared from ambient ingredients that are in the process of cooling.

  NOTE: For instance, where the time-temperature control for safety food had been prepared the day before and is still in the cooling process the next day, the data collector will enter "**N/O**" in the Total Time in Minutes data entry field. If the data collector entered "**UNK**" in the Food Cooling Temp. #1 field as described in the note section of that item on the previous page, the database will automatically default to the "**N/O**" entry.

- ***Type of (Cold Holding / Hot Holding / Used to Cool Food) Equipment*** – A drop down menu is included in the database listing different types of equipment used to maintain or achieve control of food product temperature. Make and model numbers of the equipment are **NOT** required
  Data collectors are to select their equipment type entry from the menu list. Data collectors can select the "Other" option if the equipment type is not present on the drop-down menu. After selecting the "Other" option, the data collector is to enter the equipment type in the comment section for that data item making a reference to the food product to which it relates.

B. Summary – Product Temperature Categories

Summary tables for food product temperatures categories are included for the following four data items:

#5 – Foods requiring refrigeration are held at the proper temperature
#6 – Foods displayed, or stored hot are held at the proper temperature
#9 – Raw animal foods are cooked to required temperatures
#10 – Cooked foods are reheated to required temperatures

An illustration of the product temperature summary tables for data item **#5 – Foods requiring refrigeration are held at the proper temperature** is present below.

Table 2: Cold Holding Temperatures Recording During the Data Collection (List all temperatures taken)

Cold Holding Temperatures Recorded During the Data Collection (List all temperatures taken)							
FOOD PRODUCT	**FOOD TEMP.**	***FOOD CODE* CRITICAL LIMIT**	**TYPE OF COLD HOLDING EQUIPMENT**	**FOOD PRODUCT**	**FOOD TEMP.**	***FOOD CODE* CRITICAL LIMIT**	**TYPE OF COLD HOLDING EQUIPMENT**
Cooked Chicken	**40ºF**	**41ºF**	**Walk-in Cooler**	**Diced Ham**	**44ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**
Raw Hamburger Patty	**52ºF**	**41ºF**	**Refrigeration Drawer Preparation Line**	**Cooked Pasta**	**39ºF**	**41ºF**	**Walk-in Cooler**
Sliced Tomatoes	**48ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**	**Cooked Ribs**	**41ºF**	**41ºF**	**Walk-in Cooler**
Egg Salad	**42ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**	**Tuna Salad**	**42ºF**	**41ºF**	**Refrigerated Sandwich Preparation Table**

NUMBER OF FOOD PRODUCT TEMPERATURE TEMPERATURES	SUMMARY COLD HOLDING PRODUCT CATEGORIES
3	**I.** – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
2	**II.** – Number of **OUT** of Compliance product temperature measurements **1ºF – 2ºF** above *Food Code* critical limits
1	**III.** – Number of **OUT** of Compliance product temperature measurements **3ºF – 4ºF** above *Food Code* critical limits
1	**IV.** – Number of **OUT** of Compliance product temperature measurements **5ºF – 9ºF** above *Food Code* critical limits
1	**V.** – Number of **OUT** of Compliance product temperature measurements **10ºF or more** above *Food Code* critical limits

After the data collection has been completed, the results of the compliance status of observations made of **all** internal food product temperatures will be recorded in the summary table provided for data items #5, #6, #9, and #10.

The retail food risk factor study database has been designed to automatically populate the temperature summary table with the total number of internal food product temperatures recorded in the data item temperature chart for each of the following five categories:

I. Number of food product temperature measurements **IN** Compliance with *Food Code* critical limits.
II. Number of **OUT** of Compliance food product temperature measurements **1ºF – 2ºF** (above / below) *Food Code* critical limits.
III. Number of **OUT** of Compliance food product temperature measurements **3ºF – 4ºF** (above / below) *Food Code* critical limits.
IV. Number of **OUT** of Compliance food product temperature measurements **5ºF – 9ºF** (above / below) *Food Code* critical limits.
V. Number of **OUT** of Compliance food product temperature measurements **10ºF or more** (above / below) *Food Code* critical limits.

NOTE: The data collector should verify that the temperature summary tables display the total number of internal food temperature for the five categories described above.

IV. FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENTS

A. Protocol for Conducting a Food Safety Management System Assessment

The design of the Study includes the collection of information on the industry food safety management system in place to control four key risk factor areas and selected data items for each as presented below:

1 – Poor Personal Hygiene
Data Item #1 – Employees practice proper handwashing
Data Item #2 – Employees do not contact ready-to-eat foods with bare hands

2 – Protection from Contamination / Contaminated Equipment
Data Item #3 – Food is protected from cross-contamination during storage, preparation, and display
Data Item #4 – Food contact surfaces are properly cleaned and sanitized

3 – Improper Holding / Time and Temperature
Data Item #5 – Foods requiring refrigeration are held at the proper temperature
Data Item #6 – Foods displayed or stored hot are held at the proper temperature
Data Item #7 – Foods are cooled properly
Data Item #8 – Refrigerated, ready-to-eats foods are properly date marked and discarded within days of preparation or opening

4 – Inadequate Cooking / Reheating
Data Item #9 – Raw animal foods are cooked to required temperatures
Data Item #10 – Cooked foods are reheated to required temperatures

Each food establishment selected for the study will have a food safety management system assessment conducted for **one** of the four risk factor areas described above. The Biostatistics Branch will randomly select the risk factor area that will be the focus of the food safety management system assessment within each of the establishments.

The data collector will evaluate the presence of three key food safety management system elements (procedures, training, and monitoring) for all the **primary data items** listed under the assigned risk factor.

- ***Procedures*** – A defined set of actions adopted by food service management for accomplishing a task in a way that minimizes food safety risks.
- ***Training*** – Management informs employees what the procedures are and teaches the employees how to carry them out. This is **not** to be used for determining manager knowledge or certification
- ***Monitoring*** – Routine observations and measurements made by management to determine if procedures are being followed and maintained.

For each of these three-food safety management system elements, the data collector will determine if the information provided by the establishment management adequately addresses the essential critical limits for the assigned risk factor area. In addition to covering the pertinent critical limits pertaining to the assigned risk factor area, industry management is to provide a clear, understandable description of the system in place for procedures, training, and monitoring using the guidance at the top the following page**.**

A food safety management system assessment questionnaire has been developed for each of the foodborne illness risk factor areas. These assessment tools are included as separate attachments.

- Attachment A – Food Safety Management System Assessment – Poor Personal Hygiene Risk Factor
- Attachment B – Food Safety Management System Assessment – Protection from Contamination / Contaminated Equipment Risk Factor
- Attachment C – Food Safety Management System Assessment – Improper Holding / Time and Temperature Risk Factor
- Attachment D – Food Safety Management System Assessment – Inadequate Cooking / Reheating Risk Factor

For each of the data items listed under the risk factor area on the previous page, the data collector will individually assess each of the three-food safety management system elements (Procedures, Training, and Monitoring). The chart below contains the four statements related to handwashing procedures.

HANDWASHING

PROCEDURES	YES	NO
Management is able to describe the critical limits for handwashing as they apply to their establishment.	☐	☒
Management is able to describe the steps / tasks (how and when) that are performed to ensure that the identified critical limits for handwashing are achieved.	☒	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform the handwashing procedure (for handwashing – reference to a system-wide policy for all employees is acceptable).	☒	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their handwashing procedure within their establishment.	☐	☐

Using an effective interview process the data collector will solicit information from the person in charge to respond "Yes" or "No" to the four statements listed under each of the Procedures, Training, and Monitoring elements.

NOTE: *Data collectors are strongly encouraged to use a conversational approach to obtain information from the person in charge on their food safety management system rather than using the tool to drive questions in the order the statements appear.*

Using the information gathered from the interview, the data collector will answer "YES" or "NO" to each of the first three statements under the food safety management system element (Procedures, Training, or Monitoring) they are assessing. Each of the three statements is to be answered independently of one another.

As an example, the chart at the top this page contains an assessment of the procedures in place for handwashing. During the interview process, the person in charge described a handwashing procedure that included critical limits that did not meet minimum requirements for controlling hazards of concern. Therefore, the data collector marked "NO" to the first statement. The person in charge was, however, able to provide a sound management

structure for how and when handwashing is done in the facility and who is responsible for following the procedure. The data collector marked statements #2 and #3 "YES" based on this information.
After marking the first three statements, the data collector reviews the responses. If ALL three statements are marked "YES", the data collector will then mark a response "YES" or "NO" to the last question in the shaded row. The fourth question in the shaded row is designed to assess whether there are written materials to support the food safety management system element (Procedures, Training, or Monitoring).

If any of the first three statements have been marked "NO", the data collector does not enter a response for the shaded statement. The first three statements MUST be marked "YES" for the data collector to enter a response for the fourth statement.

B. ***Food Safety management System Assessment – Rating System***

The data collector is to use the chart provided under each of the data items on the data collection form to document the rating level for each of the three-food safety management system elements (procedures, training, monitoring). An example of this food safety management system chart is displayed below.

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT											
PROCEDURES			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

The food safety management system assessment will be conducted during the same establishment visit but independent from the determination of compliance with the *Food Code* for each of the data items.

Using the food safety management system assessment tool, the data collector will add up the total number of "YES" responses for each of the management system elements (Procedures, Training, and Monitoring). The number of "YES" responses on the assessment tool will determine how to mark the Procedures, Training, And Monitoring sections for the data item on the data collection form.

Each rating number is broadly defined below:

1. **Non-Existent** – No system in place or haphazardly implemented (no defined structure or frequency for implementation). If the number of "**YES" responses is "0" or "1", mark the data collection form "1"** for that management system (Procedures, Training, or Monitoring) element.
2. **Underdeveloped** – System is in early development. Efforts are being made, but there are crucial gaps in completeness and/or consistency. If the number of **"YES" responses is "2", mark the data collection form "2"** for that management system (Procedures, Training, or Monitoring) element.
3. **Well Developed** – System is complete, consistent and oral or a combination of oral and written. The preponderance of the management system is oral. If the number of **"YES" responses is "3", mark the data collection form "3"** for that management system (Procedures, Training, or Monitoring) element.
4. **Well Developed and Documented** – System is complete, consistent and primarily written. The preponderance of the management system is written. This is the goal for all establishments. If the number of **"YES" responses is "4", mark the data collection form "4"** for that management system (Procedures, Training, or Monitoring) element.

In the "COMMENT" section of the data collection form, provide a description of any scenarios that presented some challenges in assigning a 1-4 marking for a management system element.

It is quite possible that an establishment may not perform all the food safety practices listed under a specific risk factor area. For example, if the Improper Holding / Time and Temperature risk factor is selected for a food safety management system assessment, four different food safety practices (data items) are to be included as part of the review process:

- Data Item #5 – Cold Holding of TCS Food
- Data Item #6 – Hot Holding of TCS Food
- Data Item #7 – Cooling of TCS Food
- Data Item #8 – Date Marking of Ready-to-Eat TCS Food

There may be instances where an establishment may not perform all the food safety practices that comprise the risk factor. Using the above example, if the establishment does not perform cooling of time-temperature control for safety foods, Data Item #7 – Cooling of TCS Foods would be marked "NA". Since the establishment does not conduct any cooling processes, the data collector would **not** conduct a food safety management assessment of cooling practices. The data collector would mark "**NA**" for the Procedure; Training; and Monitoring assessment of Data Item #7 because the cooling foods was not done in the facility.

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT								
PROCEDURES			**TRAINING**			**MONITORING**		
☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**
☐	**2**		☐	**2**		☐	**2**	
☐	**3**		☐	**3**		☐	**3**	
☐	**4**		☐	**4**		☐	**4**	
☒	**NA**		☒	**NA**		☒	**NA**	

The "**NA**" marking can only be used for the Procedures; Training; and Monitoring assessment when the overall data item is marked "**NA**" as well.

V. HANDWASHING FREQUENCY ASSESSMENT

A. Handwashing Frequency Assessment Protocol

The data collector will record all of his or her handwashing observations during the regular data collection using the "Handwashing Frequency Assessment" located under **data item #1 – Employees practice proper handwashing** on the Data Collection Form. Over the course of the data collection visit, the Specialist will record a tally of each time an employee is observed doing the following:

- Washing hands properly and when required,
- Washing hands improperly, or
- Failing to wash hands when required.

IN	OUT	NO	NA	
☐	☒			**1. Employees practice proper handwashing**
IN	**OUT**	**NO**	**NA**	**Description of HANDWASHING OBSERVATIONS**
☐	☒			**A.** Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*
☐	☒			**B.** Hands are cleaned and washed when required as specified in Section 2-301.14 of the *Food Code*
COMMENTS:				

HANDWASHING FREQUENCY ASSESSMENT			
	C1 **Employee observed washing hands properly and when required**	**C2** **Employee observed washing hands improperly**	**C3** **Employee observed failing to wash hands when required**
TOTAL COUNT	/ / /	/ / /	/ / /

Additional time should **not** be allocated for the observation of handwashing practices. It should be collected through the normal course of conducting observations of other food safety procedures during the data collection visit. Data collectors should recognize their limitations with this aspect of the study. The assessment of handwashing frequency in the context of this study is to provide a broad-based indicator of handwashing practices and will not be used to draw statistical conclusions. It will be impossible to assess every activity during which handwashing should occur so the precision needed for statistical analysis will not be achievable. Assessing handwashing frequency is intended to provide some context to the IN / OUT marking for **Data Item #1 – *Employees practice proper handwashing*.**

The data collector should do their best to assess handwashing when the opportunity arises during the normal course of the visit. The data collector should **not** forgo an opportunity to observe and assess a food safety practice or procedure related to a primary data item in order to follow an employee to determine if hands are washed when needed using effective cleaning procedures.

NOTE: The adherence to good handwashing practices may vary greatly from one facility to another. The expectation for the data collector is to make observations of employees washing their hands when they should and washing their hands properly. Should a data collector observe continued failure of employees to wash their hands when they should, immediate corrective action should be taken with the person-in-charge or directly with the food employee to ensure proper handwashing takes place and is observed. If the data collector needed to take corrective action to observe handwashing procedures, it **must** be noted in the "Comment" section under data item #1.

B. *Assuring Marking Consistency with Data Items*

The data collected on the **Handwashing Frequency Assessment** form should match the data results recorded for **data item #1 – Employees practice proper handwashing**. For example, if any observations are recorded under column C2 or C3 in the above Handwashing Frequency Assessment form, then data item #1 – **Employees practice proper handwashing**" on the data collection form for that establishment should be marked "**OUT**".

VI. DATAITEMS AND INFORMATION STATEMENTS

Reminder – Six Rules for Marking Data Items

NOTE: All six rules for marking data items, summarized in the table below, have been programmed into the database. The correct marking for the overarching data item will automatically be entered into the system based on the data collector's markings for the listed information statements.

Table 3: Summary of the Six Rules for Marking Data Items

Summary of the Six Rules for Marking Data Items	
Rule 1	**One** of the four marking options, (IN, OUT, NO, NA) **MUST** be completed by the data collector for **EACH** of the information statements listed under an overarching data item.
Rule 2	If **ANY** of the information statements are marked **OUT** of Compliance, the data collector must mark the overarching data item **OUT** of Compliance.
Rule 3	If an observation (IN or OUT) is made of any information statement, the overarching data item **CANNOT** be marked Not Observed (NO) or Not Applicable (NA).
Rule 4	If **no observations** (IN or OUT) are made of any information statements but **one or more** of the information statements is marked **Not Observed** (NO,) the overarching data item **MUST** be marked **Not Observed** (NO) regardless of the number of information statements for that data item that are marked Not Applicable (NA).
Rule 5	If the observations for all the information statements under a given data item are marked the same, then the overarching data item **MUST** be marked the same as the information statements.
Rule 6	If the information statement labeled **"Other"** is selected to describe a specific food safety practice related to the overarching data item, the data collector **MUST** describe that food safety practice in the "**Comment"** section box.

VII. Marking Instructions

1. Employees practice proper handwashing

IN	OUT	NO	NA	
☐	☐			**1. Employees practice proper handwashing**
IN	**OUT**	**NO**	**NA**	**Description of HANDWASHING OBSERVATIONS**
☐	☐			**A.** Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*.
☐	☐			**B.** Hands are cleaned and washed when required as specified in Section 2-301.14 of the *Food Code*

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statements.

NOTE: The data item ***Employees practice proper handwashing*** **MUST** be marked **IN** or **OUT** of compliance. The data collector **must** be in the restaurant facility long enough to make observations of handwashing practices for both information statement 1A **and** 1B. The data collector is to rely only on actual observations of handwashing practices. Should a data collector observe continued failure of employees to wash their hands when they should, immediate corrective action should be taken with the person-in-charge or directly with the food employee to ensure proper handwashing takes place and is observed. If the data collector needed to take corrective action to observe handwashing procedures, it **must** be noted in the "Comment" section under data item #1.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **2-301.12^{P}** **IN** – Mark IN when food employees are observed washing their hands as specified in Section 2-301.12 of the *Food Code* **OUT** – Mark OUT when **ONE or MORE** food employees are observed failing to follow the handwashing procedures specified in Section 2-301.12 of the *Food Code*. This information statement **CANNOT** be marked **NO** or **NA**
B	FOOD CODE REFERENCE: **2-301.14(A-I)^{P}** **IN** – Mark IN when food employees are observed washing hands when required as specified in Section 2-301.14 of the *Food Code* **OUT** – Mark OUT when **ONE or MORE** food employees are observed failing to wash their hand when required as specified in Section 2-301.14 of the *Food Code* **NOTE:** Change / Clarification included in the 2013 Food Code – If an employee washes their hands before beginning a food procedure and then dons gloves, they are not required to wash their hands between subsequent glove changes if they do not change tasks. This information statement **CANNOT** be marked **NO** or **NA**

2. Food employees do not contact ready-to-eat foods with bare hands

IN	OUT	NO	NA	
☐	☐			**2. Food employees do not contact ready-to-eat foods with bare hands**

- Data item 2 does not contain any information statements. The language in the data item is intended to be all encompassing of observations related to bare hand contact of exposed ready-eat-foods
- Since this data collection period is focusing on the restaurant segment of the industry, data collectors **CANNOT** select the NO or NA marking options that have been **BLACKED-OUT**. All restaurants selected for the Study will have processes that include preparation or service of ready-to-eat foods.

INFO ITEM	MARKING INSTRUCTIONS
	FOOD CODE REFERENCE: **3-301.11(B)[P]** **IN** – Mark IN when food employees are observed using suitable utensils or single-use gloves to prevent bare hand contact with exposed ready-to-eat foods OR are observed properly following a pre-approved alternative procedure to no bare hand contact. **NOTE:** When fruits and vegetables are being washed, food employees may touch them with their bare hands. **OUT** – Mark OUT when **ONE or MORE** food employees are observed touching exposed ready-to-eat foods with their bare hands OR are observed **NOT** properly following a pre-approved alternative procedure to no bare hand contact. **NOTE:** This data item **MUST** be marked **OUT** of compliance if **one person** is observed touching exposed ready-to-eat foods with their bare hands. This information statement **CANNOT** be marked NO or **NA**

3. Food is protected from cross-contamination during storage, preparation, and display

IN	OUT	NO	NA	
☐	☐			**3. Food is protected from cross-contamination during storage, preparation, and display**

IN	OUT	NO	NA	Description of FOOD Contamination OBSERVATIONS
☐	☐	☐	☐	**A.** Raw animal foods are separated from ready-to-eat foods
☐	☐	☐	☐	**B.** Different raw animal foods are separated from each other
☐	☐			**C.** Food is protected from environmental contamination – actual contamination observed
☐	☐			**D.** Food is protected from environmental contamination – potential contamination
☐	☐			**E.** Other (*describe in the comments section below)*

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statement.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-302.11(A)(1)^{P}** **IN** – Mark IN when direct observations of food storage and handling practices verifies separation of raw animal foods from ready-to-eat foods. Frozen, commercially packaged raw animal food stored or displayed with or above frozen, commercially packaged ready-to-eat foods is to be marked IN. **OUT** – Mark OUT when direct observations of food storage and handling practices indicates a lack of proper, adequate separation of **ONE or MORE** raw animal foods from ready-to-eat foods. **NO** – Mark NO when raw animal foods are used or served periodically but none are present at the time of the data collection and the data collector is unable to observe raw animal food storage and handling practices. **NA** – Mark NA when there are no raw animal foods used in the facility or only prepackaged foods are served.
B	FOOD CODE REFERENCE: **3-302.11(A)(2)^{P}** **IN** – Mark IN when direct observations of food storage and handling practices verifies separation of raw animal foods by species based on minimum cooking temperatures by spacing or placing in separate containers. **OUT** – Mark OUT when direct observation of food storage and handling practices indicates a lack of proper, adequate separation of **ONE or MORE** raw animal foods by species based on minimum cooking temperatures. **NO** – Mark NO when **MORE THAN ONE** raw animal food species is used or served periodically but none are present at the time of the data collection and the data collector is unable to observe food storage and handling practices related to multiple raw animal food species. **NA** – Mark NA when there are no raw animal foods used in the facility or only one raw animal food is used, or only prepackaged foods are sold.
C	FOOD CODE REFERENCES: **3-302.11(A)(4-8)^{C}; 3-304.11(B)^{P}; 3-304.15(A)^{P}; 3306.13(A)^{P}** **IN** – Mark IN when direct observations of food storage and handling practices verifies **NO** instances of **ACTUAL** environmental contamination of food (such as compressor drainage dripping on food; splash from mop water contacting food; etc.). **OUT** – Mark OUT when direct observation of food storage and handling practices indicates **ACTUAL environmental contamination** of **ONE or MORE** foods (i.e., compressor drainage is dripping on food; splash from mop water is observed making contact with food, etc.) This information statement **CANNOT** be marked **NO** or **NA**

(Marking Instructions for information statement 3D and 3Econtinues on the next page)

(Continued from the previous page – marking instructions for information statements 3D and 3E)

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statement.

INFO ITEM	MARKING INSTRUCTIONS
D	FOOD CODE REFERENCES: **3-302.11(A)(4-8)^{C}; 3-304.11(B)^{P}; 3-304.15(A)^{P}; 3-306.11^{P}; 3-306.12(A)^{C}; 3-306.13(A)^{P}** **IN** – Mark IN when direct observations of food storage and handling practices verifies **NO POTENTIAL** for environmental contamination of food (such as food in uncovered containers; hermetically sealed containers of food that are visibly soiled before opening; food set out for display unprotected from potential contamination by the public, etc.). **OUT** – Mark OUT when direct observations of food storage and handling practices create conditions for **POTENTIAL** environmental contamination of food (such as food in uncovered containers; hermetically sealed containers of food that are visibly soiled before opening; food set out for display unprotected from potential contamination by the public, etc.). This information statement **CANNOT** be marked **NO** or **NA**
E	Marked **IN / OUT** when a food procedure or practice pertaining to protecting food from cross contamination **IS** observed and not accurately described in the previous information statements for this data item **and** represents a food procedure / practice that is designated as a **PRIORITY ITEM** in the *Food Code*. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for foods protected from contamination are observed. The **NO** marking is **NOT** used for the "Other" information statement.

4. Food contact surfaces are properly cleaned and sanitized

IN	OUT	NO	NA	
☐	☐			**4. Food contact surfaces are properly cleaned and sanitized**
IN	**OUT**	**NO**	**NA**	**Description of Food Contact Surfaces OBSERVATIONS**
☐	☐			**A.** Food contact surfaces and utensils are clean to sight and touch and sanitized before use
☐	☐	☐	☐	**B.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using manual warewashing procedures
☐	☐	☐	☐	**C.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using mechanical warewashing equipment
☐	☐		☐	**D.** Other (*describe in the comments section below)*

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statement.
- **NOTE:** Information statement 4A will require some judgment to be used when marking the information statements IN or OUT of compliance. The information statement should be marked OUT of compliance if observations are made that **support a pattern** of non- compliance with the procedure or practice. One soiled utensil or food contact surface or one sanitizer container without sanitizer, would not necessarily support an OUT of Compliance marking. The data collector **MUST** complete the comment section when an OUT of Compliance marking is documented for one or more of the information statements.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCES: **4-601.11(A)^{PF}(B)^{C}; 4-602.11$^{P\&C}$; 4-602.12^{C}; 4-702.11^{P}** **NOTE:** Information statement "A" is specific to observations of clean and sanitized dishware, utensils, and cookware that have been stored and are considered ready-for-use. Do **NOT** include observations made of food contact surfaces and utensils that are part of a manual warewashing procedure or cleaning / sanitizing in place equipment which are addressed in information statement "B". Do **NOT** include observations of food contact surfaces and utensils as part of a mechanical warewashing procedure which is addressed in information statement "C". **IN** – Based on an overall assessment of the establishment's operation, mark IN when direct observations indicate a **substantive pattern** for properly cleaning and sanitizing dishware, utensils, and cookware that are in-use or considered ready-for-use**.** **OUT** – Based on an overall assessment of the establishment's operation, mark OUT when direct observations indicate a **substantive pattern** of soiled and/or un-sanitized dishware, utensils, and cookware that are in use or considered ready-for-use. This information statement **CANNOT** be marked **NO** or **NA**

(Marking Instructions for information statements 4B continues on the next page)

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statement.

INFO ITEM	MARKING INSTRUCTIONS
B	FOOD CODE REFERENCES: **4-303.11; 4-501.111^{P}; 4-501.114^{P}; 4-501.115^{C}; 4-703.11(A), (B), or (C)^{P}** **NOTE:** Information statement "B" is specific to observations of cleaned and sanitized food contact surfaces as part of a manual warewashing or clean-in-place procedure. Do **NOT** include observations of cleaned and sanitized dishware, utensils, and cookware that have been stored and are considered ready-for-use which are addressed as part of information statement "A". Do **NOT** include observations of food contact surfaces and utensils as part of a mechanical warewashing procedure which is addressed in information statement C. **IN** – Mark IN when direct observations indicate the proper washing and sanitizing of dishes / utensils using a **MANUAL** procedure or clean-in-place procedures for equipment such as a meat slicer, large mixer, microwave oven, tilting kettle, etc., result in food contact surfaces that are cleaned and sanitized. Examples for this information statement would include observations of food contact surfaces and equipment being properly washed, rinsed, and sanitized in a three compartment sink or observations of the cleaning and sanitization of a tilting kettle (CIP). **OUT** – Mark OUT when direct observations indicate the lack of, or improper methods / procedures for, washing and sanitizing of dishes / utensils using a **MANUAL** procedure or clean-in-place equipment such as a meat slicer, large mixer, microwave oven, tilting kettle, etc., result in food contact surfaces that are **NOT** cleaned and sanitized. Examples would include observations of food contact surfaces and equipment immersed in sanitizing concentrations lower than the critical limits contained in the *Food Code*; or washing food contact surfaces in dirty water containing little of no detergent solution; or washing food contact surfaces using an improper set-up of the three compartment sink, such as wash-sanitize-rinse; etc. **NOTE:** Lack of temperature measuring devices and/or chemical tests kits for determining sanitizing rinse temperatures and/or sanitizer concentration is **NOT** marked under information statement "B" --- mark these observations under information statement "15E". **NO** – Mark NO when washing and sanitizing dishes / utensils using a **MANUAL** procedure is part of the establishment's operation but is not conducted during the data collection. **NA** – Mark NA when all equipment and utensils are washed and sanitized in a mechanical dish machine.

(Marking Instructions for information statement 4C and 4D continues on the next page)

INFO ITEM	MARKING INSTRUCTIONS
C	FOOD CODE REFERENCES: **4-303.11; 4-501.113[C]; 4-501.114[P]; 4-703.11(B) and (C)[P]** **NOTE:** Information statement "C" is specific to observations of cleaned and sanitized food contact surfaces as part of a mechanical warewashing procedure. Do **NOT** include observations of cleaned and sanitized dishware, utensils, and cookware that have been stored and are considered ready-for-use which are addressed as part of information statement "A". Do **NOT** include observations of food contact surfaces and utensils as part of a manual warewashing procedure or clean-in-place equipment such as a meat slicer which is addressed in information statement "B". **NOTE:** Observations related to accurate temperature measuring devices and/or test kits provided and accessible for use to measure sanitization rinse temperatures and/or sanitization concentration are recorded under information statement "15E". **IN** – Mark IN when direct observations of food contact surfaces and utensils indicate the proper washing and sanitizing of dishes / utensils using a **MECHANICAL** procedure. An example would include observations (visual inspection) of dishware indicating no food debris remaining on surfaces after the mechanical warewashing process has been completed and proper sanitization temperature or concentration has been measured and meets *Food Code* critical limits. **OUT** – Mark OUT when direct observations of dishware and food contact surfaces indicate the lack of, or improper methods / procedures for, washing and sanitizing of dishes / utensils using a **MECHNICAL** procedure resulting in dishware or food contact surfaces that are NOT cleaned and sanitized. Examples of observations include a pattern of dishware containing food debris after the mechanical warewashing procedure has been completed; or measurements of the hot water or chemical sanitization in the final rinse cycle does **NOT** meet *Food Code* critical limits Observations of this information statement are specific to whether the food contact surface is cleaned and sanitized. Do **NOT** mark observations of equipment defects, such as a broken temperature gauge, missing baffle plate, etc., under this information statement. **NOTE:** Lack of temperature measuring devices and/or chemical tests kits for determining sanitizing rinse temperatures and/or sanitizer concentration is **NOT** marked under information statement "C"--- mark these observations under information statement "15E". **NO** – Mark NO when washing and sanitizing dishes / utensils using a **MECHANICAL** procedure is part of the establishment's operation but is not conducted during the data collection. **NA** – Mark NA when all equipment and utensils are washed and sanitized using a manual procedure.
D	Marked **IN / OUT** when a food procedure / practice related to the cleaning and sanitizing of food contact surfaces **IS** observed and not accurately described in the previous information statements for this data item and represents a food procedure / practice that is designated as a **PRIORITY ITEM** in the *Food Code*. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for the cleaning and sanitizing of food contact surfaces are observed. The **NO** marking is **NOT** used for the "Other" information statement.

5. *Foods requiring refrigeration are held at the proper temperature*

IN	OUT	NO	NA	
☐	☐			**5. Foods requiring refrigeration are held at the proper temperature**
IN	**OUT**	**NO**	**NA**	**Description of Cold Holding Temperature OBSERVATIONS**
☐	☐			**A.** TCS Food is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling or when time is used as a public health control.
☐	☐	☐	☐	**B.** Raw shell eggs are stored under refrigeration that maintains ambient air temperature of 45ºF (7° C) or less
☐	☐		☐	**C.** Other (describe in the temperature chart and comments section below)

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statements.
- **NOTE**: **ALL** observations **MUST** be based on actual food product temperature measurements using a calibrated food temperature measuring device. The data collector should verify that the TCS food requiring refrigeration is not in the process of cooling or being held using time as a public health control or has been processed in such a manner as to render it a non-TCS food. **ALL** food product temperatures taken are to be recorded in the temperature chart on the data collection form. If **ONE** product is found to be out of temperature, the appropriate information statement for that food product is marked **OUT** of Compliance.
- **NOTE:** Observations made of procedures where Time, is used as a Public Health Control as it pertains to TCS foods that would normally be held under refrigeration temperatures are to be recorded for information statement "14B". Do **NOT** record any product temperatures in the cold food product temperature log if it is the intention of the operation's management to use Time as a Public Health Control.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-501.16(A)(2)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of TCS food requiring refrigeration are 41ºF or below. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of TCS food requiring refrigeration are above 41ºF, **NOTE:** Do **NOT** assess the cold holding of raw shell eggs as part of this information statement. Cold holding of raw shell eggs is assessed under information statement 6(B). This information statement **CANNOT** be marked **NO** or **NA.**
B	FOOD CODE REFERENCE: **3-501.16(B)^{P}** **IN** – Mark IN when the **AMBIENT** air temperature of the refrigeration equipment used for the storage of raw shell eggs is maintaining 45ºF or below. **OUT** – Mark OUT when the **AMBIENT** air temperature of the refrigeration equipment used for the storage of raw shell eggs is above 45ºF. **NO** – Mark NO when the establishment receives raw shell eggs but there were no raw shell eggs on the premises at the time of the data collection. **NA** – Mark NA when the establishment does not receive raw shell eggs
C	Mark **IN / OUT** when a cold holding procedure or practice **IS** observed and not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for cold holding are observed. The **NO** marking is **NOT** used for the "Other" information statement.

6. Foods displayed or stored hot are held at the proper temperature

IN	OUT	NO	NA	
☐	☐	☐	☐	**6. Foods displayed or stored hot are held at the proper temperature**

IN	OUT	NO	NA	Description of Hot Holding Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** TCS Food is maintained at 135°F (57°C) or above, except during preparation, cooking, cooling, or when time is used as a public health control.
☐	☐	☐	☐	**B.** Roasts are held at a temperature of 130°F (54°C) or above
☐	☐	■	☐	**C.** Other (describe in the temperature chart and comments section below)

- Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.
- **NOTE**: **ALL** observations **MUST** be based on actual food product temperature measurements using a calibrated food temperature measuring device. **ALL** food product temperatures taken are to be recorded in the temperature chart on the data collection form. If **ONE** product is found to be out of temperature the appropriate information statement for that food product is marked **OUT** of Compliance.
- **NOTE:** Observations made of procedures where Time, is used as a Public Health Control as it pertains to TCS foods that would normally be held hot are to be recorded for information statement "14A". Do **NOT** record any product temperatures in the hot food product temperature log if it is the intention of the operation's management to use Time as a Public Health Control.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-501.16(A)(1)^{P}** **NOTE:** Do **NOT** assess hot holding of roasts as part of this information statement. Hot holding of roasts is assessed under information statement 7(B). **IN** – Mark IN when **ALL** product temperatures taken of TCS food that is being held hot are 135ºF or above. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of TCS food that is being held hot are below 135ºF, **NO** – Mark NO when the establishment does hot hold foods, but no foods are being held hot during the data collection. **NOTE:** Every attempt should be made to conduct the data collection during a time when hot holding temperatures can be taken. **NA** – Mark NA when the establishment does not hot hold food.
B	FOOD CODE REFERENCE: **3-501.16(A)(1)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of **ROASTS** that are being held hot are 130ºF or above. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of **ROASTS** that are being held hot are less than 130ºF., **AND** time is not used as a public health control. **NO** – Mark NO when the establishment hot holds cooked roasts, but no roasts are being held hot during the data collection. **NA** – Mark NA when the establishment does not prepare or serve roasts
C	Mark **IN / OUT** when a hot holding procedure or practice **IS** observed and not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for hot holding are observed. The **NO** marking is **NOT** used for the "Other" information statement.

7. Foods are cooled properly

IN	OUT	NO	NA	
☐	☐	☐	☐	**7. Foods are cooled properly**
IN	**OUT**	**NO**	**NA**	**Description of Cooling Temperature OBSERVATIONS**
☐	☐	☐	☐	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☐	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☐	**C.** Proper cooling methods / equipment are used
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

- Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.

- **NOTE:** Production documents, as well as statements from managers, the person-in-charge, and food employees regarding the time the cooling process was initiated, may be used to supplement actual observations. The data collector **MUST** make every effort to assess cooling processes in the early part of the data collection. If TCS foods are in the cooling process during the data collection visit, a **MINIMUM** of two food product time and temperature checks are to be obtained and recorded in the temperature chart provided on the data collection form. **Food Cooling Temperature #1** is the initial internal product temperature of a cooked TCS food OR TCS food prepared from ambient ingredients that is taken at the beginning, or near the beginning, of the establishment visit. **Food Cooling Temperature #2** is the internal product temperature of the cooked TCS food OR TCS food prepared from ambient ingredients that the data collector assessed near the end of the data collection. This second temperature reading is from the same TCS food observed cooling at the beginning of the data collection from which Food Cooling Temperature #1 was obtain. These two temperature measurements provide a method for assessing the cooling rate based on the elapsed time between the first and second temperature measurements.

- **NOTE:** The predictive modeling for cooling rates as presented in FDA's FD 218 Risk Based Inspection course can be used as a supplemental reference to determine compliance status for cooling observations. The predictive modeling guidance (included as Attachment E) is **NOT** to be used only in conjunction with quantitative temperature measurements but **MUST** be used as part of a holistic assessment of ALL information obtained during the data collection regarding the cooling process, equipment, methods, records, etc.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-501.14(A)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of cooked TCS foods that are being cooled meet the *Food Code* time-temperature critical limits of 135ºF to 70ºF within 2 hours **AND** from 135ºF to 41ºF or below within 6 hours **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of cooked TCS food that are being cooled do **NOT** meet the *Food Code* time-temperature critical limits of 135ºF to 70ºF within 2 hours **AND/OR** from 135ºF to 41ºF or below within 6 hours. **NOTE:** Quantitative measurements **MUST** be used in conjunction with an assessment of **ALL** information obtained during the data collection including cooling methods, equipment, records, and information provided by food management and food employees. **NO** – Mark NO when the establishment does cool cooked TCS foods, but no TCS foods are being cooled during the data collection. **NOTE:** Not Observed (NO) can also be marked when the data collector is uncertain, based on the time-temperature assessment conducted during the data collection, whether the cooked TCS food will cool within the appropriate time frames. **NOTE:** An IN or OUT marking of information statements C regarding cooling methods / equipment **CAN** still be recorded even though quantitative measurements fail to provide definitive information as to the cooling rate of the food. **NA** – Mark NA when the establishment does not cool cooked TCS food.
B	FOOD CODE REFERENCE: **3-501.14(B)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of TCS food prepared from ambient ingredients that are being cooled meet the *Food Code* time-temperature critical limits of reaching 41ºF or below within 4 hours. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of TCS food prepared from ambient ingredients that are being cooled do **NOT** meet the *Food Code* time-temperature critical limits of reaching 41ºF or below within 4 hours. **NOTE:** Quantitative measurements **MUST** be used in conjunction with an assessment of **ALL** information obtained during the data collection including cooling methods, equipment, records, and information provided by food management and food employees. **NO** – Mark NO when the establishment does cool TCS foods prepared from ambient ingredients, but no TCS food prepared from ambient ingredients are being cooled during the data collection. **NOTE:** Not Observed (NO) can also be marked when the data collector is uncertain, based on the time-temperature assessment conducted during the data collection, whether the TCS food prepared from ambient ingredients will cool within 4 hours. **NOTE:** An IN or OUT marking of information statements C cooling methods / equipment **CAN** still be recorded even though quantitative measurements fail to provide definitive information as to the cooling rate of the food. **NA** – Mark NA when the establishment does not cool TCS foods prepared from ambient ingredients.

INFO ITEM	MARKING INSTRUCTIONS
C	FOOD CODE REFERENCES: **3-501.15(A)^{Pf}(B)^{C}; 4-301.11^{Pf}** **IN** – Mark IN when the cooling process **IS** observed and the **METHODS / EQUIPMENT** (shallow pans; smaller thinner portions, ice baths, metal containers, ice as an ingredient, pre-chilled ingredients, blast chiller, tumble-chill unit, etc) facilitate the cooling of cooked / reheated foods or cooling TCS foods made from ambient ingredients. **OUT** – Mark OUT when the cooling process **IS** observed but the **METHODS** / **EQUIPMENT** do **NOT** facilitate the cooling of cooked / reheated foods or cooling TCS foods made from ambient ingredients. **NOTE:** An IN or OUT marking of information statement C regarding cooling methods / equipment **IS** to be recorded when the data collector has an opportunity observe the cooling methodology or process even though quantitative measurements fail to provide definitive information as to the cooling rate of the food. The data collectors may use statements from managers, the person-in-charge and food employees regarding cooling methods / equipment to supplement their actual observations. **NO** – Mark NO when the establishment does cool cooked / reheated foods or cools TCS foods made from ambient ingredients, but no TCS foods are being cooled during the data collection **NA** – Mark NA when the establishment does not cool cooked / reheated food or cool TCS food made from ambient ingredients.
D	Mark **IN / OUT** when a cooling procedure or practice **IS** observed and not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for the cooling of TCS foods are observed. The **NO** marking is **NOT** used for the "Other" information statement.

8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening

IN	OUT	NO	NA	
☐	☐	☐	☐	**8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening**
IN	**OUT**	**NO**	**NA**	**Description of Date Marking OBSERVATIONS**
☐	☐	☐	☐	**A.** Ready-to-eat, TCS Food (prepared on-site) held for more than 24 hours is date marked as required
☐	☐	☐	☐	**B.** Open commercial containers of prepared ready-to-eat TCS Food held for more than 24 hours are date marked as required
☐	☐	☐	☐	**C.** Ready-to-eat, TCS Food prepared on-site and/or opened commercial container exceeding 7 days at ≤ 41°F is discarded
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

opening

- Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.

- **NOTE:** If date marking applies to the establishment, the person-in-charge should be asked to describe the method(s) used to identify product shelf-life or "consume-by" dating. The data collector must be aware of food products that are listed as exempt from date marking.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-501.17(A)(C)(D)^{Pf}** **IN** – Mark IN when direct observations of food storage and handling practices verifies that there is a system in place for date marking all ready-to-eat TCS foods prepared on-site and held for more than 24 hours as specified in Section 3-501.17 of the *Food Code* **OUT** – Mark OUT when direct observations of food storage and handling practices indicates that there is **NOT** a system in place for date marking all ready-to-eat TCS foods prepared on site and held for more than 24 hours as specified in Section 3-501.17 of the *Food Code*, **OR** direct observations indicate that **ONE or MORE** ready-to-eat TCS foods prepared for more than 24 hours are **NOT** date marked. **NO** – Mark NO when the establishment does prepare ready-to-eat TCS foods that require date marking, but there are no foods requiring date marking being stored or processed at the time of the data collection. **NA** – Mark NA when there are no ready-to-eat TCS foods prepared on site that are held for more than 24 hours.

INFO ITEM	MARKING INSTRUCTIONS
B	FOOD CODE REFERENCE: **3-501.17(B – F)^{Pf}** **IN** – Mark IN when direct observations of food storage and handling practices verifies that there is a system in place for date marking all open commercial containers of ready-to-eat TCS foods held for more than 24 hours as specified in Section 3-501.17 of the *Food Code*. **OUT** – Mark OUT when direct observation of food storage and handling practices indicates that there is **NOT** a system in place for date marking all open commercial containers of ready-to-eat TCS foods held for more than 24 hours as specified in Section 3-501.17 of the Food Code, **OR** direct observations indicate that **ONE or MORE** open commercial containers of ready-to-eat TCS foods held for more than 24 hours are **NOT** date marked. **NO** – Mark NO when the establishment does serve ready-to-eat TCS foods from commercial containers, but no commercial containers of ready-to-eat foods are open and being held for more the 24 hours at the time of the data collection. **NA** – Mark NA when the establishment does not serve ready-to-eat foods from commercial containers.
C	FOOD CODE REFERENCES: **3-501.18(A)^{P}** **IN** – Mark IN when direct observations of food storage and handling practices verify that all ready-to-eat TCS foods or opened containers of RTE TCS Food are date marked as specified in Section 3-501.17 of the *Food Code* **AND/OR** are observed being discarded within date marked time limits. **OUT** – Mark OUT when direct observations of food storage and handling practices indicates that **ONE or MORE** ready-to-eat TCS foods or open containers of RTE TCS Food **EXCEEDS** the time limit as specified in Section 3-501.17 of the *Food Code*. **NO** – Mark NO when the establishment does serve ready-to-eat TCS food but there are no foods requiring date marking being stored or processed at the time of the data collection. **NA** – Mark NA when the establishment does not serve ready-to-eat TCS foods that are held for more than 24 hours.
D	Marked **IN / OUT** when a food procedure / practice related to date marking of ready-to-eat TCS foods held for more than 24 hours **IS** observed and not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food storage or handling practices to the ones presented in the previous information statements for date marking ready-to-eat TCS foods held for more than 24 hours are observed. The **NO** marking is **NOT** used for the "Other" information statement.

9. Raw animal foods are cooked to required temperatures

IN	OUT	NO	NA	
☐	☐	☐	☐	**9. Raw animal foods are cooked to required temperatures**
IN	**OUT**	**NO**	**NA**	**Description of Cooking Temperature OBSERVATIONS**
☐	☐	☐	☐	**A.** Raw shell eggs broken for immediate service are 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 17 seconds
☐	☐	☐	☐	**B.** Pork; Fish; Beef; Commercially-raised Game Animals are cooked to 145°F (63°C) for 15 seconds
☐	☐	☐	☐	**C.** Comminuted Fish, Meats, Commercially-raised Game Animals are cooked to 155°F (68°C) for 17 seconds
☐	☐	☐	☐	**D.** Poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratite; or stuffing containing fish, meat, poultry, or ratites; wild game animals are cooked to 165°F (74°C) instantaneous
☐	☐	☐	☐	**E.** Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as Chart specifies 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).***
☐	☐	☐	☐	**F.** Other Cooking Observations (describe in the Comment Section and Temperature Chart below)

- Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.

- **NOTE: ALL** observations **MUST** be based on actual final cook food product temperature measurements using a calibrated food temperature measuring device. **ALL** food product temperatures taken are to be recorded in the cooking temperature chart on the data collection form. If **ONE** product is found to be out of temperature, the information statement is marked **OUT** of Compliance based on the critical limit specified in the *Food Code* regardless of whether the establishment has a consumer advisory that contains both a disclosure and reminder. If the data collector observes an actual food product temperature that does **NOT** meet the specified critical limits in the *Food Code* (served undercooked) but the establishment has developed, and applies correctly, a consumer advisory for that food product, the actual food product temperature is marked OUT under this data item **AND** the data collector records the required information for the food product in the cooking temperature chart including checking the **YES** box under the consumer advisory.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCES: **3-401.11(A)(1)(a) and (A)(2)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of raw shell eggs broken for immediate service are cooked to 145ºF for 15 seconds, **AND/OR** broken but not prepared for immediate service, are cooked to 155ºF for 17 seconds**.** **NOTE:** This includes raw shell eggs that are used for baked goods / food products). **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of raw shell eggs broken for immediate service AND/OR broken but not prepared for immediate serve, do **NOT** achieve the final cooking critical limits required in the *Food Code*. **NOTE:** This includes raw shell eggs that are used for baked goods / food products). **NO** – Mark NO when the establishment does cook raw shell eggs, but none are cooked during the data collection. **NA** – Mark NA when the establishment does not cook raw shell eggs.
B	FOOD CODE REFERENCE: **3-401.11(A)(1)(b)^{P}; 3-401.11(C)(3)** **IN** – Mark IN when **ALL** product temperatures taken of Pork, or Fish, or Beef, or Commercially-raised Game Animals are cooked to the required *Food Code* critical limit of 145ºF for 15 seconds**. NOTE:** Mark this information statement **IN** if steaks from whole-muscle, intact beef are cooked on both the top and bottom to a surface temperature of 145ºF. or above. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of Pork, or Fish, or Beef, or Commercially-raised Game Animals do **NOT** achieve the final cooking critical limits of 145ºF for 15 seconds. **NOTE:** Mark this information statement **OUT** if steaks from whole-muscle, intact beef do NOT achieve the final cooking critical limits on both the top and bottom surfaces of 145ºF. or above. **NO** – Mark NO when the establishment does cook Pork, or Fish, or Beef, or Commercially-raised Game Animals but none are cooked during the data collection. **NA** – Mark NA when the establishment does not cook Pork, Fish, Beef, or Commercially-raised Game Animals.
C	FOOD CODE REFERENCES: **3-401.11(A)(2)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of **COMMINUTED** fish, or meat, or commercially raised game animals are cooked to the required *Food Code* critical limit of 155ºF for 17 seconds. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of **COMMINUTED** fish, or meat, or commercially raised game animals, do **NOT** achieve the final cooking critical limit of 155ºF for 17 seconds. **NO** – Mark NO when the establishment does cook **COMMINUTED** fish, or meat, or commercially raised game animals, but none are cooked during the data collection. **NA** – Mark NA when the establishment does not cook **COMMINUTED** fish, or meat, or commercially raised game animals.

INFO ITEM	MARKING INSTRUCTIONS
D	FOOD CODE REFERENCE: **3-401.11(A)(3)[P]** **IN** – Mark IN when **ALL** product temperatures taken of poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratites, or stuffing containing (fish; meat; poultry; or ratites), wild game animals are cooked to 165ºF instantaneous **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratites; or stuffing containing (fish; meat; poultry; or ratites), wild game animals do **NOT** achieve the final cooking critical limit of 165ºF instantaneous **NO** – Mark NO when the establishment does cook poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratites, or stuffing containing (fish; meat; poultry; or ratites), or wild game animals but none are cooked during the data collection. **NA** – Mark NA when the establishment does not cook poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratites, or stuffing containing (fish; meat; poultry; or ratites) or wild game animals.
E	FOOD CODE REFERENCE: **3-401.11(B)[P]** **IN** – Mark IN when **ALL** product temperatures taken of roasts, including formed roasts, are cooked to 130ºF for 112 minutes or as Chart specified and according to oven parameters per Chart contained in the *Food Code*. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of roasts, including formed roasts, do **NOT** achieve the final cooking time-temperature critical limits required in the *Food Code*. **NO** – Mark NO when the establishment does cook roasts, including formed roasts, but none are cooked during the data collection. **NA** – Mark NA when the establishment does not cook roasts, including formed roasts.
F	FOOD CODE REFERENCE: **3-401.14(D)[P]** Marked **IN / OUT** when a food procedure / practice related to cooking raw animal food **IS** observed and not accurately described in the previous information statements for this data item. **NOTE:** Observations of cooking temperature requirements for non-continuous cooking of raw animal foods as specified in Section 3-401.14(D) of the *Food Code* are marked under the "Other" information statement**. NOTE:** Change in 2013 Food Code final cook temperatures need to meet critical limits contained in Section 3-401.11 Raw Animal Foods. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NO** – Mark NO when establishment does non-continuous of raw animal foods, but it IS not being conducted at the time of the data collection. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for the cooking of raw animal foods are observed (including non-continuous cooking processes).

10. Cooked foods are reheated to required temperatures

IN	OUT	NO	NA	
☐	☐	☐	☐	**10. Cooked foods are reheated to required temperatures**
IN	**OUT**	**NO**	**NA**	**Description of Reheating Temperature OBSERVATIONS**
☐	☐	☐	☐	**A.** TCS Food that is cooked and cooled on premises is rapidly reheated to 165°F (74°C) for 15 seconds for hot holding
☐	☐	☐	☐	**B.** Commercially processed ready-to-eat food, reheated to 135°F (57°C) or above **for hot holding**
☐	☐	■	☐	**C.** Other Reheating Observations (describe in the Comments Section and Temperature Chart below)

- Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.
- **NOTE: ALL** observations **MUST** be based on actual final reheat product temperature measurements using a calibrated food temperature measuring device. **ALL** food product temperatures taken are to be recorded in the reheating temperature chart on the data collection form. If **ONE** product is found to be out of temperature, the information statement is marked **OUT** of Compliance based on the critical limit specified in the *Food Code.*

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **3-403.11(A)(D)p** **IN** – Mark IN when **ALL** product temperatures taken of reheated TCS food that is cooked and cooled on premise achieves 165ºF for 15 seconds within 2 hours for hot holding. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of reheated TCS food that is cooked and cooled on premise, do **NOT** achieve 165ºF for 15 seconds within 2 hours for hot holding. **NO** – Mark NO when the establishment does reheat for hot holding TCS food that is cooked and cooled on premise, but none are reheated during the data collection. **NA** – Mark NA when the establishment does not reheat for hot holding TCS food that is cooked and cooled on premise.

INFO ITEM	MARKING INSTRUCTIONS
B	FOOD CODE REFERENCE: **3-403.11(C)(D)^{P}** **IN** – Mark IN when **ALL** product temperatures taken of reheated commercially processed ready-to-eat foods from intact packaging achieves 135ºF for hot holding. **OUT** – Mark OUT when **ONE or MORE** product temperatures taken of reheated commercially processed ready-to-eat foods from intact packaging do **NOT** achieve 135ºF for hot holding within 2 hours for hot holding. **NO** – Mark NO when the establishment does reheat commercially processed ready-to-eat foods from intact packaging for hot holding, but none are reheated during the data collection. **NA** – Mark NA when the establishment does not reheat commercially processed ready-to-eat foods from intact packaging for hot holding.
C	Marked **IN / OUT** when a food procedure / practice related to reheating TCS foods **IS** observed and not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section for the data item. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for the reheating of TCS foods are observed. The **NO** marking is **NOT** used for the "Other" information statement.

Other Areas of Interest (Items 11-19)

NOTE: This section will be used to observe data items that are not part of the primary research area for Retail Food Risk Factor Study but may provide important information related to the primary 10 data items or that will assist other food safety initiatives within the agency.

11. Handwashing facilities are accessible and properly maintained

IN	OUT	NO	NA	
☐	☐			**11. Handwashing facilities are accessible and properly maintained**
IN	**OUT**	**NO**	**NA**	**Description of OBSERVATIONS of Handwashing Facilities**
☐	☐			**A.** Handwashing facilities conveniently located and accessible for employees
☐	☐			**B.** Handwashing facilities supplied with hand cleanser / disposable towels / hand drying devices

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statements.
- **NOTE:** This data item is specific to **ONLY** handwashing facilities. Observations of food employees' handwashing practices are to be marked under data item #1 – **Employees practice proper handwashing**.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **5-204.11[Pf] and 5-205.11(A)[Pf]** **IN** – Mark IN when **handwashing sinks** are convenient and accessible for use by food employees. **OUT** – Mark OUT when **ONE or MORE** handwashing sinks are **NOT** convenient and/or accessible for use by food employees. It is also marked OUT if handwashing facilities are blocked by portable equipment, or stacked full of dishes or other items, or the handwashing sink is unavailable for regular employee use. This information statement **CANNOT** be marked **NO or NA**.
B	FOOD CODE REFERENCES: **6-301.11[Pf] and 6-301.12[Pf]** **NOTE**: The presence of handwashing signage or waste receptacles is **NOT** part of the assessment of this information statement. **IN** – Mark IN when **handwashing sinks** are supplied with hand cleanser and disposable towels or hand drying devices as specified in the *Food Code*. **OUT** – Mark OUT when **ONE or MORE** handwashing sinks are **NOT** supplied with hand cleanser and/or disposable towels / hand drying devices as specified in the *Food Code*. This information statement **CANNOT** be marked **NO** or **NA**

13. Consumers are properly advised of risks of consuming raw or undercooked animal foods

IN	OUT	NO	NA	
☐	☐		☐	**13. Consumers are properly advised of risks of consuming raw or undercooked animal foods**

a. Data item 13 does not contain any information statements. The language in the data item is intended to be all encompassing of observations related to consumer advisories for animal foods that are served raw or undercooked
b. Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item.

MARKING INSTRUCTIONS

FOOD CODE REFERENCE: **3-603.11[Pf]**

IN – Mark IN when the establishment provides a consumer advisory that meets the disclosure and reminder requirements as specified in Section 3-603.11 of the *Food Code* for **ALL** animal foods, such as untreated eggs, beef,, meats, fish, lamb, milk, or poultry, or shellfish that are served raw or undercooked without otherwise being processed to eliminate pathogens either in ready-to-eat form or as an ingredient in ready-to-eat food.

OUT – Mark OUT when the establishment does **NOT** provide a consumer advisory **OR** provides a consumer advisory that does **NOT** meet the disclosure and reminder requirements as specified in Section 3-603.11 of the *Food Code* for **ONE or MORE** animal foods, such as eggs, beef, fish, lamb, milk, poultry, or shellfish that are served raw, undercooked, or without otherwise being processed to eliminate pathogens either in ready-to-eat form or as an ingredient in ready-to-eat food.

NO – This information statement **CANNOT** be marked NO.

NA – Mark NA when the establishment does **NOT** serve raw animal food or animal food that is **PARTIALLY COOKED or UNDERCOOKED**.

14. Time alone is properly used as a public health control

IN	OUT	NO	NA	
☐	☐	☐	☐	**14. Time alone is properly used as a public health control**
IN	**OUT**	**NO**	**NA**	**Description of Time as a public health control OBSERVATIONS**
☐	☐	☐	☐	**A.** When time only is used as a public health control for **4 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐	☐	☐	**B.** When time only is used as a public health control for **6 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐	■	☐	**C.** Other (describe in the comments section below)

c. Data collectors **CANNOT** select marking option that has been **BLACKED-OUT** for the above information statement.

d. **NOTE:** Marking this item **MUST** be based on direct observations, record review, discussion with food employee, and review of any standard operating procedures. This data item is only applicable if it is the actual intention or conscious decision by the person-in-charge / food employees to store TCS Food out of temperature control using time as a public health control, otherwise it should be addressed as a hot or cold holding observation.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCES: **3-501.19(A)^{Pf}(B)^{P}** **IN** – Mark IN when there is a **WRITTEN** procedure at the food establishment that identifies the types of food products that will be held using time only, describes the procedure for how time as a public health control will be implemented, and **ALL** food items marked or identified for time as a public health control **DO NOT EXCEED** the **4-HOUR** limit. **OUT** – Mark OUT when **ONE or MORE** food items marked or identified for time as a public health control **EXCEED** the **4-HOUR** limit. In addition, this information statement is marked **OUT** if the food is not marked or identified. This information statement is also marked **OUT** when **ALL** food items marked or identified for time as a public health control **DO NOT EXCEED the 4-HOUR** limit **BUT** there is **NO** written procedure OR the written procedure for using time only does **NOT** meet the requirements specified in Section 3-501.19 of the *Food Code*. **NO** – Mark NO when the establishment uses a **4-HOUR** time only critical limit as a public health control, but time as a public health control is not used during the data collection. **NA** – Mark NA when the establishment does not use a **4-HOUR** time only critical limit as a public health control.

INFO ITEM	MARKING INSTRUCTIONS
B	FOOD CODE REFERENCES: **3-501.19(A)^{Pf}(C)(1)^{P}(2)^{Pf}(3)^{Pf}(4)^{P}(5)^{P}** **IN** – Mark IN when there is a **WRITTEN** procedure at the food establishment that identifies the types of food products that will be held using time only, describes the procedure for how time as a public health control will be implemented, and **ALL** food items marked or identified for time as a public health control **DO NOT EXCEED** the **6-HOUR** limit. **OUT** – Mark OUT when **ONE or MORE** food items marked or identified for time as a public health control **EXCEED** the **6-HOUR** limit. In addition, this information statement is marked **OUT** if the food is not marked or identified. This information statement is also marked **OUT** when **ALL** food items marked or identified for time as a public health control **DO NOT EXCEED the 6-HOUR** limit **BUT** there is **NO** written procedure OR the written procedure for using time only does **NOT** meet the requirements specified in Section 3-501.19 of the *Food Code*. **NO** – Mark NO when the establishment uses a **6-HOUR** time only critical limit as a public health control, but time as a public health control is not used during the data collection. **NA** – Mark NA when the establishment does not use a **6-HOUR** time only critical limit as a public health control.
C	Marked **IN / OUT** when an observation pertaining to the use of time only as a public health control **IS** not accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the Comment section. **NA** – Mark NA when no additional food procedures or practices to the ones presented in the previous information statements for time only as a public health control are observed. The **NO** marking is **NOT** used for the "Other" information statement.

17. Food is received from safe sources

IN	OUT	NO	NA	
☐	☐			**17. Food is received from safe sources**
IN	**OUT**	**NO**	**NA**	**Description of FOOD SOURCE OBSERVATIONS**
☐	☐			**A.** All food is from regulated food processing plants / No home prepared/canned foods
☐	☐	☐	☐	**B.** Shellfish are from NSSP-listed sources. No recreationally caught shellfish are received/sold
☐	☐	☐		**C.** Food is protected from contamination during transportation/receiving
☐	☐	☐		**D.** TCS Food is received at a temperature of 41°F (5°C) or below OR according to Law
☐	☐			**E.** Food is safe and unadulterated
☐	☐	☐	☐	**F.** Shellstock tags/labels are retained for 90 days and filed in chronological order from the date the container is emptied
☐	☐	☐	☐	**G.** Written documentation of parasite destruction is maintained for 90 days for fish products
☐	☐		☐	**H.** Other (*describe in Comments Section below*)

a. Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statements.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCES: **3-201.11^{P,Pf}; 3-201.12^{P}; 3-201.13^{P}; 3-201.14^{P}; 3-202.12^{P}; 3-202.13^{P}; 3-202.14^{P}; 3-202.110$^{P, Pf}$; 5-101.13^{P}** **IN** – Mark IN when direct observations determine that food is obtained from approved food sources. A review of supplier names, shipment invoices, buyer specifications, proof of regulatory permit/licensure of food source, etc., can be used to document approved food sources. Milk and milk products comply with Grade A Standards. **OUT** – Mark OUT when direct observations determine that food is **NOT** obtained from approved food sources OR milk and milk products do **NOT** comply with Grade A Standards. This information statement **CANNOT** be marked **NO or NA**.
B	FOOD CODE REFERENCE: **3-201.15^{P}** **IN** – Mark IN when direct observations determine that molluscan shellfish are obtained from approved food sources. A review of the ICSSL listed sources, molluscan shellfish tags, supplier's names, shipment invoices, proof of regulatory permit/licensure of food source, buyer specification, etc., can be used to determine approved food source. **OUT** – Mark OUT when direct observations determine that molluscan shellfish are **NOT** obtained from approved food sources. **NO** – Mark NO when molluscan shellfish are sold periodically in the establishment but are not being sold at the time of the data collection. **NA** – Mark NA when molluscan shellfish are not used/offered as a menu item within the establishment.

INFO ITEM	MARKING INSTRUCTIONS
C	FOOD CODE REFERENCES: **3-101.11^{P}; 3-202.15^{Pf}** **NOTE:** This information statement is specific to observations made of food as it is received from the supplier **IN** – Mark IN when direct observations determine that food is protected from environmental contamination during transport and receiving. Observations can be based on the integrity of product packaging and/or an assessment of the environmental conditions within transportation vehicles at the time of receipt. **OUT** – Mark OUT when direct observations determine that food is **NOT** protected from environmental contamination during transport and receiving. **NO** – Mark NO when food is not received by the establishment during the data collection This information statement **CANNOT** be marked **NA**
D	FOOD CODE REFERENCE: **3-202.11$^{P, Pf}$** **NOTE:** This information statement **MUST** be based on actual food product temperature measurements of TCS food being **RECEIVED**. **IN** – Mark IN when direct observations of actual food product temperature measurements determine that food is **RECEIVED** at proper temperatures during the data collection. **OUT** – Mark OUT when direct observations of actual food product temperature measurements determine that **ONE or MORE** food products are **NOT RECEIVED** at proper temperature. **NO** – Mark NO if food is not received during the data collection. This information statement **CANNOT** be marked **NA**
E	FOOD CODE REFERENCE: **3-101.11^{P}** **NOTE:** This information statement applies to observations of the wholesomeness of food from receiving through service and is **NOT** restricted to only receiving of foods. **IN** – Mark IN when direct observations determine that all food products are wholesome AND/OR show no signs of adulteration. **OUT** – Mark OUT when direct observations determine that food products are **NOT** wholesome AND/OR indicate signs of adulteration. This information statement **CANNOT** be marked **NO or NA**.

INFO ITEM	MARKING INSTRUCTIONS
F	FOOD CODE REFERENCES: **3-202.18(A)^{Pf}; 3-203.12^{Pf}** **IN** – Mark IN when direct observations of shellstock tags indicates that ALL required information as specified in Section 3-202.18 of the *Food Code* is present and shellstock tags are retained for 90 days and filed in chronological order and in conformance with Section 3-203.12 of the *Food Code*. **OUT** – Mark OUT when no shellstock tags are available for shellfish used or sold in the establishment within the past 90 days AND/OR the information on the shellstock tags does **NOT** contain the required information as specified in Section 3-202.18 of the *Food Code*. In addition, the information statement is marked OUT if the establishment is not in compliance with Section 3-203.12 of the *Food Code* OR there is evidence indicates commingling of shellstock. **NO** – Mark NO when shellstock are sold periodically in the establishment but are not being sold at the time of the data collection and have not been sold or used within the establishment within the past 90 days. **NA** – Mark NA when shellstock are not used/sold in the establishment.
G	FOOD CODE REFERENCES: **3-402.11^{P}; 3-402.12^{Pf}** **IN** – Mark IN when direct observations determine that fish products intended for raw or undercooked consumption have been frozen in accordance with the time and temperature requirements specified in Section 3-402.11 of the *Food Code*. Observations are to be supported by documentation from the supplier identifying that fish sold as raw, raw marinated, or undercooked is frozen by the supplier for parasite destruction AND/OR there are records maintained by the permit holder documenting the time and temperature critical limits when fish are frozen at the establishment. **OUT** – Mark OUT when direct observations determine that **ONE or MORE** fish products intended for raw or undercooked consumption have **NOT** been frozen in accordance with the time and temperature requirement specified in Section 3-402.11 of the *Food Code* OR **no** documentation is available at the time of the data collection verifying that fish sold as raw, raw marinated, or undercooked has been frozen for parasite destruction. **NO** – Mark NO if fish products intended for raw or undercooked consumption are sold periodically in the establishment but are not being sold or used at the time of the data collection. **NA** – Mark NA if fish products intended for raw or undercooked consumption are not sold or used in the establishment.
H	Marked **IN / OUT** when an observation pertaining to an approved food source **IS NOT** accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section. **NA** – Mark NA when no additional observations to the ones presented in the previous information statements are noted for approved food sources. The **NO** marking is **NOT** used for the "Other" information statement.

19. Management and food employees are trained in food allergy awareness as it relates to their assigned duties

IN	OUT	NO	NA	
☐	☐			**19. Management and food employees are trained in food allergy awareness as it relates to their assigned duties**
IN	**OUT**	**NO**	**NA**	**Description of Allergen Awareness OBSERVATIONS**
☐	☐			**A.** The person in charge accurately describes foods identified as major food allergens and the symptoms associated with major food allergens
☐	☐			**B.** Food employees are trained in food allergy awareness as it relates to their assigned duties
☐	☐			**C.** Other (describe in the comments section below)

- Data collectors **CANNOT** select marking options that have been **BLACKED-OUT** for the above data item and information statements.
- **NOTE**: Data collector should be aware of the 8 major food allergens including: Milk; Egg; Fish (such as bass, flounder, or cod); Crustacean shellfish (such as crab, lobster, or shrimp); Tree nuts (such as almonds, pecans, or walnuts): Wheat; Peanuts; and Soybeans
- **NOTE**: Data collector should be aware of the symptoms associated with a food allergic response including hives or other itchy rashes; nausea; abdominal pain; vomiting and/or diarrhea; wheezing; shortness of breath; and swelling of various parts of the body. In severe cases, anaphylactic shock and death may result.

INFO ITEM	MARKING INSTRUCTIONS
A	FOOD CODE REFERENCE: **2-102.11(C)(9)[Pf]** **IN** – Mark IN when the person-in-charge provides responses to questions that demonstrate knowledge of the 8 major food allergens and symptoms associated with the major food allergens. **OUT** – Mark OUT when the person-in-charge does **NOT** provide responses to questions that demonstrate knowledge of the 8 major food allergens and symptoms associated with the major food allergens This information statement **CANNOT** be marked **NO or NA**.
B	FOOD CODE REFERENCE: **2-103.11(N)[Pf]** **IN** – Mark IN when the person-in-charge provides a description of the food employee allergen training program that covers the 8 major allergens as they related to the employees' assigned duties and symptoms associated with the major food allergens. The training program can be verbal or written. **OUT** – Mark OUT when a food employee allergen training program is **NOT** provided or does **NOT** address food allergy awareness as it related to food employees assigned duties. This information statement **CANNOT** be marked **NO or NA**.
C	Marked **IN / OUT** when an observation pertaining to food allergy awareness **IS NOT** accurately described in the previous information statements for this data item. If the "Other" information statement is marked IN or OUT, the data collector **MUST** provide a description of the observation in the "Comment" section. **NA** – Mark NA when no additional observations to the ones presented in the previous information statements are noted for food allergy awareness. The **NO** marking is **NOT** used for the "Other" information statement.

V. Food Code Reference Sheet

Use the document below for a quick reference to food code citations.

1. Employees practice proper handwashing (Deleted Reference to Info Statement 1C)	
Info Statement	**Food Code Reference(s)**
A	2-301.12^{P} – Cleaning Procedure
B	2-301.14(A-I)^{P} – When to Wash

2. Employees do not contact ready-to-eat foods with bare hands
Food Code Reference(s)
3-301.11(B)^{P} – Preventing Contamination from Hands

3. Food is protected from cross-contamination during storage, preparation, and display	
Info Statement	**Food Code Reference(s)**
A	3-302.11(A)(1)^{P} – Packaged and Unpackaged Food – Separation, Packaging, and Segregation
B	3-302.11(A)(2)^{P} – Packaged and Unpackaged Food – Separation, Packaging, and Segregation
C	3-302.11(A)(4-8)^{C} – Packaged and Unpackaged Food – Separation, Packaging, and Segregation 3-304.11(B)^{P} – Food Contact with Equipment and Utensils 3-304.15(A)^{P} – Gloves, Use Limitation 3-306.13(A)^{P} – Consumer Self-Service Operations
D	3-302.11(A)(4-8)^{C} – Packaged and Unpackaged Food – Separation, Packaging, and Segregation 3-304.11(B)^{P} – Food Contact with Equipment and Utensils 3-304.15(A)^{P} – Gloves, Use Limitation 3-306.11^{P} – Food Display 3-306.12(A)^{C} – Condiments, Protection 3-306.13(A)^{P} – Consumer Self-Service Operations
E	*Other **Priority Item** as Identified by Data Collector*

4. Food contact surfaces are properly cleaned and sanitized

Info Statement	Food Code Reference(s)
A	**NOTE:** Specific to observations of cleaned and sanitized food contact dishware, utensils, cookware that have been stored and that are considered ready-for-use. 4-601.11(A)^{Pf}(B)^{C} – Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils 4-602.11$^{P\&C}$ – Equipment Food-Contact Surfaces and Utensils 4-602.12^{C} – Cooking and Baking Equipment 4-702.11^{P} – Before Use After Cleaning
B	**NOTE**: Specific to observations of food contact surfaces and utensils as part of a manual warewashing or clean-in-place procedure 4-303.11^{PF} – Cleaning Agents and Sanitizers, Availability (*as it applies to observations of manual warewashing or clean-in-place procedures*) 4-501.111^{P} – Manual Warewashing Equipment, Hot Water Sanitization Temperatures 4-501.114^{P} – Manual and Mechanical Warewashing Equipment, Chemical Sanitization – Temperature, pH, Concentration, and Hardness 4-501.115^{C} – Manual Warewashing Equipment, Chemical Sanitization Using Detergent-Sanitizers 4-703.11(A), (B), and (C)^{P} – Hot Water and Chemical
C	**NOTE:** Specific to observations of food contact surfaces and utensils as part of a mechanical warewashing procedure 4-303.11^{PF} – Cleaning Agents and Sanitizers, Availability (*as it applies to observations of mechanical warewashing or procedures*) 4-501.113^{C} – Mechanical Warewashing Equipment, Sanitization Pressure 4-501.114^{P} – Manual and Mechanical Warewashing Equipment, Chemical Sanitization – Temperature, pH, Concentration, and Hardness 4-703.11(B) and (C)^{P} – Hot Water and Chemical
D	*Other **Priority Item** as Identified by Data Collector*

5. Foods requiring refrigeration are held at the proper temperature

Info Statement	Food Code Reference(s)
A	3-501.16(A)(2)^{P} – Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding
B	3-501.16(B)^{P} – Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding
C	*Other **Priority Item** as Identified by Data Collector*

6. Foods displayed or stored hot are held at the proper temperature

Info Statement	Food Code Reference(s)
A	3-501.16(A)(1)^{P} – Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding
B	3-501.16(A)(1)^{P} – Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding
C	*Other **Priority Item** as Identified by Data Collector*

7. Foods are cooled properly

Info Statement	Food Code Reference(s)
A	3-501.14(A)^{P} – Cooling
B	3-501.14(B)^{P} – Cooling
C	3-501.15(A)^{PF} and (B)^{C} – Cooling Methods; 4-301.11^{Pf} – Cooling, Heating, and Holding Capacities
D	*Other **Priority Item** as Identified by Data Collector*

8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening

Info Statement	Food Code Reference(s)
A	3-501.17(A)(C)(D)(E)^{Pf} – Ready-to-Eat, Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking
B	3-501.17(A – F)^{Pf} – Ready-to-Eat, Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking
C	3-501.18(A)^{P} – Ready-to-Eat, Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition
D	*Other **Priority Item** as Identified by Data Collector*

9. Raw animal foods are cooked to required temperatures

Info Statement	Food Code Reference(s)
A	3-401.11(A)(1)(a) and (A)(2)^{P} – Raw Animal Foods
B	3-401.11(A)(1)(b)^{P} and 3-401.11(C)(3) – Raw Animal Foods
C	3-401.11(A)(2)^{P} – Raw Animal Foods
D	3-401.11(A)(3)^{P} – Raw Animal Foods
E	3-401.11(B)^{P} – Raw Animal Foods
F	*Other **Priority Item** as Identified by Data Collector* **NOTE:** Observations of actual final temperatures pertaining to non-continuous cooking of raw animal foods as specified in Section 3-401.14(D) of the Food Code are recorded as part of the "Other" information statement.

10. Cooked foods are reheated to required temperatures

Info Statement	Food Code Reference(s)
A	3-403.11(A)(D)^{P} – Reheating for Hot Holding
B	3-403.11(C)(D)^{P} – Reheating for Hot Holding
C	*Other **Priority Item** as Identified by Data Collector*

11. Handwashing facilities are accessible and properly maintained

Info Statement	Food Code Reference(s)
A	5-204.11^{Pf} – Handwashing Sinks 5-205.11(A)^{Pf} – Using a Handwashing Sink
B	6-301.11^{Pf} – Handwashing Cleanser, Availability 6-301.12^{PF} – Hand Drying Provision

13. Consumers are properly advised of risks of consuming raw or undercooked animal foods

Food Code Reference(s)
3-603.11^{Pf} – Consumption of Animal Food that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens

14. Time alone is properly used as a public health control

Info Statement	Food Code Reference(s)
A	3-501.19(A)^{Pf}(B)^{P} – Time as a Public Health Control
B	3-501.19(A)^{Pf}(C)(1)^{P}(2)^{Pf}(3)^{Pf}(4)^{P}(5)^{P} – Time as a Public Health Control
C	*Other **Priority Item** as Identified by Data Collector*

17. Food is received from safe sources

Info Statement	Food Code Reference(s)
A	3-201.11^{P,Pf} – Compliance with Food Law 3-201.12^{P} – Food in Hermetically Sealed Container 3-201.13^{P} – Fluid Milk and Milk Products 3-201.14^{P} – Fish 3-202.12^{P} – Additives 3-202.13^{P} – Eggs 3-202.14^{P} – Eggs and Milk Products, Pasteurized 3-202.110^{P,Pf} – Juice Treated 5-101.11^{P} – Approved System 5-101.13^{P} – Bottled Drinking Water
B	3-201.15^{P} – Molluscan Shellfish
C	3-101.11^{P} – Safe, Unadulterated, and Honestly Presented 3-202.15^{Pf} – Package Integrity
D	3-202.11^{P,Pf} – Temperature
E	3-101.11^{P} – Safe, Unadulterated and Honestly Presented
F	3-202.18(A)^{Pf} – Shellstock Identification 3-203.12^{Pf} – Shellstock, Maintaining Identification
G	3-402.11^{P} – Parasite Destruction 3-402.12^{Pf} – Records, Creation and Retention
H	*Other **Priority Item** as Identified by Data Collector*

19. Management and food employees are trained in food allergy awareness as it relates to their assigned duties	
Info Statement	**Food Code Reference(s)**
A	2-102.11(C)(9)^{Pf} – Demonstration
B	2-103.11(N)^{Pf} – Person in Charge
C	*Other **Priority Item** as Identified by Data Collector*

Attachment A: Elements to Consider When Conducting Cooling Assessments and Using Predictive Modeling to Supplement Actual Observations

OVERVIEW

Assessing cooling of cooked foods or foods prepared from ambient ingredients can pose challenges to the data collector due to the significant period of time needed to determine compliance with *Food Code* time/temperature critical limits. In addition, all or a significant portion of the cooling process may occur outside the tradition work hours during which the data collections are conducted.

An evaluation of cooling methods, processes, equipment, production documents / records, as well as statements from managers, the person-in-charge, and food employees regarding the time the cooling process was initiated, may be used to supplement quantitative temperature measurements used to determine cooling rates. The data collection has been designed so that it provides an opportunity to collect information specific to quantitative cooling temperature measures (information statements A and B in the table below), and/or cooling methods / equipment (information statement C in the table below).

IN	OUT	NO	NA	
☐	☐	☐	☐	**7. Foods are cooled properly**
IN	**OUT**	**NO**	**NA**	**Description of Cooling Temperature OBSERVATIONS**
☐	☐	☐	☐	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☐	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☐	**C.** Proper cooling methods / equipment are used
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

DETERMINING COOLING PROCESSES

The data collector MUST make every effort to assess cooling processes in the early part of the data collection. Always ask the question at the beginning of every data collection, “Do you have any leftovers from last night (if an AM inspection) or are you cooling anything that was prepared this morning (if a PM inspection)?”

During your quick walk-through, open the walk-in coolers and reach-in units and note large deep containers of TCS foods. Note the size, depth, and type (metal/plastic) of containers being used for cooling. Note the consistency of the product (i.e., broth vs. thick stew/chili).

After your quick walk through, during which you have determined what is going on in this facility and set your priorities for the data collection, go to the walk-in cooler (or other equipment) where the foods are being held. Before taking any temperatures ask the manager when the containers were placed in the cooler.

ASSESSING COOLING METHODS / EQUIPMENT

In the ideal world, a data collector would be able to correlate observations of cooling methods / equipment with actual quantitative temperature measurements of the foods being cooled. This may not always be the case. Situations may arise when the establishment initiates a cooling process late in the data collection visit so that obtaining temperature measurements over a period of time to assess cooling rates is not feasible. Another example may be an observation of a food product that has just completed a cooling process, but the operator maintains and has documented by cooling times / temperatures in a log.

Ask the operator to explain the cooling process used for the products. This will tell you whether they in fact added ice or used chill sticks, a blast chiller, or ice bath in the cooling process. In situations where obtaining quantitative measurements of the cooling process is not feasible, the data collector is to assess the cooling methods / equipment and make a determination as to whether they are in keeping with best practices that are generally known to facilitate a cooling process. While the information statements 7A and 7B noted in the table on the previous page would be marked not observed because no quantitative measurements were taken, the data collector can mark information statement 7C (IN or OUT), based on observations made and information obtained regarding cooling methods / equipment used.

QUANTITATIVE TEMPERATURE ASSESSMENTS OF COOLING RATES

If TCS foods are in the cooling process during the data collection visit, a **MINIMUM** of two food product time and temperature checks are to be obtained and recorded in the temperature chart provided on the data collection form for data item **7 – Foods are cooled properly**. **Food Cooling Temperature #1** is the initial internal product temperature of a cooked TCS food or TCS food prepared from ambient ingredients that is taken at the beginning, or near the beginning of the data collection. **Food Cooling Temperature #2** is the internal product temperature of the cooked TCS food or TCS food prepared from ambient ingredients that the data collector assessed near the end of the data collection. This second temperature reading is from the same TCS food observed cooling at the beginning of the data collection from which Food Cooling Temperature #1 was obtained. These two temperature measurements provide a method for assessing the cooling rate based on the elapsed time between the first and second temperature measurements. The data collector can use predictive modeling as described in the next section as a tool to assist with making a determination as to whether the cooling process is IN or OUT of compliance.

USE OF PREDICTIVE MODELING AS A TOOL TO ASSESS COOLING RATES

For the purposes of the Study, the data collector can use predictive modeling as presented in this section as a tool for determining whether a cooling process that cannot be completed during the data collection visit will achieve the prescribed *Food Code* critical limits. The application of predictive modeling to actual quantitative measurements should be used to determine both cooling procedures that are IN compliance as well as those that are OUT of compliance.

The data collector is expected to use predictive modeling as only one of the elements in their holistic approach to determining the compliance status for cooling. It should be placed in the context with all other observations and information received pertaining to cooling methods, procedures, equipment, and quantitative temperature measurements.

The use of predictive modeling requires that the data collector take actual temperature and time measurements of the TCS food product being cooled. Statements from the food employees as to time and/or temperatures of

the product when it began the cooling process should not be used for predictive modeling if they were not verified by the data collector.

TCS food must be cooled from 135 to 41ºF in 6 hours and from 135 to 70ºF within the first 2 hours. The estimates that follow assume the worst case IN compliance scenario, a full 2 hours to cool from 135 to 70ºF and the remaining 4 hours to cool to 41ºF. Use of rapid chill techniques (like chill sticks, ice baths, pre-chilled ingredients) can accelerate the rate of cooling.

To successfully cool form 135 to 70ºF within two hours, the food must be cooled at a rate of approximately 0.54ºF per minute (135 – 70 = 65ºF total divided by 120 minutes = 0.54ºF per minute) or ˜32ºF per hour. To successfully cool from 70 to 41ºF within the remaining four hours, the food must be cooled at a rate to approximately 0.12ºF per minute (70 – 41 = 29ºF total divided by 240 minutes = 0.12ºF per minute) or ˜7ºF per hour. Depicted graphically, the cooling curve would normally produce a quick drop in temperature from 135 to 70ºF and a more gradual, extended loss of temperature as the core food temperature approaches the temperature of the cold holding / cold equipment.

Example of IN Compliance Determination Using Predictive Modeling

Early in the data collection, vegetable beef soup is observed stored to a depth of two inches in a shallow pan in the walk-in cooler. The walk-in cooler is maintaining an ambient air temperature of 36ºF and there is decent air flow being produced by the compressor unit. The person-in-charge indicates that the soup was put in the cooler 30 minutes ago after being cooked in the kettle along the production line. At 11:00AM the internal temperature of the soup is taken while it is cooling in the walk-in cooler and the warmest part is reading 128ºF. Later in the data collection, 12:30PM, a second temperature is taken of the soup and the internal temperature is recorded at 76ºF.

In this example, the vegetable beef soup is cooling at a rate of 0.58ºF per minute (128 – 76 = 52 ÷ 90 = 0.577). This cooling rate is faster than the 0.54ºF per minute rate required for cooling a product from 135 - 70ºF in the 2 hours presented in our conservative predictive model. Though the data collector does not know the exact time the vegetable soup reached 135ºF, using a holistic approach to assessing cooling along with the use of predictive modeling provides a solid foundation for marking information statement 7A IN compliance with the Food Code critical limit of 135 - 70ºF in 2 hours.

Example of OUT of Compliance Determination Using Predictive Modeling

Early in the data collection chili is observed stored to a depth of three inches in shallow pan in the walk-in cooler. The walk-in cooler is maintaining an ambient air temperature of 41ºF and there is decent air flow being produced by the compressor unit. The person-in-charge indicates that the chili was put in the cooler 30 minutes ago after being cooked in the kettle along the production line. At 11:00AM the internal temperature of the chili is taken while cooling in the walk-in cooler and the warmest part is reading 132ºF. Later in the data collection, 12:30 PM, a second temperature is taken of the chili and the internal temperature is recorded at 100ºF.

In this example, the chili is cooling at a rate of ˜0.35ºF per minute (132 – 100 = 32 ÷ 90 = 0.355). This cooling rate is significantly slower than the 0.54ºF per minute rate required for cooling a product from 135 - 70ºF in the 2 hours presented in our conservative predictive model. The chili would have to cool another 30 degrees in 30 minutes (1ºF per minute). The 1ºF per minute cooling rate is significantly faster than the 0.54ºF per minute rate used in our predictive modeling. Cooling rates that strictly rely on the ambient temperature and air flow within a refrigeration unit will slow down, not increase, as the food product proceeds through the cooling process. Though the data collector does not know the exact time the vegetable soup reached 135ºF, using a holistic

approach to assessing cooling along with the use of predictive modeling, a solid foundation of information has been obtained for marking information statement 7A OUT of compliance with the *Food Code* critical limit of 135 - 70ºF in 2 hours

ASSESSING COOLING OF LEFTOVERS/PREPARED PRODUCTS FROM THE PREVIOUS DAY

During the data collection, the person-in-charge or other food employees may indicate that some food product requiring cooling were placed in one or more refrigeration units earlier in the day or the night before. After your quick walk-through, go to the walk-in cooler (or other equipment) where the foods are being held. Have the manager/food employee point out the foods he/she was referring to. Before taking any temperatures, determine whether the foods in question are TCS foods and ask the manager/food employee when the containers were placed in the cooler. As with the previous cooling assessment guidance, note the size, depth and type (metal/plastic) of the containers being used for cooling and note the consistency of the product (broth versus thick stew/chili).

Take the temperature of the product by inserting your thermocouple probe in the four corners and center of the product. Note the temperatures and time on your list of observations. Especially note any differences of temperature. Food that is in the process of cooling will usually be cooler around the edges and warmer in the middle. This is an indication that the food is still cooling rather than being cold held.

Note the ambient temperature of the unit and take some temperatures of food products (TCS or not) that you know have been in the unit for a few days. This will provide an indication of the refrigeration unit's capabilities, as well as provide additional confirmation that certain products are being cooled versus being cold held. For example, if the temperature of a product is around 44ºF, yet all the other products in the unit are 39ºF and the unit itself is 39ºF, then the product found at 44ºF is probably being cooled especially if there are temperature difference in the container (as described in the previous paragraph).

Once it has been determined that products are in the process of cooling, ask the manager/food employee to explain the cooling process/methods for these products. This will provide information as to whether a rapid cooling technique such as, adding ice to the product, using an ice bath, placing the product in a blast chiller, etc., was an integral part of the cooling process. In some cases, when one of these rapid chill techniques is used, proper cooling may not be achieved if the product has been placed in deep containers before it has attained an internal product temperature of 41ºF.

The data collector is to use all the information obtained from the manager / food employees to supplement their observations of cooling methods and quantitative temperature measurements to determine IN and OUT markings. In many cases, food placed in the walk-in from the night before will still provide an opportunity to assess cooling rates based on predictive modeling. For example, if the temperature of the food is taken at the beginning of the inspection and it is 52ºF and two hours later it is 50ºF, the food is cooling at a rate of .022 / per minute which is significantly slower than 0.12 cooling rate (70ºF - 41ºF in 4hours) used in the predictive modeling. Based on all the information obtained regarding the cooling method, this type of quantitative assessment adds important confirmation to the cooling assessment. Information statement 7A would be marked OUT in this scenario.

MECKLENBURG COUNTY
RETAIL FOOD STORE DATA COLLECTION FORM

INDUSTRY SEGMENT			
Food Safety Management System Risk Factor Category:			
Industry Segment:	☐ **Restaurant** ☐ **Health Care** ☐ **Schools** ☐ **Retail Food Store**	**Facility Type:**	☐ **Full-Service or** ☐ **Fast Food** ☐ **Hospital or** ☐ **Nursing Home** ☐ **K-12** ☐ **Deli or** ☐ **Seafood or** ☐ **Produce**

DATA COLLECTION INFORMATION		
Date:	**Data Collector:**	
Time In:	**Time Out:**	**Total Time in Minutes:**
Risk Categorization: ☐ **2** ☐ **3** ☐ **4**		

ESTABLISHMENT INFORMATION			
Establishment Name:			
Street Address:			
City:	**State: North Carolina**	**Zip:**	**County: Mecklenburg**
Maximum Number of Employees Per Shift:		**Number of Employees Present at Time of Visit:**	
Activity level at the time of visit (*Select ONE*): ☐ **Light** ☐ **Moderate** ☐ **Heavy**			
Average Number of Meals Per Day:		**Seating Capacity:**	

ESTABLISHMENTS THAT ARE PART OF MULTI-UNIT OPERATIONS
Establishment is part of a Multi-Unit Operation: ☐ **YES** ☐ **NO**
Number of Individual Units that are part of the Multi-Unit Operation *(Enter the number of units provided by the person in charge)*:
Ownership of Establishment *(Select **ONE** of the following)*: ☐ **Company-Owned** ☐ **Franchise** ☐ **Unsure**
If Franchise – number of units owned by the franchisee *(Enter the number of units provided by the person in charge)*:

MECKLENBURG COUNTY
RETAIL FOOD STORE DATA COLLECTION FORM
Risk Factor – Poor Personal Hygiene (Items 1&2)

IN	OUT	NO	NA	
☐	☐			**1. Employees practice proper handwashing**

IN	OUT	NO	NA	Description of HANDWASHING OBSERVATIONS
☐	☐			A. Hands are cleaned and properly washed using hand cleanser / water supply / appropriate drying methods / length of time as specified in Section 2-301.12 of the *Food Code*
☐	☐			B. Hands are cleaned and washed when required as specified in Section 2-301.14 of the *Food Code*

COMMENTS:

HANDWASHING FREQUENCY ASSESSMENT

	C1 Employee observed washing hands properly and when required	C2 Employee observed washing hands improperly	C3 Employee observed failing to wash hand when required
TOTAL COUNT			

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐			**2. Food employees do not contact ready-to-eat foods with bare hands**

COMMENTS:

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

Risk Factor – Contaminated Equipment / Protection from Contamination (Items 3&4)

IN	OUT	NO	NA	
☐	☐			**3. Food is protected from cross-contamination during storage, preparation, and display**

IN	OUT	NO	NA	Description of FOOD Contamination OBSERVATIONS
☐	☐	☐	☐	**A.** Raw animal foods are separated from ready-to-eat foods
☐	☐	☐	☐	**B.** Different raw animal foods are separated from each other
☐	☐			**C.** Food is protected from environmental contamination – actual contamination observed
☐	☐			**D.** Food is protected from environmental contamination – potential contamination
☐	☐		☐	**E.** Other (*describe in the comments section below)*

COMMENTS:

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	**COMMENTS:**	☐	1	**COMMENTS:**	☐	1	**COMMENTS:**
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐			**4. Food contact surfaces are properly cleaned and sanitized**

IN	OUT	NO	NA	Description of Food Contact Surfaces OBSERVATIONS
☐	☐			**A.** Food contact surfaces and utensils are clean to sight and touch and sanitized before use
☐	☐	☐	☐	**B.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using manual warewashing procedures
☐	☐	☐	☐	**C.** Equipment food contact surfaces and utensils are cleaned and sanitized properly using mechanical warewashing equipment
☐	☐		☐	**D.** Other (*describe in the comments section below)*

COMMENTS:

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	**COMMENTS:**	☐	1	**COMMENTS:**	☐	1	**COMMENTS:**
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

MECKLENBURG COUNTY
RETAIL FOOD STORE DATA COLLECTION FORM
Risk Factor – Improper Holding / Time and Temperature Risk (Items 5-8)

IN	OUT	NO	NA	
☐	☐			**5. Foods requiring refrigeration are held at the proper temperature**

IN	OUT	NO	NA	Description of Cold Holding Temperature OBSERVATIONS
☐	☐			**A.** TCS Food is maintained at 41°F (5°C) or below, except during preparation, cooking, cooling, or when time is used as a public health control
☐	☐	☐	☐	**B.** Raw shell eggs are stored under refrigeration that maintains ambient air temperature of 45ºF (7ºC) or less
☐	☐		☐	**C.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Cold Holding Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF COLD HOLDING EQUIPMENT	FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF COLD HOLDING EQUIPMENT
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COLD HOLDING PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** above *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** above *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** above *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** above *Food Code* critical limits

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	**COMMENTS:**	☐	1	**COMMENTS:**	☐	1	**COMMENTS:**
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐	☐	☐	**6. Foods displayed or stored hot are held at the proper temperature**

IN	OUT	NO	NA	Description of Hot Holding Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** TCS Food is maintained at 135°F (57°C) or above, except during preparation, cooking, cooling, or when time is used as a public health control.
☐	☐	☐	☐	**B.** Roasts are held at a temperature of 130°F (54°C) or above
☐	☐	☐	☐	**C.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Hot Holding Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF HOT HOLDING EQUIPMENT	FOOD PRODUCT	FOOD TEMP.	*FOOD CODE* CRITICAL LIMIT	TYPE OF HOT HOLDING EQUIPMENT
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One
			Choose One				Choose One

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY HOT HOLDING PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	**COMMENTS:**	☐	1	**COMMENTS:**	☐	1	**COMMENTS:**
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐	☐	.☐	**7. Foods are cooled properly**

IN	OUT	NO	NA	Description of Cooling Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** Cooked TCS Food is cooled from 135°F (57°C) to 70°F (21°C) within 2 hours **and** from 135°F (57°C) to 41°F (5°C) or below within 6 hours
☐	☐	☐	☐	**B.** TCS Food (prepared from ingredients at ambient temperature) is cooled to 41°F (5°C) or below within 4 hours
☐	☐	☐	☐	**C.** Proper cooling methods / equipment are used
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

COMMENTS:

Cooling Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FOOD COOLING TEMP. #1	FOOD COOLING TEMP. #2	TOTAL TIME IN MINUTES	*FOOD CODE* CRITICAL LIMIT	TYPE OF EQUIPMENT USED TO COOL FOOD
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one
				Choose one	Choose one

FOOD SAFTEY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐	☐	☐	**8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening**

IN	OUT	NO	NA	Description of Date Marking OBSERVATIONS
☐	☐	☐	☐	**A.** Ready-to-eat, TCS Food (prepared on-site) held for more than 24 hours is date marked as required
☐	☐	☐	☐	**B.** Open commercial containers of prepared ready-to-eat TCS Food held for more than 24 hours are date marked as required
☐	☐	☐	☐	**C.** Ready-to-eat, TCS Food prepared on-site and/or opened commercial container exceeding 7 days at ≤ 41°F is discarded
☐	☐	■	☐	**D.** Other (describe in the temperature chart and comments section below)

COMMENTS:

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

Risk Factor – Inadequate Cooking (Items 9&10)

IN	OUT	NO	NA	
☐	☐	☐	☐	**9. Raw animal foods are cooked to required temperatures**

IN	OUT	NO	NA	Description of Cooking Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** Raw shell eggs broken for immediate service are 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 17 seconds
☐	☐	☐	☐	**B.** Pork; Fish; Beef; Commercially raised Game Animals are cooked to 145°F (63°C) for 15 seconds
☐	☐	☐	☐	**C.** Comminuted Fish, Meats, Commercially raised Game Animals are cooked to 155°F (68°C) for 17 seconds
☐	☐	☐	☐	**D.** Poultry; stuffed fish; stuffed meat; stuffed pasta; stuffed poultry; stuffed ratite; or stuffing containing fish, meat, poultry, or ratites; wild game animals are cooked to 165°F (74°C) instantaneously
☐	☐	☐	☐	**E.** Roasts, including formed roasts, are cooked to 130°F (54°C) for 112 minutes or as Chart specifies 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).***
☐	☐	☐	☐	**F.** Other Cooking Observations (describe in the Comment Section and Temperature Chart below)

COMMENTS:

Cooking Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FINAL COOK TEMP.	*FOOD CODE* CRITICAL LIMIT	CONSUMER ADVISORY		FOOD PRODUCT	FINAL COOK TEMP.	*FOOD CODE* CRITICAL LIMIT	CONSUMER ADVISORY	
			YES	NO				YES	NO
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐
			☐	☐				☐	☐

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COOKING FOOD PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**	☐	**1**	**COMMENTS:**
☐	**2**		☐	**2**		☐	**2**	
☐	**3**		☐	**3**		☐	**3**	
☐	**4**		☐	**4**		☐	**4**	
☐	**NA**		☐	**NA**		☐	**NA**	

IN	OUT	NO	NA	
☐	☐	☐	☐	**10. Cooked foods are reheated to required temperatures**

IN	OUT	NO	NA	Description of Reheating Temperature OBSERVATIONS
☐	☐	☐	☐	**A.** TCS Food that is cooked and cooled on premises is rapidly reheated to 165°F (74°C) for 15 seconds for hot holding
☐	☐	☐	☐	**B.** Commercially processed ready-to-eat food, reheated to 135°F (57°C) or above **for hot holding**
☐	☐	■	☐	**C.** Other Reheating Observations (describe in the Comments Section and Temperature Chart below)

COMMENTS:

Reheating Temperatures Recorded During the Data Collection (List all temperatures taken)

FOOD PRODUCT	FINAL REHEAT TEMP.	*FOOD CODE* CRITICAL LIMIT	FOOD PRODUCT	FINAL REHEAT TEMP.	*FOOD CODE* CRITICAL LIMIT

NUMBER OF FOOD PRODUCT TEMPERATURES	SUMMARY COOKING FOOD PRODUCT TEMPERATURE CATEGORIES
	I. – Number of product temperature measurements **IN** Compliance with *Food Code* critical limits
	II. – Number of **OUT** of Compliance product temperature measurements **1ºF - 2ºF** below *Food Code* critical limits
	III. – Number of **OUT** of Compliance product temperature measurements **3ºF - 4ºF** below *Food Code* critical limits
	IV. – Number of **OUT** of Compliance product temperature measurements **5ºF - 9ºF** below *Food Code* critical limits
	V. – Number of **OUT** of Compliance product temperature measurements **10ºF or more** below *Food Code* critical limits

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDURES			TRAINING			MONITORING		
☐	1	**COMMENTS:**	☐	1	**COMMENTS:**	☐	1	**COMMENTS:**
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

IN	OUT	NO	NA	
☐	☐			**11. Handwashing facilities are accessible and properly maintained**
IN	**OUT**	**NO**	**NA**	**Description of OBSERVATIONS of Handwashing Facilities**
☐	☐			**A.** Handwashing facilities are conveniently located and accessible for employees
☐	☐			**B.** Handwashing facilities are supplied with hand cleanser / disposable towels / hand drying devices

COMMENTS:

IN	OUT	NO	NA	
☐	☐		☐	**13. Consumers are properly advised of risks of consuming raw or undercooked animal foods**

COMMENTS:

IN	OUT	NO	NA	
☐	☐	☐	☐	**14. Time alone is properly used as a public health control**
IN	**OUT**	**NO**	**NA**	**Description of Time as a public health control OBSERVATIONS**
☐	☐	☐	☐	**A.** When time only is used as a public health control for **4 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐	☐	☐	**B.** When time only is used as a public health control for **6 HOURS**, the food establishment follows procedures to serve or discard food as specified in Section 3-501.19 of the *Food Code*
☐	☐		☐	**C.** Other (describe in the comments section below)

COMMENTS:

IN	OUT	NO	NA	
☐	☐			**17. Food is received from safe sources**
IN	**OUT**	**NO**	**NA**	**Description of FOOD SOURCE OBSERVATIONS**
☐	☐			**A.** All food is from regulated food processing plants / No home prepared/canned foods
☐	☐	☐	☐	**B.** Shellfish are from NSSP-listed sources. No recreationally caught shellfish are received/sold
☐	☐	☐		**C.** Food is protected from contamination during transportation/receiving
☐	☐	☐		**D.** TCS Food is received at a temperature of 41°F (5ºC) or below OR according to Law
☐	☐			**E.** Food is safe and unadulterated
☐	☐	☐	☐	**F.** Shellstock tags/labels are retained for 90 days and filed in chronological order from the date the container is emptied
☐	☐	☐	☐	**G.** Written documentation of parasite destruction is maintained for 90 days for fish products
☐	☐		☐	**H.** Other (*describe in Comments Section below*)
COMMENTS:				

IN	OUT	NO	NA	
☐	☐			**19. Management and food employees are trained in food allergy awareness as it relates to their assigned duties**
IN	**OUT**	**NO**	**NA**	**Description of Allergen Awareness OBSERVATIONS**
☐	☐			**A.** The person in charge accurately describes foods identified as major food allergens and the symptoms associated with major food allergens
☐	☐			**B.** Food employees are trained in food allergy awareness as it relates to their assigned duties
☐	☐		☐	**C.** Other (describe in the comments section below)
COMMENTS:				

Risk Factor Checklist

Food Safety Management System: ____	**Facility Type: _____**	**Risk Category: _____**
Date:	**Time In: _____ Time Out:_____**	**PIC name: _____**
Name: _____	**Address: _____**	**Seating capacity: _____**
Activity Level: **☐ light ☐ moderate ☐ heavy**	**Max # employees per shift: _____** **Number now: _____**	**Average # of Meal Per Day: _____**
Multi-unit operation? ☐ Y ☐ N Number of Units: ____	**☐ Company-Owned ☐ Franchise ☐ Unsure**	

Item #	Description	Comments
1 A	Handwashing - how (using soap, water, towels, length of time adequate)?	
1B	Handwashing – when they should? Note if correction needed	

HANDWASHING FREQUENCY ASSESSMENT			
	C1 **Employee observed washing hands properly and when required**	**C2** **Employee observed washing hands improperly**	**C3** **Employee observed failing to wash hand when required**
TOTAL COUNT			

Item #	Description	Comments
2	Bare hand contact?	

Item #	Description	Comments
3 A	Raw animal food separated from RTE food?	
3 B	Raw animal food separated from each other?	
3 C	Food protected from actual environmental contamination?	
3 D	Food protected from potential environmental contamination?	

Item #	Description	Comments
4 A	Food contact surfaces clean to sight and touch and sanitized? – check items stored as clean Frequency?	
4 B	Manual warewashing successful as observed?	
4 C	Mechanical warewashing successful as observed?	

Item #	Description	Comments USE CHART
5 A	TCS foods COLD holding at or below 41F?	
5 B	Raw shell eggs are stored in cooler with ambient temp of 45F or below?	

Item #	Description	Comments USE CHART
6 A	TCS foods HOT holding at or above 135F?	
6 B	Roasts held at or above 130F?	

Item #	Description	Comments USE CHART
7 A	COOLING 135 to 70 w/I 2 hours AND 70 to 41 w/I 4 additional hours?	
7 B	COOLING of AMBIENT foods to 41 w/I 4 hours?	
7 C	Proper cooling methods and equipment being used?	

Item #	Description	Comments
8 A	Date marking RTE/TCS foods post 24 hours?	
8 B	Dating open commercial containers of RTE foods post 24 hours?	
8 C	RTE TCS foods and/or commercial open foods discarded/used within 7 days?	

Item #	Description	Comments USE CHART
9 A	Raw shell eggs cooked to 145F or 155F?	
9 B	Pork, fish, beef, game to 145F?	
9 C	Comminuted fish, meats, game to 155F?	
9 D	Poultry, stuffed fish, stuffed meat, stuffed pasta, stuffed ratite, or stuffing w/ protein to 165F?	
9 E	Roasts to 130F for 112 minutes or per chart?	

Item #	Description	Comments
10 A	REHEATING TCS foods cooked and cooled on premises rapidly reheated to 165F for hot holding?	
10 B	REHEATING commercially processed RTE foods reheated to 135F for hot holding?	

Item #	Description	Comments
11 A	Handwashing facilities conveniently located and accessible?	
11 B	Handwashing facilities supplied with soap, towels?	

Item #	Description	Comments
13	Consumer advisory for anything if needed?	

Item #	Description	Comments
14 A	TPHC for 4 hours used properly?	
14 B	TPHC for 6 hours used properly	

Item #	Description	Comments
17 A	All food from approved sources, no home-canned or home prepared foods?	
17 B	Shellfish from approved source? No recreationally caught shellfish?	
17 C	Food protected from contamination during transportation/receiving?	
17 D	TCS food received at or below 41F or according to law?	
17 E	Food safe and unadulterated?	
17 F	Shellstock tags retained 90 days and filed correctly?	

Item #	Description	Comments
19 A	PIC can describe major allergens and symptoms	
19 B	Employees are trained in food allergy awareness as it relates to duties	

COLD HOLDING							
Food	**Temp**	**Critical limit**	**Type of eqpt**	**Food**	**Temp**	**Critical limit**	**Type of eqpt**

Standardized Cold Holding/Acronym:		
Cold Plate **(CP)**	Reach-in Refrigeration **(RIN)**	Refrigerated Open Top Make Table **(TOP)**
Container of Food on Ice **(ICE)**	Refrigerated Display Case **(RDC)**	Refrigerated Salad Bar **(SB)**
Ice on Food	Refrigerated Drawer **(RD)**	Walk in Refrigerator **(WI)**
Other Type of Equipment (Use sparingly, if used explain with detailed comments)		

HOT HOLDING							
Food	**Temp**	**Critical limit**	**Type of eqpt**	**Food**	**Temp**	**Critical Limit**	**Type of Eqpt**

Standardized Hot Holding/Acronym:		
Bain-Marie **(BM)**	Convection Oven **(CVO)**	Heated Drawer **(HD)**
Chafing Dish with Sternos **(CD)**	Heat Lamps **(HL)**	Hot Holding Box or Cabinet/Proofing Cabinet **(HHC)**
Combitherm Oven **(CBO)**	Heat Shelf (**HS)**	Rice Cooker **(RC)**
Steam Table/Well **(SW)**	Stove/Griddle Top **(ST)**	N/A
Other Type of Equipment (Use sparingly, if used explain with detailed comments)		

COOLING					
Food	Temp #1	Temp #2	Time minutes	Critical Limit	Type of Eqpt

Blast Chiller **(BC)**	Cold Running Water **(CRW)**	No Equipment **(product cooling at room temp)**
Ice Wands ONLY **(IW)**	Ice Bath ONLY **(IB)**	Ice Bath and Ice Wand **(IBIW)**
Ice Added to Product **(IAP)**	Reach -in Freezer **(RIF)**	Reach -in Refrigerator **(RIN)**
Walk-in Freezer **(WIF)**	Walk-in Refrigerator **(WI)**	**Other Type of Equipment if used explain with detailed comments**

COOKING							
Food	Final Cook	Critical Limit	Consumer Advisory YES or NO?	Food	Final Cook	Critical Limit	Consumer Advisory?

How to Evaluate FSMS Procedures, Training, and Monitoring

FSMS Risk Factors	
1 – Poor Personal Hygiene • Data Item #1 – Employees practice proper handwashing • Data Item #2 – Employees do not contact ready-to-eat foods with bare hands	**3 – Improper Holding / Time and Temperature** • Data Item #5 – Foods requiring refrigeration are held at the proper temperature • Data Item #6 – Foods displayed or stored hot are held at the proper temperature • Data Item #7 – Foods are cooled properly • Data Item #8 – Refrigerated, ready-to-eats foods are properly date marked and discarded within days of preparation or opening
2 – Protection from Contamination / Contaminated Equip. • Data Item #3 – Food is protected from cross-contamination during storage, preparation, and display • Data Item #4 – Food contact surfaces are properly cleaned and sanitized	**4 – Inadequate Cooking / Reheating** • Data Item #9 – Raw animal foods are cooked to required temperatures • Data Item #10 – Cooked foods are reheated to required temperatures

1. **Non-Existent** – No system in place or haphazardly implemented (no defined structure or frequency for implementation). If the number of "**YES" responses is "0" or "1", mark the data collection form "1"** for that management system (Procedures, Training, or Monitoring) element.
2. **Underdeveloped** – System is in early development. Efforts are being made, but there are crucial gaps in completeness and/or consistency. If the number of **"YES" responses is "2", mark the data collection form "2"** for that management system (Procedures, Training, or Monitoring) element.
3. **Well Developed** – System is complete, consistent and oral or a combination of oral and written. The preponderance of the management system is oral. If the number of **"YES" responses is "3", mark the data collection form "3"** for that management system (Procedures, Training, or Monitoring) element.
4. **Well Developed and Documented** – System is complete, consistent and primarily written. The preponderance of the management system is written. This is the goal for all establishments. If the number of **"YES" responses is "4", mark the data collection form "4"** for that management system (Procedures, Training, or Monitoring) element.

FOOD SAFETY MANAGEMENT SYSTEM ASSESSMENT

PROCEDUREs			TRAINING			MONITORING		
☐	1	COMMENTS:	☐	1	COMMENTS:	☐	1	COMMENTS:
☐	2		☐	2		☐	2	
☐	3		☐	3		☐	3	
☐	4		☐	4		☐	4	
☐	NA		☐	NA		☐	NA	

Procedures	
Yes	**No**
PIC can describe critical limits	PIC is not able to describe critical limits
PIC can describe how and when are critical limits are monitored	PIC can't describe how and when are critical limits are monitored
PIC can identify who ensures procedures are followed	PIC can't identify who ensures procedures are followed
PIC can produce written materials	PIC can't produce written materials; Materials may be verbal

Training	
Yes	**No**
PIC can confirm that training includes critical limits.	PIC is not able to describe critical limits
PIC can describe the method and process for training on critical limits and procedures.	PIC can't describe the method and process for training on critical limits and procedures.
PIC can identify who is assigned to train food employees	PIC can't identify who is assigned to train food employees
PIC can produce written materials	PIC can't produce written materials; Materials may be verbal

Monitoring	
Yes	**No**
PIC can confirm that critical limits are being monitored.	PIC is not able to describe critical limits
PIC can describe the method of monitoring of critical limits	PIC can't describe the method of monitoring of critical limits
PIC can identify who is assigned to monitor food employees or processes. PIC can describe corrective actions.	PIC can't identify who is assigned to monitor food employees or processes. PIC can describe corrective actions.
PIC can produce written materials	PIC cannot produce written materials; Materials may be verbal

Temperature Chart

COLD HOLDING							
Food	**Temp**	**Critical limit**	**Type of eqpt**	**Food**	**Temp**	**Critical limit**	**Type of eqpt**

Standardized Cold Holding/Acronym:		
Cold Plate **(CP)**	Reach-in Refrigeration **(RIN)**	Refrigerated Open Top Make Table **(TOP)**
Container of Food on Ice **(ICE)**	Refrigerated Display Case **(RDC)**	Refrigerated Salad Bar **(SB)**
Ice on Food	Refrigerated Drawer **(RD)**	Walk in Refrigerator **(WI)**
Other Type of Equipment (Use sparingly, if used explain with detailed comments)		

HOT HOLDING							
Food	**Temp**	**Critical limit**	**Type of eqpt**	**Food**	**Temp**	**Critical Limit**	**Type of Eqpt**

Standardized Hot Holding/Acronym:		
Bain-Marie **(BM)**	Convection Oven **(CVO)**	Heated Drawer **(HD)**
Chafing Dish with Sternos **(CD)**	Heat Lamps **(HL)**	Hot Holding Box or Cabinet/Proofing Cabinet **(HHC)**
Combitherm Oven **(CBO)**	Heat Shelf (**HS)**	Rice Cooker **(RC)**
Steam Table/Well **(SW)**	Stove/Griddle Top **(ST)**	N/A
Other Type of Equipment (Use sparingly, if used explain with detailed comments)		

COOLING					
Food	Temp #1	Temp #2	Time minutes	Critical Limit	Type of Eqpt

Blast Chiller **(BC)**	Cold Running Water **(CRW)**	No Equipment **(product cooling at room temp)**
Ice Wands ONLY **(IW)**	Ice Bath ONLY **(IB)**	Ice Bath and Ice Wand **(IBIW)**
Ice Added to Product **(IAP)**	Reach -in Freezer **(RIF)**	Reach -in Refrigerator **(RIN)**
Walk-in Freezer **(WIF)**	Walk-in Refrigerator **(WI)**	**Other Type of Equipment if used explain with detailed comments**

COOKING							
Food	Final Cook	Critical Limit	Consumer Advisory YES or NO?	Food	Final Cook	Critical Limit	Consumer Advisory?

Attachment A: Instructions for Conducting the Food Safety Management System Assessment (Poor Personal Hygiene Risk Factor)

If the Poor Personal Hygiene risk factor has been randomly selected within a facility for conducting a food safety management system assessment, the data collector will complete a separate Procedure; Training; and Monitoring (PTM) assessment for the following two data items from the data collection form:

Poor Personal Hygiene Risk Factor
1. Employees practice proper handwashing
2. Food employees do not contact ready-to-eat foods with bare hands

The data collector should complete the assessment tools provided at the end of these instructions prior to marking the rating scale 1 – 4 on the data collection form for each of three food safety management system assessment areas (Procedures; Training; Monitoring).

Using the Food Safety Management System Assessment Tool

For each of the two data items listed above, the data collector will individually assess each of the three food safety management system elements (Procedures, Training, and Monitoring).

Using an effective interview process the data collector will solicit sufficient information from the PIC to respond "YES" or "NO" to the four statements listed under each of the PTM elements.

NOTE: Data collectors are strongly encouraged to use a conversational approach to obtain information from the person in charge on their food safety management system rather than using the tool to drive questions in the order the statements appear.

Using the information gathered from the interview, the data collector will answer each of the first three statements under the food safety management system element (PTM) either "YES" or "NO". Each of the three statements is to be answered independently of one another.

For example, the person in charge describes handwashing procedures that include critical limits that do not meet minimum requirements for controlling hazards of concern. However, the PIC is able to provide a sound management structure for how and when handwashing is done in the facility and who is responsible for following the procedures. Under the procedures section, therefore, the data collector would record NO for statement #1 related to critical limits but YES to statements #2 (how and when) and #3 (who is assigned to correctly perform the procedure).

After marking the first three statements, the data collector will review the responses. If ALL three statements are marked "YES", the data collector will then mark a response "YES" or "NO" to the last question in the shaded row. The fourth question in the shaded row is designed to assess whether there are written materials available to support the PTM element.

If any of the first three statements have been marked "NO" the data collector does not enter a response for the shaded statement. The first three statements MUST be marked "YES" for the data collector to enter a response for the fourth statement.

Using the Results of the Assessment Tool to Rate PTM on the Data Collection Form

Using the Assessment Tool, the data collector will add up the total number of YES responses for each of the management system elements (PTM). The number of "YES" responses on the assessment tool will determine how to mark the Procedures, Training, and Monitoring sections for the data item on the data collection form.

- If the number of **"YES" responses is "0" or "1",** mark the **data collection form "1"** for that management system (PTM) element;
- If the number of **"YES" responses is "2",** mark the data collection form **"2"** for that management system (PTM) element;
- If the number of **"YES" responses is "3"**, mark the data collection form **"3"** for that management system (PTM) element; and
- IF the number of **"YES"** responses is **"4",** mark the data collection form **"4"** for that management System (PTM) element.

In the "COMMENT" section of the data collection form, provide a description of any scenarios that presented some challenges to assigning a 1-4 marking for a management system (PTM) element.

HANDWASHING

PROCEDURES	YES	NO
Management is able to describe the critical limits for handwashing as they apply to their establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that are performed to ensure that the identified critical limits for handwashing are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform the handwashing procedure (for handwashing – reference to a system-wide policy for all employees is acceptable).	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their handwashing procedure within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for handwashing are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for proper handwashing.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees to wash their hands properly and when appropriate.	☐	☐
Management is able to produce written materials (PP Presentations; handouts; course books or policy manuals; reminder cards; wall charts, etc.) that are used to support their food safety training for handwashing within their establishment.	☐	☐
DATA COLLECTION NOTES:		

HANDWASHING

MONITORING	YES	NO
Management is able to confirm that the critical limits for handwashing are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) monitoring of handwashing procedures is conducted to confirm whether food employees are washing their hands properly and when they should.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor handwashing within the facility. In addition, management is able to describe the corrective actions food employees will take when handwashing is not conducted when it should or when hands are not washed properly.	☐	☐
Management is able to produce written forms / records / logs / checklists / etc., used to document the findings from monitoring food employee's handwashing within their establishment.	☐	☐
DATA COLLECTION NOTES:		

NO BARE HAND CONTACT WITH RTE FOOD

PROCEDURES	YES	NO
Management is able to describe the critical limits for no bare hand contact with ready-to-eat food that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that are performed by food employees to ensure that the identified critical limits for no bare hand contact with ready-to-eat food are achieved	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform the procedures to ensure no bare hand contact with ready-to-eat food (for no bare hand contact with ready-to-eat food – reference to a system-wide policy for all employees is acceptable)	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards, etc.) that support the implementation of their policy for no bare hand contact with ready-to-eat within their establishment,	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for no bare hand contact with ready-to-eat food are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures specific to no bare hand contact with ready-to-eat food.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on procedures for no bare hand contact with ready-to-eat food.	☐	☐
Management is able to produce written materials (PP Presentations; handouts; course books or policy manuals; reminder cards; wall charts, etc.) that are used to support their food safety training for no bare hand contact with ready-to-eat food within their establishment.	☐	☐
DATA COLLECTION NOTES:		

NO BARE HAND CONTACT WITH RTE FOOD

MONITORING	YES	NO
Management is able to confirm that the critical limits for no bare hand contact with ready-to-eat food are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedure for no bare hand contact with ready-to-eat food to confirm whether food employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor no bare hand contact with ready-to-eat food within the facility. In addition, management is able to describe the corrective actions food employees will take when bare hand contact with ready-to-eat food is observed.	☐	☐
Management is able to produce written forms / records / logs /checklists / etc., used to document the findings from monitoring procedure for no bare hand contact with ready-to-eat food within their establishment.	☐	☐

DATA COLLECTION NOTES:

Attachment B: Instructions for Conducting the Food Safety Management System Assessment (Contaminated Equipment / Protection from Contamination Risk Factor)

If the Contaminated Equipment / Protecting from Contamination risk factor has been randomly selected within a facility for conducting a food safety management system assessment, the data collector will complete a separate Procedure; Training; and Monitoring (PTM) assessment for the following two data items from the data collection form:

Contaminated Equipment / Protection from Contamination Risk Factor
3. Food is protected from cross-contamination during storage, preparation, and display
4. Food contact surfaces are properly cleaned and sanitized

The data collector should complete the assessment tools provided at the end of these instructions prior to marking the rating scale 1 – 4 on the data collection form for each of three food safety management system assessment areas (Procedures; Training; Monitoring).

Using the Food Safety Management System Assessment Tool

For each of the two data items listed above, the data collector will individually assess each of the three food safety management system elements (Procedures, Training, and Monitoring).

Using an effective interview process the data collector will solicit sufficient information from the PIC to respond "YES" or "NO" to the four statements listed under each of the PTM elements.

NOTE: Data collectors are strongly encouraged to use a conversational approach to obtain information from the person in charge on their food safety management system rather than using the tool to drive questions in the order the statements appear.

Using the information gathered from the interview, the data collector will answer each of the first three statements under the food safety management system element (PTM) either "YES" or "NO". Each of the three statements is to be answered independently of one another.

For example, the person in charge describes cleaning and sanitizing procedures that include sanitizer concentrations (critical limits) that do not meet minimum requirements for controlling hazards of concern. However, the PIC is able to provide a sound management structure for how and when food contact surfaces are cleaned and sanitized in the facility and who is responsible for following the procedures. Under the procedures section, therefore, the data collector would record NO for statement #1 related to critical limits but YES to statements #2 (how and when) and #3 (who is assigned to correctly perform the procedure).

After marking the first three statements, the data collector will review the responses. If ALL three statements are marked "YES", the data collector will then mark a response "YES" or "NO" to the last question in the

shaded row. The fourth question in the shaded row is designed to assess whether there are written materials available to support the PTM element.
If any of the first three statements have been marked "NO" the data collector does not enter a response for the shaded statement. The first three statements MUST be marked "YES" for the data collector to enter a response for the fourth statement.

Using the Results of the Assessment Tool to Rate PTM on the Data Collection Form

Using the Assessment Tool, the data collector will add up the total number of YES responses for each of the management system elements (PTM). The number of "YES" responses on the assessment tool will determine how to mark the Procedures, Training, and Monitoring sections for the data item on the data collection form.

- If the number of **"YES" responses is "0" or "1",** mark the **data collection form "1"** for that management system (PTM) element;
- If the number of **"YES" responses is "2",** mark the data collection form **"2"** for that management system (PTM) element;
- If the number of **"YES" responses is "3"**, mark the data collection form **"3"** for that management system (PTM) element; and
- IF the number of **"YES"** responses is **"4",** mark the data collection form **"4"** for that management System (PTM) element.

In the "COMMENT" section of the data collection form, provide a description of any scenarios that presented some challenges to assigning a 1-4 marking for a management system (PTM) element.

FOOD IS PROTECTED FROM CROSS CONTAMINATION

PROCEDURES	YES	NO
Management is able to describe the critical limits for protecting food from contamination that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for protecting food from contamination are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures to ensure food is protected from contamination.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their procedure for ensuring food is protected from contamination within their establishment.	☐	☐

DATA COLLECTION NOTES:

TRAINING	YES	NO
Management is able to confirm that the critical limits for protecting food from contamination are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for protecting food from contamination.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on how to protect food from contamination.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts, etc.) that are used to support their food safety training for protecting food from contamination within their establishment.	☐	☐

DATA COLLECTION NOTES:

FOOD IS PROTECTED FROM CROSS CONTAMINATION

MONITORING	YES	NO
Management is able to confirm that the critical limits for protection food from contamination are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring food to ensure it is protected from contamination to confirm that food employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for protecting food from contamination within the facility. In addition, management is able to describe the corrective actions food employees will take when food is not properly protected from contamination.	☐	☐
Management is able to produce written forms / records / logs / checklists / etc., used to document findings from monitoring procedures for protection food from contamination within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOOD CONTACT SURFACES – CLEANED & SANITIZED

PROCEDURES	YES	NO
Management is able to describe the critical limits for cleaning and sanitizing food contact surfaces that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for cleaning and sanitizing food contact surfaces are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform cleaning and sanitizing procedures for food contact surfaces.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of cleaning and sanitizing procedures for food contact surfaces within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for cleaning and sanitizing food contact surfaces are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for cleaning and sanitizing food contact surfaces.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on how to clean and sanitize food contact surfaces.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts; etc.) that are used to support their food safety training for cleaning and sanitizing food contact surfaces within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOOD CONTACT SURFACES – CLEANED & SANITIZED

MONITORING	YES	NO
Management is able to confirm that the critical limits for cleaning and sanitizing food contact surfaces are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring cleaning and sanitizing procedures for food contact surfaces to confirm that employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor cleaning and sanitizing procedures for food contact surfaces within the facility. In addition, management is able to describe the corrective actions food employees will take when food contact surfaces are not cleaned and sanitized properly.	☐	☐
Management is able to produce written forms / records / logs / checklists / etc., used to document the findings from monitoring procedures for cleaning and sanitizing food contact surfaces within their establishment.	☐	☐

DATA COLLECTION NOTES:

Attachment C: Instructions for Conducting the Food Safety Management System Assessment (Improper Holding / Time & Temperature Risk Factor)

If the Improper Holding / Time & Temperature risk factor has been randomly selected within a facility for conducting a food safety management system assessment, the data collector will complete a separate Procedure; Training; and Monitoring (PTM) assessment for the following four data items from the data collection form:

Improper Holding / Time & Temperature Risk Factor
5. Foods requiring refrigeration are held at the proper temperature
6. Foods displayed or stored hot are held at the proper temperature
7. Foods are cooled properly
8. Refrigerated, ready-to-eat foods are properly date marked and discarded within 7 days of preparation or opening

The data collector should complete the assessment tools provided at the end of these instructions prior to marking the rating scale 1 – 4 on the data collection form for each of three food safety management system assessment areas (Procedures; Training; Monitoring).

Using the Food Safety Management System Assessment Tool

For each of the two data items listed above, the data collector will individually assess each of the three food safety management system elements (Procedures, Training, and Monitoring).

Using an effective interview process the data collector will solicit sufficient information from the PIC to respond "YES" or "NO" to the four statements listed under each of the PTM elements.

NOTE: Data collectors are strongly encouraged to use a conversational approach to obtain information from the person in charge on their food safety management system rather than using the tool to drive questions in the order the statements appear.

Using the information gathered from the interview, the data collector will answer each of the first three statements under the food safety management system element (PTM) either "YES" or "NO". Each of the three statements is to be answered independently of one another.

For example, the person in charge describes cooling procedures that include critical limits that do not meet minimum requirements for controlling hazards of concern. However, the PIC is able to provide a sound management structure for how and when cooling is done in the facility and who is responsible for following the procedures. Under the procedures section, therefore, the data collector would record NO for statement #1 related to critical limits but YES to statements #2 (how and when) and #3 (who is assigned to correctly perform the procedure).

After marking the first three statements, the data collector will review the responses. If ALL three statements are marked "YES", the data collector will then mark a response "YES" or "NO" to the last question in the

shaded row. The fourth question in the shaded row is designed to assess whether there are written materials available to support the PTM element.

If any of the first three statements have been marked "NO" the data collector does not enter a response for the shaded statement. The first three statements MUST be marked "YES" for the data collector to enter a response for the fourth statement.

Using the Results of the Assessment Tool to Rate PTM on the Data Collection Form

Using the Assessment Tool, the data collector will add up the total number of YES responses for each of the management system elements (PTM). The number of "YES" responses on the assessment tool will determine how to mark the Procedures, Training, and Monitoring sections for the data item on the data collection form.

- If the number of **"YES" responses is "0" or "1",** mark the **data collection form "1"** for that management system (PTM) element;
- If the number of **"YES" responses is "2",** mark the data collection form **"2"** for that management system (PTM) element;
- If the number of **"YES" responses is "3"**, mark the data collection form **"3"** for that management system (PTM) element; and
- IF the number of **"YES"** responses is **"4",** mark the data collection form **"4"** for that management System (PTM) element.

In the "COMMENT" section of the data collection form, provide a description of any scenarios that presented some challenges to assigning a 1-4 marking for a management system (PTM) element.

FOODS REQUIRING REFRIGERATION – PROPER TEMP.

PROCEDURES	YES	NO
Management is able to describe the critical limits for holding foods requiring refrigeration at proper temperature that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for holding foods requiring refrigeration at proper temperature are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for holding foods requiring refrigeration at proper temperature.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of procedures for holding food requiring refrigeration at proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for holding foods requiring refrigeration at proper temperature are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for holding food requiring refrigeration at proper temperature.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on holding food requiring refrigeration at proper temperature.	☐	☐
Management is able to provide written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts; etc.) that are used to support their food safety training for holding food requiring refrigeration at proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOODS REQUIRING REFRIGERATION – PROPER TEMP.

MONITORING	YES	NO
Management is able to confirm that the critical limits for holding foods requiring refrigeration at proper temperature are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedures for holding foods requiring refrigeration at proper temperature to confirm that employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for holding foods requiring refrigeration at proper temperature. In addition, management is able to describe the corrective actions food employees will take when food is not maintained at proper refrigeration temperatures.	☐	☐
Management is able to produce written forms / records / logs / checklists / calibration records / etc., used to document the findings from monitoring procedure for holding foods requiring refrigeration at proper temperature within the establishment.	☐	☐
DATA COLLECTION NOTES:		

FOODS DISPLAYED OR STORED HOT – PROPER TEMP.

PROCEDURES	YES	NO
Management is able to describe the critical limits for holding foods displayed or stored hot at proper temperature that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for holding foods displayed or stored hot at proper temperature are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for holding foods displayed or stored hot at proper temperature.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of procedures for holding foods displayed or stored hot at proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for holding foods displayed or stored hot at proper temperature are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for holding foods displayed or stored hot at proper temperature.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on how to hold foods displayed or stored hot at proper temperature.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts; etc.) that are used to support their food safety training for holding foods displayed or stored hot at proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOODS DISPLAYED OR STORED HOT – PROPER TEMP.

MONITORING	YES	NO
Management is able to confirm that the critical limits for holding foods displayed or stored hot at proper temperature are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedure for holding foods displayed or stored hot at proper temperature to confirm that employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for holding foods displayed or stored hot at proper temperature within the facility. In addition, management is able to describe the corrective actions food employees will take when food is not displayed or stored at proper hot holding temperature.	☐	☐
Management is able to produce written forms / records / logs / checklists / calibration records / etc., used to document the findings from monitoring procedures for holding foods displayed or stored hot to ensure proper temperature is maintained within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOODS ARE COOLED PROPERLY

PROCEDURES	YES	NO
Management is able to describe the critical limits for cooling foods to proper temperature that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (when and how) that food employees perform to ensure that the identified critical limits for cooling foods to proper temperature are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for cooling foods to proper temperature.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of procedures for cooling foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for cooling foods to proper temperature are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedure(s) for cooling foods to proper temperature.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on how to cool foods to proper temperature.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts; etc.) that are used to support their food safety training for cooling foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

FOODS ARE COOLED PROPERLY

MONITORING	YES	NO
Management is able to confirm that the critical limits for cooling foods to proper temperature are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedures for cooling foods to proper temperature to confirm that employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for cooling foods to proper temperatures within the facility. In addition, management is able to describe the corrective actions food employees will take when food is not cooled to proper temperature within the required time frame.	☐	☐
Management is able to provide written forms / records / logs / checklists / calibration records / etc., used to document the findings from monitoring procedures used to cool foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

REFRIGERATED, RTE FOODS – DATE MARKED

PROCEDURES	YES	NO
Management is able to describe the critical limits for date marking refrigerated, ready-to-eat foods that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for date marking refrigerated, ready-to-eat foods are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for date marking refrigerated, ready-to-eat foods.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their procedures for date marking refrigerated, ready-to-eat foods within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for date marking refrigerated, ready-to-eat foods are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedure(s) for date marking refrigerated, ready-to-eat foods.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on how to date mark refrigerated, ready-to-eat foods.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts, etc.) that are used to support their food safety training for date marking refrigerated ready-to-eat foods within their establishment.	☐	☐
DATA COLLECTION NOTES:		

REFRIGERATED, RTE FOODS – DATE MARKED

MONITORING	YES	NO
Management is able to confirm that the critical limits for date marking refrigerated, ready-to-eat foods are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedures for date marking refrigerated, ready-to-eat foods to confirm that employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor date marking of refrigerated, ready-to-eat foods. In addition, management is able to describe the corrective actions food employees will take when refrigerated ready-to-eat food is not properly date marked.	☐	☐
Management is able to provide written forms / records / logs / checklists / calibration records / etc., used to document findings from monitoring procedures for date marking refrigerated, ready-to-eat foods within their establishment.	☐	☐
DATA COLLECTION NOTES:		

Attachment D: Instructions for Conducting the Food Safety Management System Assessment (Inadequate Cooking Risk Factor)

If the Inadequate Cooking risk factor has been randomly selected within a facility for conducting a food safety management system assessment, the data collector will complete a separate Procedure; Training; and Monitoring (PTM) assessment for the following two data items from the data collection form:

Inadequate Cooking Risk Factor
9. Raw animal foods cooked to required temperatures
10. Cooked foods reheated to required temperatures

The data collector should complete the assessment tools provided at the end of these instructions prior to marking the rating scale 1 – 4 on the data collection form for each of three food safety management system assessment areas (Procedures; Training; Monitoring).

Using the Food Safety Management System Assessment Tool

For each of the two data items listed above, the data collector will individually assess each of the three food safety management system elements (Procedures, Training, and Monitoring).

Using an effective interview process the data collector will solicit sufficient information from the PIC to respond "YES" or "NO" to the four statements listed under each of the PTM elements.

NOTE: Data collectors are strongly encouraged to use a conversational approach to obtain information from the person in charge on their food safety management system rather than using the tool to drive questions in the order the statements appear.

Using the information gathered from the interview, the data collector will answer each of the first three statements under the food safety management system element (PTM) either "YES" or "NO". Each of the three statements is to be answered independently of one another.

For example, the person in charge describes procedures that include final cooking temperatures (critical limits) that do not meet minimum requirements for controlling hazards of concern. However, the PIC is able to provide a sound management structure for how and when cooking is done in the facility and who is responsible for following the procedures. Under the procedures section, therefore, the data collector would record NO for statement #1 related to critical limits but YES to statements #2 (how and when) and #3 (who is assigned to correctly perform the procedure).

After marking the first three statements, the data collector will review the responses. If ALL three statements are marked "YES", the data collector will then mark a response "YES" or "NO" to the last question in the shaded row. The fourth question in the shaded row is designed to assess whether there are written materials available to support the PTM element.

If any of the first three statements have been marked "NO" the data collector does not enter a response for the shaded statement. The first three statements MUST be marked "YES" for the data collector to enter a response for the fourth statement.

Using the Results of the Assessment Tool to Rate PTM on the Data Collection Form

Using the Assessment Tool, the data collector will add up the total number of YES responses for each of the management system elements (PTM). The number of "YES" responses on the assessment tool will determine how to mark the Procedures, Training, and Monitoring sections for the data item on the data collection form.

- If the number of **"YES" responses is "0" or "1",** mark the **data collection form "1"** for that management system (PTM) element;
- If the number of **"YES" responses is "2",** mark the data collection form **"2"** for that management system (PTM) element;
- If the number of **"YES" responses is "3"**, mark the data collection form **"3"** for that management system (PTM) element; and
- IF the number of **"YES"** responses is **"4",** mark the data collection form **"4"** for that management System (PTM) element.

In the "COMMENT" section of the data collection form, provide a description of any scenarios that presented some challenges to assigning a 1-4 marking for a management system (PTM) element.

RAW ANIMAL FOODS – COOKED TO REQUIRED TEMP.

PROCEDURES	YES	NO
Management is able to describe the critical limits for cooking raw animal foods that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for cooking raw animal foods are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for cooking raw animal foods to proper temperatures.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their procedure for cooking raw animal foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for cooking raw animal foods to proper temperatures are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for cooking raw animal foods to proper temperatures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on cooking raw animal foods to proper temperatures.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals; reminder cards; wall charts; etc.) that are used to support their food safety training for cooking raw animal foods to proper temperatures within their establishment.	☐	☐
DATA COLLECTION NOTES:		

RAW ANIMAL FOODS – COOKED TO REQUIRED TEMP.

MONITORING	YES	NO
Management is able to confirm that the critical limits for cooking raw animal foods to proper temperature are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedures for cooking of raw animal foods to confirm employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for cooking raw animal foods to proper temperatures. In addition, management is able to describe the corrective actions food employees will take when raw animal food is not cooked to proper temperatures.	☐	☐
Management is able to produce written forms / records / logs / checklists / calibration records / etc., used to document findings from monitoring procedures for cooking raw animal to proper temperature within their establishment.	☐	☐

DATA COLLECTION NOTES:

COOKED FOODS REHEATED TO REQUIRED TEMP.

PROCEDURES	YES	NO
Management is able to describe the critical limits for reheated cooked foods that apply to their food establishment.	☐	☐
Management is able to describe the steps / tasks (how and when) that food employees perform to ensure that the identified critical limits for reheating cooked foods are achieved.	☐	☐
Management is able to identify specific employees that have been assigned the responsibility to correctly perform procedures for reheating cooked foods to proper temperatures.	☐	☐
Management is able to produce written materials (SOPs; posters; wall charts; wallet cards; etc.) that support the implementation of their procedure for reheating cooked foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

TRAINING	YES	NO
Management is able to confirm that the critical limits for reheating cooked foods to proper temperatures are included in the establishment's food employee training program.	☐	☐
Management is able to describe the methods/process (how and when) for providing training to front line employees on the critical limits and procedures for reheating cooked foods to proper temperatures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to train front line food employees on reheating cooked foods to proper temperatures.	☐	☐
Management is able to produce written materials (PP presentations; handouts; course books or policy manuals' reminder cards; wall charts; etc.) that are used to support their food safety training for reheating cooked foods to proper temperatures within their establishment.	☐	☐
DATA COLLECTION NOTES:		

COOKED FOODS REHEATED TO REQUIRED TEMP.

MONITORING	YES	NO
Management is able to confirm that the critical limits for reheating cooked foods to proper temperature are included in the establishment's monitoring program.	☐	☐
Management is able to describe the methods / process (how and when) for monitoring procedures for reheating cooked foods to proper temperature to confirm that food employees are following the establishment's procedures.	☐	☐
Management is able to identify specific employees that are assigned the responsibility to monitor procedures for reheating cooked foods to proper temperatures. In addition, management is able to describe the corrective actions food employees will take when cooked food is not reheated to proper temperatures.	☐	☐
Management is able to produce written forms / records / logs / checklists / calibration records / etc., used to document findings from monitoring procedures for reheating cooked foods to proper temperature within their establishment.	☐	☐
DATA COLLECTION NOTES:		

Data Collection Form Questions

Date	Question	Answer	Reviewers
1/27/2023	**Do I have to justify my IN/OUT/NA/NO?**	Yes. All items must have a justification. For example: •Listing how many products prepared onsite are not dated deeming 8A and 8C OUT •Stating that the facility only serves chicken deeming 3B N/A	Donna, Wendy, Sarah, Lauren
1/27/2023	**Should I document corrective actions as IN/OUT on the data collection form?**	No. Corrective actions can be documented as additional information but should not deem the process as IN or OUT. For example, if a product is 50F in cold holding and it is within 4 hours it can be cooled down. This cooling process should not be noted under the cooling section of the Data Collection Form.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Date marking: When to Mark it Out?**	If there is just ONE or MORE RTE/TCS foods NOT date marked item number 8 should be marked OUT. ***Note: This was discussed during training and the interpretation has changed.***	Donna, Wendy, Sarah, Lauren
1/27/2023	**Date marking: How to Mark it Out?**	As discussed in training if an observation is made to deem 8A OUT then 8C is OUT. The same applies if 8B is OUT then 8C is OUT.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Help: Too Many Temperatures!**	If the EHS exceeds the temperature chart section, the EHS should document the temperatures on a blank portion of the data collection form. The EHS shall make a note to indicate where the additional temperatures are located. The EHS must note if the additional temperatures are: 1. Cooking, Cooling, Cold Holding, or Hot holding 2. Food Type 3. Critical Limit 4. Type of Equipment ***Note: It is not the expectation that the EHS takes a temperature of every TCS/RTE item in the facility. The EHS should take enough temperatures in all equipment to determine compliance.***	Donna, Wendy, Sarah, Lauren
1/27/2023	**Marking 'Other' for an Information Statement**	If the Information Statement labeled 'Other' is marked either IN or OUT, the EHS must describe that food safety practice in the 'Comment' section box. The inclusion of this information statement is intended to provide the EHS the opportunity to record an observation of a food safety practice or procedure that applies to the overarching data item but does not fit into one of the other pre-determined information statements. Selecting IN or OUT instead of NA for 'Other' should only occur rarely.	Donna, Wendy, Sarah, Lauren

Food Code Technical Questions

Date	Question	Answer	Reviewers
1/27/2023	**Do we Assess Rehydrated Minced Garlic with Water Only?**	EHS must first determine if the product is commercially prepared or prepared in the facility. Commercially prepared garlic does not meet the definition of a TCS food. The EHS must also determine if any additional ingredients are added to the product. Unless stated otherwise in the recipe card or on the label, mixing dehydrated minced garlic with water only to rehydrate the product should deem the product TCS. The dehydration process may or may not include an acidification step.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Date marking: 24 Hour Requirements**	If the PIC provides verbal confirmation that a RTE/TCS product is prepared/opened and consumed within 24 hours the EHS should deem this sufficient to allow. No time stamps required. Note: The EHS should always have a discussion with the PIC on the importance of date marking foods especially if it may go past 24 hours.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Is it cold holding or cooling?**	If a food product is placed in a grab and go area and reads above 41F, the violation will always be cold holding. In this situation the PIC is no longer in control of active cooling and the consumer is not aware of this process. This should not be confused with serving food that in the process of cooling and is still under control of the PIC.	Donna, Wendy, Sarah, Lauren
1/27/2023	**EHS observed sliced ham stored in make table at 50F. Cold hold or cooling?**	EHS must discuss with the PIC the processes and expectations for product that is sliced. If PIC states that once ham is sliced it is placed on make table, then the EHS must take at least two cooling measurements to determine if the product is cooling or is simply in cold holding. If a zero-degree change occurs the EHS can deem this a cold holding violation and obtain a corrective action. If the product is cooling but not at a fast enough rate, cooling methods should be addressed. ***Note: See Corrective Action Question under Data Collection Form Questions.***	Donna, Wendy, Sarah, Lauren
1/27/2023	**Is it adulteration?**	Through conversation with Retail Food Specialist, it was determined that food products that have been incorrectly cooled or cold held can be deemed adulteration. Deeming a product adulterated will take professional judgment as it is not black and white. For example, a facility may have one pan of grits improperly cooled - this would not be considered adulteration. For the purposes of this data collection, unless it is a clear violation of adulteration the EHS should mark this item as IN. If there is a gray area or a reasonable observation that determines that adulteration may have occurred, the EHS must leave this section BLANK and provide detailed justification to why it may be OUT. Pictures would also assist in determining this violation. ***NOTE: This interpretation is noted for data collection purposes. This process should not be implemented for compliance purposes until an official decision is made by upper management and NCDHHS.***	Donna, Wendy, Sarah, Lauren
1/27/2023	**Bare Hand Contact with Food not Immediately Cooked**	If an EHS observed food in contact with bare hands that are not immediately cooked, the EHS must ask additional questions to determine intent. Labeling a product "for cooking" can assist in the process (not a requirement per the food code). If the product is intended to be used for both cooking and serving as is (example: on a salad), this would be considered out of compliance.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Datemark: Low Moisture Mozzarella Cheese**	Low Moisture Mozzarella is a RTE/TCS product that is required to be datemarked unless proven otherwise by the manufacturer.	Wendy, Sarah
1/27/2023	**Datemark: Possibly exempt cheeses**	If an EHS observes cheeses but cannot determine within a reasonable amount of time if they are exempt from date marking, then leave the form blank and send identifying information in for us to decide later (pictures, names, any other helpful information).	Donna, Wendy, Sarah, Lauren

FSMS

Date	Question	Answer	Reviewers
1/27/2023	**Do I assess the FSMS like I would assess PIC duties?**	No. PIC duties are assessed as active managerial control. FSMS are assessing the procedures and systems in place regardless of if the facility is using them or not. At this time our data collection forms do not assess for active managerial control.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Do I have to justify how I determine my FSMS ranking?**	Yes. Whether you gave a facility a 1 or a 4 all rankings must be justified. Canned comments for Procedures, Training, and Monitoring can be found on page 5 of your Data Collection Short Form. An exception can be if all three items are scored as a 4, no comments are necessary.	Donna, Wendy, Sarah, Lauren
2/1/2023	**My facility has been assigned a 4 but they do not cook or reheat any foods. What do I do?**	In this situatio the EHS shall mark FSMS as N/A and notate the reasoning behind the decision. Ex. Facility does not cook or reheat on site. All foods are served cold.	Wendy Bell
2/6/2023	**I'm evaluating a school for cooling. They do cool, but it isn't currently happening. I don't see N/O as a choice. How do I proceed?**	Remember that you are not evaluating the performance of the PIC during your visit; rather, you are evaluating just their procedures, their training, and their monitoring as they are set up to be done.	Sarah

Other Questions

Date	Question	Answer	Reviewers
1/27/2023	**Grab and Go: Dynamic vs. Static**	Grab and go areas although in cold holding are considered dynamic. This is a dynamic situation due to consumer having access to this area immediately. EHS must ensure that this is assessed early on in the data collection shortly after the walk through.	Donna, Wendy, Sarah, Lauren
1/27/2023	**How do I document my time in the field during risk factor data collection?**	EHS should add an activity in CDP IMS using A-13 Risk Factor Data Collection.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Frequency in Changing Probe Wipes**	Friendly reminder that probe wipes should be changed as often as needed to prevent contamination. Preventing contamination includes allergen concerns.	Donna, Wendy, Sarah, Lauren
1/27/2023	**Expiration dates on milk**	Dates on milk by the manufacturer are deemed as best by dates and should not be marking for date marking.	Donna, Wendy, Sarah, Lauren

Establishment Group

ent	F Establishment Name	G Establishment Group	H Permit Status	I Address	J City	K State	L Zip Code	M Assigned	N Compl Dat
0	MYERS PARK ELEMENTARY	School	A	2132 RADCLIFFE AV	CHARLOTTE	NC	28207	Denicola	2/8/20
6	THOMASBORO ELEMENTARY	School	A	538 BRADFORD DRIVE	CHARLOTTE	NC	28208	Denicola	3/20/2
4	STEELE CREEK ELEMENTARY	School	A	4100 GALLANT LANE	CHARLOTTE	NC	28210	Denicola	3/24/2
1	STARMOUNT ACADEMY OF EXCELLENCE	School	A	1600 BROOKDALE AV	CHARLOTTE	NC	28210	Denicola	4/3/20
6	NATIONS FORD ELEMENTARY SCHOOL	School	A	7050 NATIONS FORD RD	CHARLOTTE	NC	28217	Lawrence	5/18/2
5	STEELE CREEK PREPARATORY ACADEMY LUNCHROOM	School	A	2200 SHOPTON RD	CHARLOTTE	NC	28217	Lawrence	2/21/2
0	SOUTH ACADEMY OF INTERNATIONAL LANGUAGES	School	A	8300 NATIONS FORD RD	CHARLOTTE	NC	28217	Lawrence	3/22/2
3	JV WASHAM ELEMENTARY LUNCHROOM	School	A	9611 WESTMORELAND RD	CORNELIUS	NC	28031	McKenzie	2/24/2
2	BAILEY MIDDLE SCHOOL	School	A	11900 BAILEY RD	CORNELIUS	NC	28031	McKenzie	3/1/20
8	DAVIDSON ELEMENTARY	School	A	635 SOUTH ST	DAVIDSON	NC	28036	McKenzie	3/13/2
9	TORRENCE CREEK ELEMENTARY LUNCHROOM	School	A	14550 RANSON RD	HUNTERSVILLE	NC	28078	McKenzie	3/31/2
5	MINT HILL MIDDLE SCHOOL LUNCHR	School	A	11501 IDLEWILD RD	MINT HILL	NC	28105	Oliver	3/16/2
1	RAMA ROAD ELEMENTARY	School	A	1035 RAMA ROAD	CHARLOTTE	NC	28211	Oliver	4/4/20
8	SELWYN ELEMENTARY LUNCHROOM	School	A	2840 COLONY RD	CHARLOTTE	NC	28211	Oliver	3/21/2
4	BAIN ELEMENTARY SCHOOL	School	A	11540 BAIN SCHOOL RD	MINT HILL	NC	28227	Oliver	3/16/2
9	CARMEL MIDDLE SCHOOL CAFETERIA	School	A	5001 CAMILLA DR	CHARLOTTE	NC	28226	Painter	2/9/20
6	MCKEE ROAD ELEMENTARY	School	A	4101 MCKEE ROAD	CHARLOTTE	NC	28226	Painter	2/9/20
7	RIVER GATE ELEMENTARY SCHOOL LUNCHROOM	School	A	15340 SMITH RD	CHARLOTTE	NC	28273	Painter	3/24/2
8	IRWIN ACADEMIC CENTER	School	A	329 N IRWIN AVE	CHARLOTTE	NC	28202	Piephoff	3/3/20
0	DILWORTH ELEMENTARY LUNCHROOM	School	A	405 E PARK AV	CHARLOTTE	NC	28203	Piephoff	3/9/20
5	MARIE G DAVIS LUNCHROOM	School	A	3351 GRIFFITH ST	CHARLOTTE	NC	28203	Piephoff	2/24/2
0	ELIZABETH ELEMENTARY	School	A	1601 PARK DR	CHARLOTTE	NC	28204	Piephoff	2/14/2
8	JM ALEXANDER MIDDLE SCHOOL CAFETERIA	School	A	12010 HAMBRIGHT RD	HUNTERSVILLE	NC	28078	Reynolds	5/25/2
0	MATTHEWS CHARTER ACADEMY	School	A	2332 MT HARMONY CHURCH RD	MATTHEWS	NC	28104	Reynolds	4/27/2
8	MATTHEWS ELEMENTARY	School	A	200 E MCDOWELL ST	MATTHEWS	NC	28105	Reynolds	4/27/2
0	MATTHEWS CHRISTIAN ACADEMY	School	A	2724 MARGARET WALLACE RD	MATTHEWS	NC	28105	Reynolds	4/27/2
2	JT WILLIAMS SECONDARY MONTESSORI	School	C	2400 CARMINE ST	CHARLOTTE	NC	28206	Reynolds	5/9/2023
1	ALBEMARLE ROAD MIDDLE	School	A	6900 DEMOCRACY DR	CHARLOTTE	NC	28212	Reynolds	5/23/2
4	WINDING SPRINGS ELEMENTARY	School	A	6601 HORACE MANN RD	CHARLOTTE	NC	28269	Reynolds	5/9/20
8	LANSDOWNE ELEMENTARY SCHOOL LUNCHROOM	School	A	6325 OWENBY CT	CHARLOTTE	NC	28270	Reynolds	5/23/2
9	SOUTHWEST MIDDLE SCHOOL LUNCHR	School	A	13624 STEELE CREEK RD	CHARLOTTE	NC	28273	Reynolds	5/24/2
9	PROVIDENCE SPRING ELEM LUNCH	School	A	10045 PROVIDENCE CHURCH LN	CHARLOTTE	NC	28277	Reynolds	5/23/2
8	ELON PARK ELEMENTARY SCHOOL CAFETERIA	School	A	11425 ARDREY KELL ROAD	CHARLOTTE	NC	28277	Reynolds	5/3/20
8	HAWK RIDGE ELEMENTARY	School	A	9201 BRYANT FARMS RD	CHARLOTTE	NC	28277	Reynolds	10-M
9	SOUTH CHARLOTTE MIDDLE SCHOOL	School	A	8040 STRAWBERRY LN	CHARLOTTE	NC	28277	Reynolds	5/26/2

Risk Factor Training

January 24th and 25th

Thank YOU!

Staff Conducting Evaluations

- Arlene Lawrence
- Chris McKenzie
- Mark Oliver
- Heather Painter
- Rachel Santimaw
- Suataj Williams
- Josh Sellers
- Daniel Squirewell
- AJ Denicola
- Taylor Piephoff
- Cassandra Thompson
- Ellen Reynolds

Staff Completing Data Entry and Data Analysis

- Sarah Makres
- Lauren Coles
- Wendy Bell

Support Staff

- Amber Daniels
- Matt Muris
- Matt Cook

And of course, Donna Wanucha ☺

Background – The Why?

- In 1998, the US Food and Drug Administration's (FDA) National Retail Food Team initiated a ten-year voluntary study to measure trends in the occurrence of foodborne illness risk factors- preparation practices and employee behaviors most commonly reported as contributing factors to foodborne illness outbreaks at the retail level.
- The FDA risk factor study provides a solid foundation for developing program intervention strategies and justifies program resources.
- Volunteering in the National Retail Food Regulatory Standards allows local agencies to adopt this solid foundation to achieve national uniformity.
- Mecklenburg County values achieving national uniformity for retail food protection and has been enrolled in this voluntary program since 2010.

2018 Risk Factor Study

- The 2018 Risk Factor Study established the baseline for Mecklenburg County to allow for future performance to be measured.
- This data obtained during this study will help determine:
  - Trends of improvement or regression in foodborne illness risk factor occurrence over time;
  - Whether progress has been made toward the goal of reducing the occurrence of foodborne illness risk factors
- The objectives of this study were to:
  - Establish baseline data for facility compliance with risk factors
  - Determine the foodborne illness risk factors that are in most need of priority attention
  - Design intervention strategies focused on reducing the occurrence of the risk factors determined to need priority attention

2018 Risk Factor Study

COLD HOLDING

- Utilize “Time as a Public Health Control” agreements when applicable to give facilities struggling with compliance another option to safely control.
- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators.

COOLING

- Increase educational and enforcement efforts.
- Design and distribute a poster describing approved cooling methods in accordance with the Food Code. This poster would be designed to focus on visual cues that could be applicable to all languages. Approved cooling methods would be visually demonstrated on this handout.
- Purchase cold holding stickers to distribute to facility management and operators.

DATE MARKING

- Increase educational and enforcement efforts.
- Purchase cold holding stickers to distribute to facility management and operators.

2018 vs. 2023 Facilities by Type

2018 Facilities by Type			
Facility type	Inventory	95/5	95/10
Hospitals	11	11	11
Long-term Care	54	48	35
Schools	156	112	60
Retail	124	94	55
Fast food	727	252	85
Full service	579	232	83

2023 Facilities by Type			
Facility type	Inventory	95/5	95/10
Hospitals	13	13	13
Long-term Care	76	64	43
Schools	168	118	62
Retail	139	103	58
Fast food	1214	292	90
Full service	1595	310	91

The How?



Training

- Establishing training for staff conducting evaluations but also for staff conducting data entry.
- Training begins today with our FDA Retail Food Specialist.
- Training continues with calibration meetings held routinely and as often as necessary.



Evaluations

- Field evaluations will be distributed to all senior staff.
- Evaluations will include facilities of the following categories:
  - Health Care
  - Schools
  - Restaurants
  - Retail Food Stores



Data Entry

- Staff that enter data into the FoodSHIELD site may have additional feedback or questions after reviewing data collection forms.
- Always remember to write everything down so that you can remember details if needed.

Facility Categories

Healthcare

Hospitals – A food service operation that provides for the nutritional needs of inpatients, by preparing meals and transporting them to the patient's room and/or serving meals in a cafeteria setting (meals in the cafeteria may also be served to hospital staff and visitors). Because of the low sample size, we plan to include all 13 hospital food service facilities present in the county.

Long-Term Care Facilities – A food service operation that prepares meals for the residents in a group care living setting such as nursing homes and assisted living facilities.

NOTE: For the purposes of this study, healthcare facilities that do not prepare or serve food to a highly susceptible population, such as mental healthcare facilities, are not included in this facility type category.

Facility Categories

Schools

Food service operations that have the primary function of preparing meals for students in one or more grade levels from kindergarten through grade 12. A school food service may be part of a public or private institution.

NOTE: For the purpose of this study, Central Kitchens that prepare meals for serving at receiving/satellite schools, but do not serve any student meals on-site at the Central Kitchen, are not included as part of the study sample. In addition, restaurants or other retail food operations that provide meals to school facilities are not included as part of the study sample for schools. Also, Receiving or Satellite Kitchens that obtain partially or fully prepared meals from a base or central kitchen and conduct little or no food preparation are not included as part of this study. Other school food service facilities eliminated from the study sample include those for behavioral health schools, those serving a high school population only, any schools which had limited to no food prep such as schools holding a permit for only handling catered food. Permitted preschool kitchens within a childcare facility were eliminated as they had little to no food prep; however, elementary schools which also serve preschool children were included.

Facility Categories

Restaurants

Fast Food Restaurants

Restaurants that provide food via counter service, wait, or drive through rather than full table service. Payment is made at a counter, not via check delivered to the table.

Facilities in this category are typically listed as a risk II or III with limited processes.

Full-Service Restaurants

Restaurants that ***may*** offer food via full table service, even if they also offer a counter or drive through option. Food ***may*** be ordered and served, and payment taken at the table.

Facilities in this category are typically risk III or IV with the unlimited processes.

NOTE: For the purpose of this study, the following operations are excluded: mobile food units (food trucks), pushcarts (hot dog carts), gas station/convenience stores, arenas, amusement parks and caterers. For the purpose of this study facilities should be categorized based on process flow not just on payment type or where services are rendered.

Facility Categories

Retail Food Stores

For this study, only supermarkets or grocery stores with a permitted deli facility were included.

Data should be collected If the retail food store also contained a permitted seafood and/or produce department where food items are cut, prepared and stored.

Deli - Parts of the deli operations may include salad bars, pizza stations and any other stations or bars managed by the deli department.

Other areas where meat and poultry products are cooked and offered for sale and managed by the deli department managers may also be included.

Seafood - Areas in a retail food store where seafood is cut, prepared, stored, or displayed for sale to the consumer.

In some retail food stores, the seafood department will be operated under the same manager who has responsibility over the meat and poultry department / operation.

When the seafood department is combined with a meat and poultry department, the data collector will assess only those procedures and practices associated with the processing of seafood.

Produce - Areas in a retail food store where produce is cut, prepared, stored, and displayed for sale to the consumer. A produce operation may include salad bars or juice stations that are managed by the produce manager. If produced is only received prepackaged for display, it would not qualify

NOTE: In-store sushi bars operated and managed as part of the retail food store business, whether located within the deli or seafood department, are considered part of seafood department / operation for the purposes of this study. Standalone facility that are permitted for sushi production only have been excluded from this study.

NOTE: Convenience stores, are not included as part of the Study sample.

The When?

- The goal is for completion of all evaluations by May – June
- Facilities will be distributed to each SR. EHS based on zip codes. All attempts will be made for proximity to regular inspection/permitting area.
- Randomized List
  - All list have been randomized utilizing online tools
  - Randomized list are separated by facility type
- Substitute List
  - Substitute list will be available for you to choose from if needed
  - Substitutes should only be used if:
    - Denied entry
    - Facility is closed
    - Facility does not meet the definition
      - ***Example: Facility is listed as a fast food but meets the full-service definition***

Expectations

- Calibration Meetings:
  - All staff are required to attend calibration meetings unless otherwise discussed. These meetings will be vital, particularly at the beginning of data collection.
- Data Collection Documents:
  - Data collection forms should be completed and submitted to Sarah Makres or Wendy Bell within 48 hours of completion or unless otherwise discussed.
  - Utilize checklist for convenience during inspection but all information must be transferred to data collection form.
- Data Collection Inspections:
  - Inspections should be timely and efficient
  - EHS should leave facility with constructive feedback for improvement and positive reinforcement on areas of success

Important To Remember

Grocery Stores

- Grocery stores are assessed based on if they have a deli first.
- If a deli is chosen, the EHS must determine if a seafood department or a produce department are available and meet the definitions outlined in the marking instructions.

Sushi

- Sushi located within deli or seafood department will all be evaluated under the seafood department data collection
- Stand alone sushi facilities like Fuji San eliminated

Utilize your Tools

- Marking instructions and food code will be vital to ensure the process is smooth.
- All questions should be sent up according to chain discussed later.
- It is important to write detailed notes if an answer cannot be determined.

Who to Call?

- Sarah Makres and Wendy Bell will be point of contact to answer questions and make sure that answers are consistent. We will be logging all questions in a question bank.

- Sarah Makres – 704-301-5551

- Wendy Bell – 980-257-3999

MECKLENBURG COUNTY
North Carolina

Mecklenburg County Public Health

Food Safety Management System (FSMS) Guide

Comprehensive Guide to Implementing or Reinforcing FSMS in a Food Establishment.

Next

WELCOME TO THE MECKLENBURG COUNTY FOOD SAFETY MANAGEMENT SYSTEMS GUIDE

In 2023, MCPH conducted a Risk Factor Study in which a core group of Senior Environmental Health Specialists completed 357 in-field data collection activities. These activities provided MCPH with data to determine areas of improvement in food safety for our community. This guide will focus on the most out-of-control risk factors observed during the study period, which means that not all risk factors will be discussed in this guide.

Through this data, we determined that an emphasis on a **Food Safety Management System (FSMS)** is required to see progression in food safety risk factors, interventions, and food safety allergy awareness. Whether you are a small, family-owned business or a large corporation, this guide will equip you with essential tools and knowledge to develop an effective FSMS or strengthen your existing system.

To view the settings for this tool (instructions, key, acronyms, definitions, and resources), click on the gear icon below.

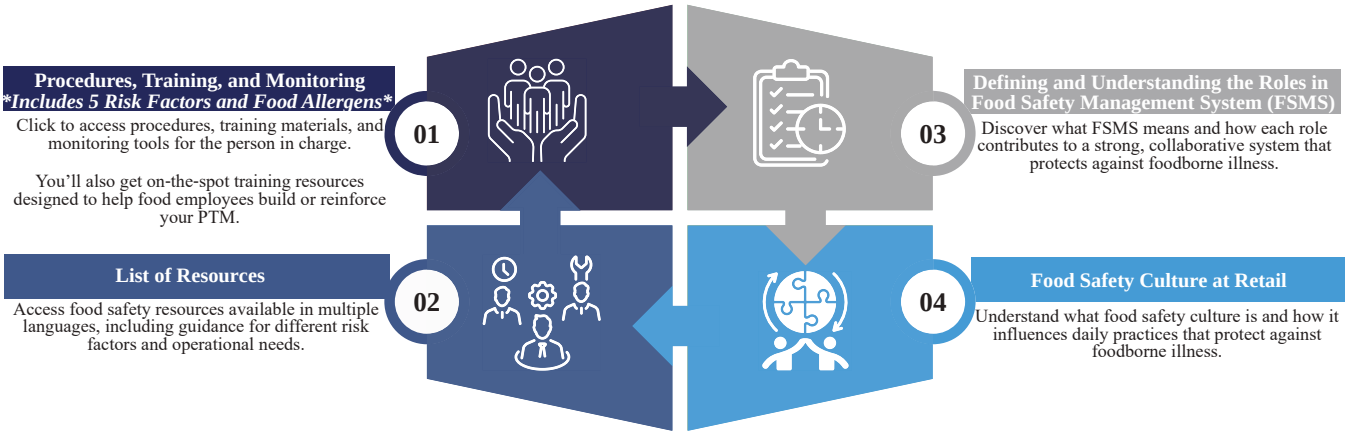
Let's discover the important components of having a strong Food Safety Management System.

Next

Back

Components of a Food Safety Management System (FSMS)

(Click to dive into each component of a FSMS)



Back

(Click icon to go to Main Selection Page)

PROCEDURES, TRAINING, AND MONITORING

P Procedures: A defined set of actions adopted by food service management for accomplishing a task in a way that minimizes food safety risks.

T Training: The process of management's informing employees of the food safety procedures within the establishment and teaching employees how to carry them out.

M Monitoring: Routine observations and measurements conducted to determine if food safety procedures are being followed and maintained.

To see how you can implement PTM to your food service establishment click the link below!

Next

Back

(Click icon to go to Main Selection Page)

Pick one of the following topics
(Click to choose)

- Personal Hygiene
- Holding Temperatures
- Equipment and Cross-Contamination
- Cooking Temperatures
- Sources
- Food Allergy Awareness
- Resources

Back

(Click icon to select another topic)

Holding Temperatures

What is your role in the food establishment? *(Click to choose)*



Person-in-Charge



Employee

Back

(Click icon to select another topic)



Holding Temperatures

- Cold and Hot Holding
- Cooling
- Date Marking
- *Time as a Public Health Control

Back

(Click icon to select another topic)



Holding Temperatures

- Cold and Hot Holding
- Cooling
- Date Marking
- *Time as a Public Health Control

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P

Cold Holding/Hot Holding

Procedures must include:

Who?	What are the expectations for cold and hot holding?	What is the corrective action?
Any food employee who is working with Time/Temperature Control for Safety (TCS) foods.	**Key Food Safety Procedures:** • Train staff to identify TCS (Time/Temperature Control for Safety) foods and know proper storage and hot holding locations. • Cold holding: Keep TCS foods at 41°F or below. • Hot holding: Keep TCS foods at 135°F or above. • Monitor food temperatures regularly to catch issues early and take corrective action if needed. If possible, log these temperatures. • Check food temperatures, not ambient air. • Use clean, calibrated thermometers.	**If TCS foods not 41F or below you should consider:** 1. Discarding the food immediately 2. If prepared within 4 hours, cool rapidly. **If TCS foods are not 135°F or above, you should consider:** 1. Discarding the food immediately if unknown time or more than 2 hours 2. If within 2 hours - Reheat rapidly to 165°F *Does the equipment need to be repaired?*

TOP TIPS



The PIC must ensure that food employees understand the requirements of holding TCS foods cold or hot.



PIC can post reminders by using posters or other means in and on cold or hot holding equipment.



The inspector will be checking holding temperatures to determine compliance with the food code.

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T

Cold Holding/Hot Holding

Training must include:

Teach	Demonstrate	Practice
• **Use Reliable Trainers:** Find employees who are interested in being training champions. ◦ Determine a shift lead who can ensure temperatures are being checked and corrective actions followed. • **Use Your Procedures:** Use your developed procedures as a foundation. • **Use Visual and Verbal Tools:** Use training videos, posters, and on-the-spot training.	**Be Interactive:** Work with your employees while actively working with food. Show food employees what the cold and hot holding requirements are and how to monitor temperatures. Demonstration should be completed for new staff and, as needed, to ensure all staff have the awareness of cold holding.	**Continuous Practice:** As the person in charge, conduct spot checks to follow behind staff. Randomly ask staff expectations. Build a food safety culture of the importance in maintaining all foods at required temperatures. **Continuous Reminder:** Use reminder tools throughout the shifts.

TOP TIPS



Training equips employees with tools to ensure proper holding temperatures are maintained from receiving to the customer.



Incorporating visual training materials can help ensure compliance with cold and hot holding expectations.



The inspector will ask the PIC how employees are trained on ensuring all foods are maintained at 41°F or below or 135°F or above.

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M

Cold Holding/Hot Holding

Monitoring must include:



Monitor/Follow Up	Feedback	Take Action
PIC and food employees must monitor for cold and hot holding as outlined in the established policy. If the PIC/food employee determines that food is not in compliance, appropriate actions must be taken as outlined in the policy. Using cold or hot holding logs and reviewing those logs can determine if adjustments are needed.	Involve food employees in the PTM process. Seek feedback of the expectations from food employees. Example: If the times when temperatures are supposed to be taken are during peak times, it may lead to food employees skipping temperature checks. This feedback could assist in changing times to ensure they are completed.	Does the feedback require updates to the policy? Does the feedback mean that staff need additional training? Does the feedback require updated training for the person in charge?

TOP TIPS

Active Managerial Control is accomplished when monitoring showcases effectiveness in policies and training.

Incorporate a method to monitor holding temperatures. Involve all food employees in the process for better outcomes.

The inspector will ask the PIC how monitoring occurs to verify employee knowledge on proper cold holding temperatures and corrective actions.

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P

Cooling

Procedures must include:

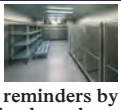


Who?	What are the cooling expectations?	What is the corrective action?
Any food employee who is working with Time/Temperature Control for Safety (TCS) foods that will be cooked/reheated and cooled. This also applies to food employees working with TCS foods that are prepared at room temperature and need to be held cold. Food employees can play their part by monitoring the cooling of foods they prepare.	**Key Cooling Parameters (Hot to Cold):** • TCS foods that are cooked or reheated must be properly cooled down by: ◦ 135°F to 70°F within 2 hours, then to 41°F or below within a total of 6 hours. **Key Cooling Parameters (Ambient):** • TCS foods that are prepared at room temperature must be properly cooled to 41°F within a total of 4 hours. **Key Cooling Procedures (Methods):** • Cooling shall be accomplished within the parameters above by using the proper cooling methods ◦ Shallow Pans, thin portions, blast chiller/freezer, stirring with proper ice bath, ice as an ingredient, or other effective means. • Items in cooling should be placed in a way to make sure it will help with cooling and be uncovered/loosely covered.	**Discard the food if the following parameters are not met:** Hot to Cold • It does not reach 70°F within 2 hours, or • It does not reach 41°F with 6 hours Ambient • It does not reach 41°F within 4 hours Reheating (165°F) of foods can occur if the food is still within the required parameters, but may not reach the proper temperatures within the required time. EXAMPLE: Chicken has been cooling for 1 hour, but it is still 110°F. Reheat to 165°F, and restart the cooling process using a different method.

TOP TIPS



The PIC must ensure that food employees understand the requirements of properly cooling food down.



PIC can post reminders by using posters to remind food employees of proper cooling methods and parameters.

The inspector will be checking cooling temperatures to determine compliance with the food code.

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T

Cooling

Training must include:



Teach	Demonstrate	Practice
Use Reliable Trainers: Find employees who are interested in being training champions. Determine a shift lead who can monitor cooling temperatures during each shift. **Use Your Procedures:** Use your developed procedures as a foundation. **Use Visual and Verbal Tools:** Use training videos, posters, and on-the-spot training.	**Be Interactive:** Work with your employees while actively working with food. Show food employees how to effectively cool down foods based on the type of product they are working with to ensure they reach 41°F within the hot-to-cold or room temperature requirements. Remember that different methods are needed based on the type of food item that is being cooled down. Demonstration should be completed for new staff and, as needed, to ensure all staff have the awareness of cold holding.	**Continuous Practice:** As the person in charge, conduct spot checks to follow behind staff. Randomly ask staff expectations. Build a food safety culture of the importance in maintaining all foods at required temperatures. **Continuous Reminder:** Use reminder tools throughout the shifts.

TOP TIPS



Training equips employees with tools to effectively cool food down regardless of parameters and methods.



Incorporating visual training materials can help ensure compliance with cold and hot holding expectations.



The inspector will ask the PIC how employees are trained to ensure that all foods are cooled within proper parameters using effective methods.

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M

Cooling

Monitoring must include:



Monitor/Follow Up	Feedback	Take Action
PIC and food employees must monitor TCS foods that are being actively cooled to verify that it is meeting proper parameters. If the PIC/food employee determines that food is not in compliance, appropriate actions must be taken as outlined in the policy. Using cooling logs and reviewing those logs can determine if adjustments are needed.	Involve food employees in the PTM process. Seek feedback of the expectations from food employees. Example: Are there methods that work better with food processes that employees can use to verify that cooling occurs properly?	Does the feedback require updates to the policy? Does the feedback mean that staff need additional training? Does the feedback require updated training for the person in charge?

TOP TIPS



Active Managerial Control is accomplished when monitoring showcases effectiveness in policies and training.



Incorporate a method to monitor cooling. Involve all food employees in the process for better outcomes.



The inspector will ask the PIC how monitoring occurs to verify employee knowledge on proper cooling and corrective actions.

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P

Date Marking

Procedures must include:

Who?	What are the date marking expectations?	What is the corrective action?
  	**Establishing a date-marking system** **Choose the Best System for Your Business:** Pick a method that fits your kitchen's workflow and is easy for staff to follow consistently. **Identify Which Foods Must Be Dated:** All RTE/TCS foods that will be kept longer than 24 hours must be labeled. Labeling begins on the day the food is prepared or opened. **Understand Date Parameters:** Store foods for a maximum of 7 days, counting the prep/opening day as Day 1. For frozen items, include freeze and thaw dates; the countdown pauses while frozen but resumes when thawed. **Labeling Expectation**: Include prep date, discard date, or both. When foods combine ingredients, date based on the oldest ingredient. All food must be labeled in every type of storage equipment — including walk-in coolers, prep tables, reach-ins, and display cases. **Discard Expectations:** Discard food immediately if held beyond 7 days or if labels are missing/unclear. Train staff to check labels daily and maintain discard records.	**Discard the food if the following is observed:** • RTE/TCS foods are held past the 7-day window • RTE/TCS foods do not have a date • RTE/TCS foods have an unclear date based on the observation If food was mislabeled or not labeled, it may be saved if there is evidence of when the product was prepared by use of a log or preparation schedules.
Any food employee who is working with Ready to Eat (RTE), Time/Temperature Control for Safety (TCS) foods that will be held in the food establishment for longer than 24 hours. **Food employees can play their part by labeling foods they prepare or verifying that foods are properly labeled.**		

TOP TIPS



The PIC must ensure that food employees understand the requirements of properly date-marking foods.



PIC can post signage of the date marking system to assist employees in determining how food should be dated and when it should be discarded.



The inspector will ask about the date marking system and check dates to determine compliance with the food code.

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T

Date Marking

Training must include:

Teach	Demonstrate	Practice
  	**Be Interactive:** Work with your employees while they are actively working with food. Show food employees the expectations of proper date marking and how to check if the dates on food items are correct. Understanding the date marking system and the expectations will help create a behavioural change and make food employees part of the process. Demonstration should be completed for new food employees and, as needed, to ensure all staff have the awareness of date marking.	**Continuous Practice:** As the person in charge, conduct spot checks to follow behind food employees. Check dynamic stations or walk-in coolers to determine compliance with policy. If there is corrective action needed, determine if training is needed. **Continuous Reminder:** Use reminder tools throughout the shifts.
Use Reliable Trainers: Find employees who are interested in being training champions. Determine a shift lead who can monitor date marking during each shift. **Use Your Procedures:** Use your developed procedures as a foundation. **Use Visual and Verbal Tools:** Use training videos, posters, and on-the-spot training.		

TOP TIPS



Training equips employees with an understanding of date marking expectations and ensuring food is discarded as required.



Incorporating visual training materials can help ensure compliance with date marking expectations.



The inspector will ask the PIC how employees are trained to ensure that all foods are cooled within proper parameters using effective methods.

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M

Date Marking

Monitoring must include:







Monitor/Follow Up	Feedback	Take Action
PIC and food employees must monitor RTE/TCS foods for adequate date marking. Key Questions to ask: Is the product properly dated according to the established system? Does the product need to be discarded or not properly labeled? Using logs to ensure checks are conducted at all refrigerated stations, including the walk-in cooler, can determine if adjustments are needed.	Involve food employees in the PTM process. Seek feedback of the expectations from food employees. Example: When are date marking checks the most effective and how often should they occur?	Does the feedback require updates to the policy? Does the feedback mean that staff need additional training? Does the feedback require updated training for the person in charge?

TOP TIPS

Active Managerial Control is accomplished when monitoring showcases effectiveness in policies and training.

LOG FEED BACK

Incorporate a method to monitor date marking. Involve all food employees in the process for better outcomes.

The inspector will ask the PIC how monitoring occurs to verify employee knowledge on proper date marking and corrective actions.

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P

Time as a Public Health Control

Procedures must include:



Who?	What are the TPHC expectations?	What is the corrective action?
Any food employee who is working with Ready to Eat (RTE), Time/Temperature Control for Safety (TCS) foods that will maintain RTE/TCS food safe with time and not temperature control. This excludes food items that use time solely for quality. **Food employees can play their part by following TPHC procedures.**	**Establishing Time as a Public Health Control (TPHC)** **Procedures:** Must be written and prepared in advance. It must indicate what foods are maintained on time. They must be maintained onsite at all times for food employees and inspectors. Procedures must include: • How the product is identified or marked for 4 or 6 hours • Expectations of the food item during the 4 or 6-hour limits • Expectation of the food being discarded once those limits are met Specific expectations based on time requirements are outlined below: **Time-Maximum up to 4 hours, expectations:** • Food should have an initial temperature of 41°F or 135°F • Exceptions: Foods may start at 70°F or below if it is an RTE fruit or vegetable is cut right before use, or it is a hermetically sealed item (e.g., canned food) **Time - Maximum up to 6 hours** • Food should start at41°F or less when removed from refrigeration but cannot exceed 70°F in the 6 hours • Food is monitored during 6 hours to ensure compliance, unless ambient air is maintained to ensure compliance.	**Discard the food if the following is observed:** • Food is observed exceeding the 4 or 6-hour maximum • Food is observed, not labeled per procedures.

TOP TIPS

4 HOURS 6 HOURS

The PIC must ensure that food employees understand time procedures and expectations.

SOP

PIC should post TPHC procedures near the location where the food is stored or in a shared team location.

The inspector will ask the PIC to review the TPHC procedures and will compare them to the observations onsite.

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T

Time as a Public Health Control

Training must include:



Teach	Demonstrate	Practice
Use Reliable Trainers: Find employees who are interested in being training champions. Determine who will be responsible for monitoring TPHC based on station or shift. **Use Your Procedures:** Use your developed procedures as a foundation. **Use Visual and Verbal Tools:** Use training videos, posters, and on-the-spot training.	**Be Interactive:** Work with your employees while they are actively working with food. Show food employees the expectations of a strong TPHC system and how to verify that proper labeling and discarding are occurring. Understanding TPHC and how it keeps food safe will help create a behavioural change and make food employees part of the process. Demonstration should be completed for new food employees and, as needed, to ensure all staff have the awareness of TPHC procedures and expectations.	**Continuous Practice:** As the person in charge, conduct spot checks to follow behind food employees. Randomly spot check items on TPHC to ensure compliance with policy. If there is corrective action needed, determine if training is needed. **Continuous Reminder:** Use reminder tools throughout the shifts.

TOP TIPS



Training equips employees with how to comply with set TPHC procedures and ensure food is discarded as required.



Incorporating visual training materials can help ensure compliance with TPHC expectations.



The inspector will ask the PIC how employees are trained to properly label and discard food that is stored on TPHC.

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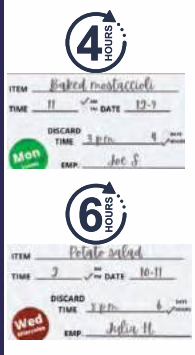
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M

Time as a Public Health Control

Monitoring must include:



Monitor/Follow Up	Feedback	Take Action
PIC and food employees must monitor RTE/TCS foods that are placed on TPHC and have an approved procedure. Key Questions to ask: Is the procedure complete and available? Is the product on time and properly labeled? Was the product properly discarded per procedures?	Involve food employees in the PTM process. Seek feedback of the expectations from food employees. Example: Why is food not being labeled or discarded properly?	Does the feedback require updates to the policy? Does the feedback mean that staff need additional training? Does the feedback require updated training for the person in charge?

TOP TIPS



Active Managerial Control is accomplished when monitoring showcases effectiveness in policies and training.



Incorporate a method to monitor time stamps. Involve all food employees in the process for better outcomes.



The inspector will ask the PIC how monitoring occurs to verify that employees are labeling and discarding food according to TPHC procedures.

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Cold Holding

Holding Temperatures

As a food employee, your responsibility is to know what TCS foods are and how to maintain them at proper temperatures:



What is TCS?

Time/temperature control for safety food is defined in the code:

1. Animal food that is raw or heat-treated
2. Plant food that is heat-treated or consist of
   - Raw seed sprouts
   - Cut melons, cut leafy greens, cut tomatoes
3. Food that:
   - Contains garlic and oil mixtures
   - Has a pH and water activity deemed to be TCS

Examples of TCS foods include but are not limited to:

1. Deli meats
2. Opened cans such as beans and green beans
3. Salad stations
4. Cooked foods
5. Cut melons (watermelon, cantaloupe, honeydew)



Cold Holding Expectation

Except when preparing, cooking, or cooling foods, Time/Temperature Control for Safety Foods (TCS) shall be maintained at 41°F or below at all times.

This includes, but is not limited to, food stored in:

- Walk-in coolers
- Reach-ins / Flip top units
- Cooler drawers
- Salad bars / Customer grab and go

All foods that are considered in storage should be monitored to make sure that they are 41°F or below at all times.

If you find foods that are below 41°F, it is essential to understand how long the food has been out of compliance to determine the proper corrective action.

- **Below 41°F for less than 4 hours:** Cool to 41°Fimmediately
- **Below 41°F for more than 4 hours or unknown time:** Discard

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Hot Holding

Holding Temperatures

As a food employee, your responsibility is to know what TCS foods are and how to maintain them at proper temperatures:



Hot Holding Expectations

Except when preparing, cooking, or cooling foods, Time/Temperature Control for Safety Foods (TCS) shall be maintained at 135°F or below at all times.

This includes, but is not limited to, food held in:

- Buffets
- Serving lines/Steam tables
- Hot holding cabinets and drawers
- Under heat lamps

All foods in hot holding shall be monitored throughout the day to ensure they remain at or above 135°F. Documentation of temperature checks can assist with this process.

If you find foods that are below 135°F, it is essential to understand how long the food has been out of compliance to determine the proper corrective action.

- Below 135°F for less than 2 hours - Reheat to 165°F
- Below 135°F for more than 2 hours or unknown time - Discard

Food held below 135°F for long periods of time and served can make customers extremely ill. We will discuss reheating in the Cooking Temperatures topic.

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What is TCS?

As a food employee, your responsibility is to know what TCS foods are:



What is TCS?



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Holding Temperatures



Cold and Hot Holding

As a food employee, your responsibility is to know what cold holding expectations for TCS foods are:



Cold Holding Expectations



Hot Holding Expectations



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Cooling - Parameters

As a food employee, your responsibility is to know when cooling is required based on the food item you are preparing:







Cooling Parameters

Key Cooling Guidelines for Food Safety

For cooked or reheated TCS foods:

- Cool from 135°F to 70°F within 2 hours.
- Then cool from 70°F to 41°F or below within the next 4 hours.
- Total cooling time should not exceed 6 hours.

EXAMPLES: Cooked rice, soups, chicken, or vegetables. This also includes foods that are commercially prepared for hot holding but will be used for next-day service.

For TCS foods prepared at room temperature:

- Cool to 41°F or below within 4 hours.

EXAMPLES: Cut lettuce, cut tomatoes, pico, pizza sauces, shredded mozzarella, cut melons, prepared salads, or marinated raw chicken.







Important Tips

Additional important tips:

- Minimize the time food spends in the "temperature danger zone" between 41°F and 135°F.
- Use a log or other methods to document cooling. This makes sure that food is stored or served safely.
- Always use a food thermometer to check temperatures accurately.

Corrective Actions:

Discard the food if the following parameters are not met:

- Hot to Cold
  - It does not reach 70°F within 2 hours, or
  - It does not reach 41°F with 6 hours
- Ambient
  - It does not reach 41°F within 4 hours

Reheating (165°F) of foods can occur if the food is still within the required parameters, but may not reach the proper temperatures within the required time.

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Cooling - Methods

Holding Temperatures

As a food employee, your responsibility is to know the different cooling methods to use based on the product being prepared:









How to Cool Food Safely

To keep food safe, you need to cool it down quickly using the right methods. The methods will change depending on the type and amount of food being cooled down.

Methods to cool food down can include one or more of the following:

- Use shallow pans or cut food into smaller pieces so it cools faster in the walk-in cooler.
- Use equipment like blast chillers or freezers if you have them.
- Use of proper ice baths or ice wants while stirring food to make sure the heat goes from the center out.
- Add ice directly to the food to cool it faster.
- Other effective means to make sure the food cools quickly within the required time.

When cooling food, spread it out so air can move around, and leave it uncovered or loosely covered. This helps the food cool faster.

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Holding Temperatures



Cooling

As a food employee, your responsibility is to know how to cool food properly:



Cooling



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Holding Temperatures



Date Marking

As a food employee, your responsibility is to know date marking expectations and when to properly discard RTE/TCS foods:







Date Marking System

Key Date Marking Guidelines for Food Safety

NOTE: Food employees should follow the food establishment policy for Date Marking if applicable. This training will focus on the expectations outlined in the Food Code.

What Needs a Label

- Label all cold Ready-to-Eat (RTE) and Time/Temperature Control for Safety (TCS) foods if they will be kept longer than 24 hours.

Date Guidelines

- Store food for a maximum of 7 days or per policy.
- Day 1 is the day the food is prepped or opened.
- For frozen items, include freeze and thaw dates. Countdown pauses while frozen and resumes when thawed.

Labeling Requirements

- Include prep date, discard date, or both.
- For foods with mixed ingredients, use the date of the oldest ingredient.
- Label cold RTE/TCS food in all storage areas, including but not limited to:
  - Walk-in coolers
  - Prep tables (ex., sandwich stations)
  - Reach-in refrigerators
  - Display cases

Discard Expectations

- Discard food immediately if:
  - It's held beyond 7 days
  - The label is missing or unclear

Note: If the food was mislabeled or not labeled, it may be saved if there is evidence of when the product was prepared by use of a log or preparation schedules.

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Holding Temperatures



Date Marking

As a food employee, your responsibility is to know how to cool food properly:







Date Marking System



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Holding Temperatures



Time as a Public Health Control

As a food employee, your responsibility is to know how to use Time as a Public Health Control procedures:



Time as a Public Health Concern

Time as a Public Health Control (TPHC)

Procedures should be:

- Written and prepared in advance by the person-in-charge.
- Maintained on-site at all times for food employees and the inspectors to follow.

Procedures will tell you:

- Which foods are required to be under **time** instead of **temperature**
- How to properly label the food based on the specific 4 or 6 hours
- How to hold the food on TPHC during the 4 or 6-hour limits
- The expectation of the food being discarded once those limits are met

Note: TPHC is used only when using time for safety. Time used for quality is not included in this process.

Below are the requirements of a 4 versus 6-hour TPHC:

4-hour Time as a Public Health Control:

- Food should have an initial temperature of 41°F or 135°F
- Exceptions: Foods may start at 70°F or below if:
  - RTE fruit or vegetable is cut right before use
  - Comes from a hermetically sealed item (e.g., canned food)

6-hour Time as a Public Health Control:

- Food will start at 41°F or less when removed from refrigeration, but cannot go above 70°F in the 6 hours
- Food is checked during the 6 hours to make sure it does not go above 70°F
- This is not required only if the ambient air is maintained to make sure it does not go above 70°F.

Discard the food if the following is observed:

- Food is observed exceeding the 4 or 6-hour maximum
- Food is observed, not labeled per procedures.

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Time as a Public Health Concern

As a food employee, your responsibility is to know how to cool food properly:



Time as a Public Health Concern



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Achieved on: October 6, 2022