PROGRAM

7318.002

CHAPTER 18 - TECHNICAL ASSISTANCE

SUBJECT:	IMPLEMENTATION DATE			
RETAIL FOOD PROTECTION - STAT	9/5/06			
This program has completed a Practices clearance by CFSAN'	COMPLETION DATE			
OC/DFP/CPB in July of 2006.*	9/30/07			
DA				
PRODUCT CODES	PRODUC	CT/ASSIGNMENT CODES		
INDUSTRY CODE : 51 NY USE APPROPRIATE PRODUCT CODES	84, 86, 92, 95,	S, Operations 83, and 96 under this PAC errorism activities under		

Note: Material that is not releasable under the Freedom of Information Act (FOIA) has been redacted/deleted from this electronic version of the program. Deletions are marked as follows: (#) denotes one or more words were deleted; (&) denotes one or more paragraphs were deleted; and (%) denotes an entire attachment was deleted.

FIELD REPORTING REQUIREMENTS - * FDA REGIONAL FOOD SPECIALISTS *

Instructions provided in Parts II and III provide for the following reports:

A. REPORTS TO HEADQUARTERS, DIVISION OF COOPERATIVE PROGRAMS (DCP), RETAIL FOOD PROTECTION TEAM (RFPT), HFS-627

- 1. Compliance Program Status Reports (Attachment A)
- 2. Regional Program Standards Status Report (reported electronically and posted on FDA Web site).
- 3. *FDA Retail Food Program Resource Disk Recipient Contact Information Form (reported electronically for each disk distributed) (Attachment C).*
- 4. *FDA Standardized Food Program Inspection/Training Officer Maintenance Form (reported electronically annually for each state official listed under item 7 below. Also see Part III. 2. B.) (Attachment D).*
- 5. Report of Adoption of Recommended Model Code (Attachment B).
- 6. Copy of Notification letter for successful standardization of state officials and copy of Standardization Certificate (see Part III.2.B)
- 7. List of state officials meeting Standardization Certification

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criteria. (See Part III.2.B)

- 8. Regional Work plan Development (see Part II.2.E.), Submit to the Compliance Programs Branch, HFS-636.
- 9. FDA 2591, Equipment Evaluation (see Part III.4.E.).

B. HARDCOPY REPORTS TO STATE OFFICIALS

- 1. Regional Seminar Report (see Part III.3.C.).
- 2. Notification letter for successful standardization of state officials and Standardization Certificate (see Part III.2.B.)
- 3. *Verification Audit Report of Program Standards Self-Assessment (for states enrolled in the Program Standards as of 2001). *

PART I - BACKGROUND

The retail food industry in the United States is composed of over 1 million establishments, ranging in size from small owner-operated concessions to large multi-unit national chains. Regardless of the size or complexity of the operation, the on-site management of each food establishment shares a common responsibility for the prevention of foodborne illness.

While the overall annual cost of foodborne illness is unknown, studies indicate that it is in the billions of dollars. It has been estimated that the number of illnesses is approximately 76 million, with up to 5,000 deaths. The industry response to the challenge of preventing foodborne illness has been positive. Industry representatives realize how devastating foodborne illness can be in terms of human suffering, monetary cost, unfavorable publicity, and lost consumer confidence. Food safety training has increased, and many retail operators are implementing Hazard Analysis Critical Control Point (HACCP) programs to better control the risk factors in their Active control by management of the risk factors, which are establishments. most often associated with foodborne illness, is the best protection that can be provided to the consumer. The high rate of employee/manager turnover and a lack of uniform, risk-based regulatory oversight hamper the effectiveness of industry efforts.

The regulatory program to prevent foodborne illness from foods prepared in retail establishments is a cooperative federal, state, and local effort, with the Food and Drug Administration (FDA) as the lead federal agency. State and local governments provide the largest portion of the program's resources. They also exercise primary regulatory control over the retail segment of the food industry. FDA's ability to leverage its resources and to support and guide the much larger investment of state and local government programs represents an effective public health partnership.

FDA's role in providing assistance to state and local governments is derived from the Public Health Service Act (PHS) (PL 78-410). Responsibility for carrying out the provisions of the PHS Act relative to food protection was transferred to the Commissioner of Food and Drugs in 1968 (21 CFR 5.10(a) (2) and (3)). Additionally, Sections 301(k) and 704 of the Federal Food, Drug, and Cosmetic Act (Act) provide authority to FDA to inspect retail food establishments where food is held for sale after its shipment in interstate commerce. If the food is being adulterated or misbranded it further provides FDA with the authority to take enforcement action.

¹As referenced in the 2001 Food Code, Preface.

²As referenced in the 2001 Food Code, Subparagraph 1-201.10(B)(36), food establishments include restaurants, groceries, convenience stores, vending locations, hospitals, schools, nursing homes, caterers, etc.

³As referenced in the 2001 Food Code, Preface.

FDA directs its activities toward providing the leadership necessary to achieve an effective, uniform implementation of a national retail food program. The National Retail Food Program's strategic goal is to provide guidance, support, and assistance to federal, state, local, and tribal retail programs to reduce the occurrence of identified risk factors that cause foodborne illness. Program effectiveness is measured against performance goals and indicators established in the National Retail Food Program Operational Plan.

PERFORMANCE GOALS

The overarching Performance Goal (Performance Goal I) is to obtain a 25 percent reduction in the occurrence of Centers for Disease Control and Prevention (CDC)-identified risk factors that contribute to foodborne illness by October 1, 2010 * (see Centers for Disease Control and Prevention. CDC Surveillance Summaries, October 25, 1996, MMWR 1996;45(No.SS-5) and Bean, Nancy H., Goulding, Joy S., Lao, Christopher, Angulo, Frederick, Surveillance for Foodborne-Disease Outbreaks - United States, 1988-1992 also in CDC Surveillance Summaries, October 25, 1996, MMWR 1996; 45(No.SS-5)pp 1-68)*. The Performance Indicator (collection and tabulation of national data and comparison to initial baseline data) will be measured using the FDA National Baseline on the occurrence of foodborne illness risk factors. The initial baseline on these risk factors was established in 1999. The Baseline data collected and tabulated to monitor the occurrences of CDC-identified risk factors include a representative cross-section of the industry and will be compared to data collected in 2003 and subsequent data collected in 2007.

Performance Goal II is to increase retail food program uniformity based on state and local food programs' adherence to the criteria set forth in FDA's "Voluntary National Retail Food Regulatory Program Standards." The Performance Indicators will be the enrollment of regulatory jurisdictions and tracking their progress in meeting these nationally recognized Retail Food Program Standards.

Performance Goal III is to increase program uniformity through the Food Code standardization and certification of regulatory retail food program personnel resulting in a greater focus on CDC-identified risk factors that contribute to foodborne illness. Performance Indicators will be based upon annually established measurable work plan objectives.

Performance Goal IV is to implement the recommendations forwarded in the Office of Inspector General's (OIG) final report on Retail Food Safety (September 7, 2001) and supporting activities. DCP will work with the Regional Food Specialists to implement the recommendations. The performance indicators will be the completion of tasks per the schedule outlined in the DHHS/FDA response to the OIG report. Activities to accomplish this goal include regulation and guidance development, improved inspectional systems, leveraging foodborne disease and outbreak information with other federal agencies, and improved communications with state and local stakeholders.

 $\underline{\text{Note}}$: The use of "state" throughout this compliance program also implies $\underline{\text{local}}$.

PART II - PROGRAM

1. GUIDING PRINCIPLES

The guiding principles that structure the activities of the Agency's cooperative Retail Food Program are:

- Making the most effective and efficient use of resources through participation in collaboration and partnerships with regulatory retail food programs.
- Establishing program priorities based on the extent of actual or potential risk and public health benefit.
- Strengthening the food regulatory agencies' capability to make accurate risk assessments and sound management decisions.
- Being responsive to the needs of the Program partners.

2. ACTIVITIES

Activities assigned to the field to accomplish program objectives based on these guiding principles include:

The National Retail Food Team has identified nine program standards (http://www.cfsan.fda.gov/~dms/ret-toc.html) that are deemed necessary for conducting an effective regulatory food program. These nine program standards are as follows; 1) Regulatory Foundation, 2) Trained Regulatory Staff, 3) Inspection Program Based on HACCP Principles, 4) Uniform Inspection Program, 5) Foodborne Illness Investigation and Response, 6) Compliance and Enforcement, 7) Industry and Community

A. Promoting Voluntary National Retail Food Regulatory Program Standards.

- Response, 6) Compliance and Enforcement, 7) Industry and Community Relations, 8) Program Support and Resources, and 9) Program Assessment. These Standards have been promoted nationally to the more than 3000 state food regulatory agencies. Jurisdictions are encouraged to "self-assess" their programs against the Standards and to report to FDA on their findings. FDA Retail Food Specialists provide technical assistance to regulatory jurisdictions performing their self-assessments, establishing risk factor baselines, and developing strategic plans to enhance the effectiveness of their retail food programs.
- B. *Presentations are being held at national/regional conferences to report data trends resulting from the 2003 data collection and comparison to 1998-1999 data on the occurrence of foodborne illness risk factors at the retail level.*
- C. Conducting Food Code Standardizations. Training regulatory officials through standardization and certification of key personnel on the interpretation and application of the Food Code provides a solid foundation for a uniform regulatory retail food program. Food Code Standardizations incorporate a risk-based inspection methodology and are based on the principles of HACCP.
- D. <u>Implementing CFSAN Food Safety Priorities.</u> The Retail Food Specialists provide technical assistance and testimony in support of *Food Code*

adoptions. The Specialists, when requested, act as liaison between FDA's CFSAN and the states regarding highly technical matters involving *Code* interpretations and special food safety projects identified as priority by the Center. For the immediate future, food security, updating of the Food Code, and Retail Food Program Standards remain Center priorities. Other priorities will be identified through the annual work plan.

- E. Developing Program Standards and Guidance. The Specialists assist the Center in the development of Agency procedures and guidance documents related to the "FDA's Recommended National Retail Food Regulatory Program Standards," Standardization Procedures, Pre-standardization Workshops, HACCP at Retail, and Specialists' Certification. The support include the commitment to designate two Specialists to represent the Field component on the National Retail Food Team Steering Committee.
- F. <u>Conducting Training Workshops.</u> Training workshops will be coordinated and primarily delivered by DHRD and the Specialists with assistance from DCP to address specific needs of our cooperative program partners, including but not limited to "FDA's Recommended National Retail Food Regulatory Program Standards," the *Food Code*, pre-standardization, and implementing the principles of HACCP at Retail, etc.

3. PROGRAM MANAGEMENT INSTRUCTIONS

A. Establishing A Cooperative Relationship

Responsibility for advising top state officials on matters relating to the preservation and improvement of the public health and for assisting states are affirmative obligations of the Agency under the PHS Act. FDA Regional officials carry out the necessary planning and implementation of program operations performed under this Compliance Program.

States are not obligated to follow FDA instructions regarding the retail food protection program. The overwhelming majority of these regulatory jurisdictions, however, endorse the concept of a uniform national retail food program. FDA encourages its Regional staff to maintain a strong working relationship with our cooperative program partners and to provide them with consultation, training, and technical assistance to enhance the effectiveness of their retail food programs.

The Regional Food and Drug Director should closely examine on a case-by-case basis those circumstances that may cause some states not to be receptive to the initiatives outlined in the National Retail Food Program. A meeting with top state officials should be considered to foster enhanced communication and program implementation. The Retail Food Program Steering Committee, the Division of Federal State Relations, and the RFPT are available if further assistance or consultation is needed.

B. Planning Instructions

Regulatory jurisdictions' self-assessments, Regional Specialists' consultations, needs surveys, and field observations are the principal mechanisms FDA has to determine and document state program priorities.

These activities provide data on (1) the level of consumer protection in each state, and (2) the specific needs of the state program.

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FDA bases the allocation of program resources and funding on these activities. The performance indicators for these activities gauge the impact of our program operations. FDA's technical assistance and other program-related activities in each jurisdiction are planned in cooperation with program officials. FDA personnel are to meet with program officials to accomplish this coordination task. FDA's National Retail Food Program Work Plan is designed to support jurisdictions' needs in implementing the Program Standards, training and standardization of their staff, and in addressing program-specific food safety priorities. Hours allotted in the categories of Technical Assistance and Workshops allow flexibility for the Regions to assimilate any unique needs of their jurisdictions into the implemented work plan.

FDA's Retail Food Safety Program is a national program that is implemented regionally. The Agency's ability to allocate its limited resource capacity in support of each jurisdiction's program needs will be assessed in the context of food safety initiatives contained in the National Retail Food Program. Priorities within the work plan are established to achieve both long and short-term program goals and objectives.

C. Compliance Program Status Reports

At the end of the second and fourth quarters, the Retail Food Specialists will submit a summary report to the Division of Cooperative Programs, Retail Food Protection Team (RFPT), concerning the status of regional compliance program operations. RFPT will in turn provide copies of the summary report to the Office of Compliance, Division of Field Programs, Compliance Programs Branch (HFS-636). The report should follow the recommended format provided in **Attachment A**. The report is extracted from the FACTS reporting system. To enable printing of this report, Food Specialists must individually enter their work time at least quarterly using the latest revision of the "Reporting Information for National Retail Food Team State Retail Food Program."

The **Attachment A** Status Report is intended to provide regional and headquarters program managers with information regarding program accomplishments.

D. Program Resource Instructions

Retail Food Specialists who have been certified per the established "Protocol for Standardization/Certification (effective 1-01-02)" in the use of the Food Code and in the procedures for standardizing and certifying state officials will carry out this program. Other Agency personnel who have been certified by the Retail Food Specialists can be used for program activities to the extent that they have program training and experience.

E. Work Plan Development

The Retail Food Program Steering Committee will develop a draft of the upcoming fiscal year's work plan by January 15. The draft work plan will be based on National Retail Food Program priorities obtained from CFSAN, ORA, regulatory jurisdictions and other sources. The draft work plan will contain on-going annual activities and projected special projects.

Early in the first quarter of the fiscal year, each regional office will

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conduct a needs inquiry of all state regulatory programs with responsibility for retail food establishments. Information about jurisdictions' needs within the Region that might influence national initiatives or have national application should be forwarded to the Specialists' Team Leaders and/or the Retail Food Steering Committee by January 1st so that those needs may be assessed and assimilated into the National Work Plan draft if appropriate.

The work plan will be organized in priority order and based on budgeted FTEs. An Accomplishment Strategy for the work plan based on existing FTEs will also be provided by the Steering Committee. The draft work plan will be sent to the Regional Food and Drug Directors and the Specialists for review and comment. The final draft will be sent to the ORA Field Food Committee for approval no later than February 15.

The Steering Committee will forward the recommended work plan for this compliance program to the Compliance Programs Branch, HFS-636, by April 1. CPB will provide copies of the work plan to the Office of Plant and Dairy Foods, Division of Dairy and Egg Safety, and the Division of Cooperative Programs for comment and approval.

PART III - INSPECTIONAL

General

The performance indicators for this program are designed to directly assess the impact of national food safety initiatives on the reduction of foodborne illness risk factors within the retail food segment of the industry. The Agency's primary retail food safety program objectives supporting this goal include:

- 1. Improving regulatory retail food program uniformity through the development of a coordinated work plan focused on increasing the number of jurisdictions adhering to the criteria set forth in FDA's "Voluntary National Retail Food Regulatory Program Standards";
- 2. Enhancing the technical competence of regulatory food safety professionals through increasing the number of states that have adopted the FDA Food Code, conducting Food Code standardizations of inspection personnel and providing technical assistance on retail food program issues;
- 3. Providing workshops and training on technical issues impacting food safety and retail food programs; and
- 4. Implementing specific food safety and data collection initiatives identified by CFSAN as national priorities impacting the retail food program.

There are several specific activities that comprise the intervention strategies designed to accomplish these program objectives. The regions have some flexibility to adjust resources among the designated output categories in response to state needs as long as established Agency objectives for the fiscal year are met.

1. Improving Regulatory Retail Food Program Uniformity

A. Implementation of FDA's "Voluntary National Retail Food Regulatory Program Standards"

Retail Food Specialists are scheduled to work with jurisdictions that will be conducting self-assessments of their retail food program using the Standards. The purpose of these self-assessments is to determine a jurisdiction's level of adherence to the criteria within the Standards. Each enrolled jurisdiction will develop strategic plans for addressing retail food program priorities. These jurisdictional strategic plans should be used to identify and address state priorities within the regionally implemented work plan.

B. Coordinating Implementation of Work Plans and Development of Retail Food Protection - State Program and Support Materials

National Coordination of Work Plan Implementation.

Consistent with the availability of funds and program priorities, a Retail Conference will be held for all FDA Retail Food Specialists performing work under this compliance program. The purpose of this conference is to coordinate program activities, revise and update program objectives and methods, develop new program initiatives, and provide current technical training. All

specialists are expected to attend as a requirement for continued certification.

The National Retail Food Program Steering Committee will be charged with the development of the conference agenda. Division of Cooperative Programs (DCP) together with the Division of Human Resource Development (DHRD) will initiate coordination of plans for each year's conference. Each region or program division will be responsible for funding the participation of its personnel.

The conference location will be rotated among the five FDA Regions and the host region will be responsible for local arrangements. The National Retail Food Program Steering Committee may elect to schedule the conference in conjunction with another meeting to defray travel costs. Example: Conference for Food Protection, Association of Food and Drug Officials, National Restaurant Association, Food Marketing Institute, National Environmental Health Association, or regional seminars.

- Team Leaders National Retail Food Program Steering

 Committee. The National Retail Food Specialist's Team will select two specialists to participate as representatives of ORA field activities on the National Retail Food Program Steering Committee. The Team leaders will be responsible for providing a mechanism for Field Specialists' participation in planning, development, and coordination of the retail food program.
- National Program Development Work Groups. The National Retail Food Program Steering Committee will identify projects and initiatives that require development to ensure that the Agency has the necessary procedures, guidance documents, standards, etc., in place to support the program. The specialists will be called upon to assist in the development and review of these program materials through participation in work groups. Areas addressed within these working groups include but are not limited to the FDA's "Voluntary National Retail Food Regulatory Program Standards," Food Code Standardization Procedures, Pre-Standardization Workshops, HACCP at Retail guidance documents; Specialist's Certification, CFP issues, and other timely topics as may be identified by the Steering Committee.

C. Conference for Food Protection

Proposed changes to the *Food Code* are presented and deliberated at the biennial Conference for Food Protection meeting. Participation by the Regional Food Specialists is essential to provide supportive documentation for the deliberation of Conference Issues presented during Council meetings and to convey appropriate technical assistance stemming from Conference outcomes. Each Regional Food Specialist should plan to attend and participate in this biennial (held every "even" year) national food safety meeting where all stakeholders come together to discuss food safety issues of importance and to determine recommendations for improving the *Food Code*.

2. Food Code Adoptions, Standardizations, and Technical Assistance

A. Promotion of Model Codes

The Retail Food Specialists should seek and make opportunities to promote

adoptions of uniform statewide food laws and regulations which are equivalent to the current FDA *Food Code* through contact with food program directors, high level agency management, and other top officials in state government.

This may include:

- Serving on special task forces and committees established to prepare and recommend uniform standards for statewide adoption as requested; and
- Contacting each state that does not have uniform requirements for the purpose of promoting the adoption of requirements substantially equivalent to the FDA's Food Code.

The Region is requested to provide updates on jurisdictions that are proposing new or updated statutes, regulations, and ordinances to determine the extent of conformity with the FDA Food Code. Each specialist should complete the "Report of Adoption of Recommended Model Code", Form FDA 2998 (Attachment B) as soon as the jurisdictions has completed its adoption process and forward the form and supporting materials to the RFPT.

B. Certification of State Officials

The Retail Food Specialists should provide orientation activities necessary to prepare new state designees for standardization and certification, and issue certificates as appropriate. This should be accomplished in accordance with the current version of the FDA Procedures for Standardization and Certification of Retail Food Inspection/Training Officers.

The Retail Food Specialists should submit to the state program officials, when the state designee successfully meets the certification criteria, the following:

- Notification letter that explains the purpose and conditions for retention of certification
- Certificate Inspection/Training Officer

Note: The Retail Food Specialists shall quarterly submit to RFPT the list of state officials meeting Standardization Certification criteria *on the FDA Standardized Food Program Inspection/Training Officer Maintenance Form (Attachment D).*

C. Technical Assistance

The Retail Food Specialists should provide program consultation as requested and act as liaison between FDA/CFSAN and the states regarding highly technical issues. These issues may include, but are not limited to, guidance on implementation of the Program Standards, Food Code interpretations, recommendations on compliance procedures, industry management training/certification programs, studies and research concerning retail food protection, etc.

The region should provide program consultation to the retail segment of the industry, industry organizations, and professional organizations as appropriate to promote better understanding and implementation of good public health practices. Requests for consultation regarding new or controversial issues should be coordinated with the RFPT.

3. Training Courses, Regional Seminars and Workshops

A. State Training Courses

The Retail Food Specialists are the principal liaison between the Office of Regional Management/Division of Human Resource Development/State Training Team (ORM/DHRD/STT) and the states regarding training needs and course priority. During the second quarter, state program officials should be advised of the opportunity to request FDA formal classroom training courses for the next fiscal year. The Retail Food Specialists should then provide state training needs to the Regional Food and Drug Director in time to include them in the consolidated state training report. The Retail Food Specialists should participate in all pertinent ORA State Training Team courses that are held in their region. This participation is necessary to provide support to the STT and to provide any required follow up with individual jurisdictions on issues that may arise from interactions at the course.

In addition, specialists will continually provide program officials updates on the availability of courses that can be accessed through DHRD's ORA University. Program officials will be encouraged to assess the training needs of their staff using the criteria presented in "FDA's Recommended National Retail Food Regulatory Program Standard #2 - Trained Regulatory Staff." This assessment should be used as the basis for determining the appropriate courses and delivery methods to fulfill their specific training needs.

B. Annual Multi-State Seminar for State Officials

An annual Regional Food Seminar provides an opportunity for FDA, the state food program directors and standardized/certified officials from each state to discuss issues of mutual concern.

The seminar should focus on Program Standards self-assessments and strategic plans, Food Code interpretations, information exchange, new developments, problem solving, and FDA policies and initiatives impacting retail food protection programs. State reports should follow the format of the "FDA's Recommended National Retail Food Regulatory Program Standards," (http://www.cfsan.fda.gov/~dms/ret-toc.html). The Retail Food Specialists and officials from each state should participate in development of the agenda. Use of outside speakers to discuss special problem areas where appropriate is desirable.

Industry officials should be encouraged to participate. The Retail Food Specialists will provide headquarters with a draft agenda before the seminar to allow RFPT to coordinate their input and participation in the seminar and to suggest current topics of national concern and interest.

C. Regional Seminar Report

The region's Retail Food Specialists will prepare a Regional Seminar Report. This report need only summarize major issues regarding program policy and Food Code interpretations discussed at the meeting. The report need not provide detailed information or minutes of all seminar topics and discussions. If questions of interpretation regarding the Food Code requirements and published interpretations are raised, these questions and proposed regional responses should be referred to RFPT for review before distribution to seminar participants.

The RFPT may also issue the seminar questions and answers to other key food officials, if appropriate. RFPT review and national distribution of the answers will help promote national uniformity.

D. State Workshops

The Retail Food Specialists should conduct workshops as needed by state regulatory officials. These workshops may include in-depth discussion of the FDA's "Voluntary National Retail Food Regulatory Program Standards"; FDA's Food Code; or major subject areas such as implementing the Hazard Analysis Critical Control Point (HACCP), risk factors and interventions or active managerial control approach at retail, foodborne illness investigations, plan review or enforcement. It is recommended that only one subject be covered per workshop.

E. Promotion of Industry Management Training and Certification

Training programs should cover the food safety concepts contained in the Food Code. Additionally, training should include discussions of the contributing factors to foodborne illness and HACCP principles. Cosponsorship of training programs by industry, educational organizations, and regulatory agencies is encouraged.

* In addition, the region should encourage food regulatory authorities and others evaluating credentials for food protection managers to recognize the Conference for Food Protection/ANSI means of accrediting certification programs. This procedure provides a means for universal acceptance of individuals who successfully demonstrate knowledge of food safety. This procedure provides officials assurance that food safety certification is based on valid, reliable, and legally defensible criteria. In addition, universal acceptance eliminates the inconvenience and unnecessary expense of repeating training and testing when managers work across jurisdictional boundaries.

FDA's recommendations pertaining to food protection manager certification may be found in Subpart 2-102 of the Food Code, and the related sections of Annex 3 Public Health Reasons/Administrative Guidelines. Information regarding certification programs that ANSI has accredited as meeting Conference for Food Protection standards may be viewed at http://www.foodprotect.org/ and clicking on, "ANSI - Conference for Food Protection Standards," and then on, "Directory of ANSI Accredited Personnel Certification Programs utilizing Conference for Food Protection (CFP) standards." *

4. National Food Safety Priorities at Retail

A. CFSAN Retail Food Safety Priorities

Time is allotted in the Retail Food Protection Work Plan to accommodate CFSAN priorities that are adjusted annually in response to national food safety needs. RFPT will work with the Steering Committee to establish deliverable objectives within each annual fiscal year work plan. The Steering Committee will look for opportunities to coordinate the implementation of CFSAN initiatives in conjunction with previously identified work plan priorities.

B. Counter-Terrorism at Retail Food Initiative

The Agency has identified the possibility that certain vulnerabilities may exist for tampering or terrorist activity in retail and foodservice establishments. A guidance document for the retail industry focusing on preventive measures *is currently available at the CFSAN web page http://www.cfsan.fda.gov/~dms/secguill.html. *

The National Retail Food Team which includes the Regional Food Specialists will be charged with disseminating this guidance information via several avenues: educational presentations at regional seminars and workshops, one-on-one visits with the state retail food program managers; and the development and delivery of presentations, possibly a video teleconference or pic tel for our stakeholders. Additionally, educational materials and a curriculum for incorporation into several ongoing training courses will be developed, based on the guidance.

C. Food Processing Techniques, Industry Procedures, or Food Equipment Evaluation

- 1. Retail Food Specialists should *evaluate upon request*:
 - a. Food processing techniques or industry procedures equivalency of food safety to the Food Code for alternative or innovative food safety-related procedures. The findings should be based on a scientific analysis or data that the processing method or procedure does not compromise public health and is reasonable for regulatory agencies to evaluate and regulate.
 - b. Food equipment acceptability of design, construction, or installation when requested by RFPT, and as deemed necessary following requests from regulatory agencies, institutions, and industry. The findings should be based on provisions of the Food Code. Other resources that should be consulted include American National Standards Institute (ANSI) Food Equipment Standards, and listings of food equipment that has been evaluated and found in conformance by ANSI accredited certifying bodies. These include organizations such as NSF International (NSF LISTINGS Food Equipment and Related Products, Components and Materials, http://www.nsf.org), Underwriters Laboratories (DIRECTORY Food Service Equipment, http://www.UL.com), and Intertek Testing Services, ETL SEMKO ((published yearly), Directory of Listed Powered Products, http://www.etlsemko.com).
- 2. Retail Food Specialists should complete an evaluation report:
 - a. For food processing techniques or industry procedures

 Describe the technique or process and the specialist's

 evaluation of it in a narrative based on the information and
 appropriate questions found in Annex 2 of the DRAFT "Managing
 Food Safety: A Regulator's Guide for Applying HACCP Principles
 to Risk-Based Retail and Food Service Inspections." When
 applicable, the specialist should follow the pathway in the
 "Model Flow Process for State Regulators to Address Variances"
 found in Annex 3-502.11 of the Food Code.

b. For food equipment - Complete FDA 2591 found at http://www.fda.gov/opacom/morechoices/fdaforms/ora.html after each equipment evaluation. Provide manufacturer's literature, pictures, and other supporting information as appropriate.

PART IV - ANALYTICAL

NOT APPLICABLE.

PART V - REGULATORY/ADMINISTRATIVE FOLLOW-UP

FDA's responsibilities under this Compliance Program consist of advising state program managers on retail food protection matters regarding the preservation and improvement of the public health. No federal regulatory activity is anticipated within the conduct of this Compliance Program. The Agency is available to assist the states upon request or in conjunction with the cooperative working relationships that have been fostered.

For enforcement of the Egg Rule, please refer to the Domestic Food Safety Compliance Program (7303.803) * and the CFSAN website http://www.cfsan.fda.gov/~dms/fs-eggs6.html for additional information.*

PART VI - PROGRAM CONTACTS, REFERENCES AND ATTACHMENTS

1. PROGRAM CONTACTS

A. Center Contacts

- Direct program-related questions to William Baczynskyj, Team Leader, HACCP and Chemical Safety Team., HFS-636, at (301) 436-1612, FAX (301) 436-2657
- 2) Direct technical questions to Glenda R. Lewis, Team Leader, Retail Food Protection Team, HFS-627, at (301) 436-2150.
- 3) Direct domestic enforcement questions to * Donald Greaves at (301)436-2361 or Dwayne Johnson at (301)436-1782 or Brandon Bridgman at (301)436-2073* in the event federal regulatory activity is warranted. No federal regulatory activity, however, is anticipated within the conduct of this compliance program.

B. ORO Contact

Division of Federal-State Relations, HFC-150 at (301) 827-6906.

C. * DHRD Contact

State Training Team, HFC-60, Jim Fear at (301) 827-8725. *

2. REFERENCES

- Food Code, 2005, http://www.cfsan.fda.gov/~ear/retail.html
- Retail Food Protection Program Information Manual (PIM), model codes, model code interpretations, procedures, and guidance that are pertinent information disseminated by RFPT and the National Retail Food Team are available on-line at http://www.cfsan.fda.gov/~ear/retail.html
- Morbidity and Mortality Weekly Report: CDC Surveillance Summaries. 1996, Vol. 45, no. ss-5, pp 51-55.
- FDA's "Voluntary National Retail Food Regulatory Program Standards," http://www.cfsan.fda.gov/~dms/ret-toc.html
- * FDA Procedures for Standardization and Certification of Retail Food Inspection/Training Officers (January 2003 updated version).*

3. ATTACHMENTS

- A. Compliance Program Status Report
- B. Report of Adoption of Recommended Model Code
- C. *FDA Retail Food Program Resource Disk Recipient Contact Information

PROGRAM

Form (reported electronically for each disk distributed).*

D. *FDA Standardized Food Program Inspection/Training Officer Maintenance Form.*

PART VII - CENTER RESPONSIBILITIES

1. PROGRAM SUPPORT

A. Certification of Retail Food Specialists

Upon RFDD request, RFPT will evaluate and certify an appropriate number of qualifying persons, but no less than one specialist per region as established in the "FDA Procedures for Standardization and Certification of Retail Food Inspection/Training Officers (January 2003 updated version).

B. Technical Assistance

The RFPT is responsible for maintaining, enhancing, and promoting the FDA's "Voluntary National Retail Food Regulatory Program Standards" as the means of uniform implementation of food safety regulations and enforcement. The RFPT is responsible for managing the updating of the Food Code and providing interpretations and opinions as necessary to assist the states in implementing the Food Code. The RFPT provides technical consultation to other federal agencies and through the Regional Retail Food Specialists to the field and to states upon request. The RFPT standardizes and certifies regional retail food program specialists to ensure uniform interpretation and application of the model code provisions and national program standards.

C. National Retail Food Program Steering Committee

RFPT will participate as an active member of the Retail Food Program Steering Committee. The Steering Committee is the forum for discussion and resolution of retail food program implementation issues, annual work plan development, agenda development for specialists' conferences, and the primary liaison vehicle with the National Food Specialists Team. The Steering Committee provides a vehicle for coordination between DHRD and DCP.

D. Publication of Listings

RFPT will publish the following at least annually:

- (1) Cumulative listings of confirmed code adoptions by state, tribal, and federal jurisdictions.
- (2) Register of state retail food protection program personnel certified by the Food and Drug Administration.
- (3) Roster of FDA field personnel certified in the use of the Food Code.
- (4) Listing of jurisdictions enrolled and meeting FDA's "Voluntary National Retail Food Regulatory Program Standards."(see http://www.cfsan.fda.gov/~dms/ret-jur.html).

2. Compliance Program Evaluation

The Division of Cooperative Programs, HFS-625, will receive, review, and evaluate all field reports.

During the course of this program, but no later than sixty (60) days after final data receipt, DCP will identify any deficiencies in the conduct of the field operations or program quality to the Office Director, Office of Plant and Dairy Foods (OPDF), HFS-300, and the Compliance Programs Branch, HFS-636, so that any necessary corrective action may be initiated.

DCP, with input from OPDF, HFS-300, will* prepare periodic, formal evaluations of this compliance program. When completed and cleared, the evaluations will be available for agency personnel on CFSAN's OC intranet site #.*

PROGRAM

7318.002

ATTACHMENT A

Compliance Program Status Report

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TEAM			PAC	180	002									# FTE		% ACTUAL	OTHER		TOTAL
TIME													ACTUAL		Obligation	(AE) TO		18002	HOURS
by													(AE)	Staff	-	Time	18		(18 +
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REPORT OF ADOPTION OF RECOMMENDED MODEL CODE (To be completed by FDA Field Food Specialist only) 1. ADOPTING GOVERNMENT JURISDICTION 2. ADOPTION a. TYPE (Check one) STATUTE - ACT OF LEGISLATURE REGULATION - PROMULGATED BY ADMINSTRATIVE AGENCY UNDER AUTHORITY OF LAW ORDINANCE ADOPTION BY LOCAL GOVERNMENT b. FORMAT (Check one) LONG FORM SHORT FORM (By reference) c. DATE ADOPTED d. ADOPTING BODY (State Legislature, PH Council, County Board of Supervisors (Commissioners), City Council, etc.) 3. EFFECTIVE DATE OF ADOPTED CODE 4. AGENCY DESIGNATED TO ASSUME RESPONSIBILITY (State or Local Department of Health, Agriculture, Consumer Protection, etc.) 5. DEVIATIONS BETWEEN ADOPTED CODE AND FDA RECOMMENDATION (Discuss in detail significant differences, if any, between recommended code and adopted code. For State adoptions, attach a copy of the new law/regulations and inspection report form.)

REPORT OF ADOPTION OF RECOMMENDED MODEL CODE (To be completed by FDA Field Food Specialist only)	
6. COMMENTS	
7 EQUIVALENCY (CHOOSE OPTION A OR B) A. IN ACCORDANCE WITH THE SELF-ASSESSMENT AND AUDIT CONDUCTOR THIS CODE IS CONSIDERED TO BESUBSTANTIALLY EQUIVALENT.	
B. NO SELF-ASSESSMENT HAS BEEN CONDUCTED. HOWEVER, USING TOODE INTERVENTIONS AND RISK CONTROLS AT LEAST AS STRINGS APPROXIMATELY 95% OF GMP REQUIREMENTS INCLUDED, THE JURE HAS PORTRAYED TO THE SPECIALIST THAT THIS CODE	ENT AS THE MODEL AND ISDICTION'S REPRESENTATIVE
8. SIGNATURE OF FDA FIELD FOOD SPECIALIST	9. DATE

FDA RETAIL FOOD PROGRAM RESOURCE DISK

RECIPIENT CONTACT INFORMATION

NAME:
TITLE:
AGENCY:
PHONE:
FAX:
E-MAIL:
Would you like a FDA Regional Food Specialist to contact you regarding the Voluntary National Retail Food Regulatory Program Standards?
Yes No
Would you like a FDA Regional Food Specialist to contact you regarding any other aspect pertaining to your retail food protection program?
Yes No
Yes No If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area.
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area.
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area. How to conduct Baseline on the occurrence of foodborne illness risk factors
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area. How to conduct Baseline on the occurrence of foodborne illness risk factors Food Code Standardization and Certification
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area. How to conduct Baseline on the occurrence of foodborne illness risk factors Food Code Standardization and Certification Pending Conference for Food Protection Issues
If you indicated yes, what item(s) or issue(s) would you like to discuss with them? Place an (X) next to the subject area. How to conduct Baseline on the occurrence of foodborne illness risk factors Food Code Standardization and Certification Pending Conference for Food Protection Issues Retail Food Program Training Needs

FDA Standardized Food Program Inspection/Training Officer Maintenance Form

Name:						
Agency:						
Date FDA Standa		sued:		/		
Date FDA Standardizat	ion expires:	/				
To maintain you standardize or re-standardization guidelin Courses or a combination each year. See Chapter	irdize 5 other retail f es, develop 5 Risk (on of RCPs and Trai	food progra Control Pla ining Cours	m inspection pens or conduct/coes that equals 5	ersonnel pe oordinate 5 5, and atten	er year using the food protection	e FDA n Training
Please provide	information	for New	and Re-s	tandard	lizations	<u>in</u>
<u>charts below.</u>						
	New Standard	dizatio	ns in past	year:		
Name	Agency		Date Complet	ed / Locatio	on	
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	Re-Standard	lization	ıs in past	year:		
Name	Agency		Date Complet	ed / Locatio	on	
						7
						4
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Please list Training courses given / RCP in past year:

Name	Agency	Date / Location
Regional Seminar A	ttendance	
g		
Date Attended	Locat	ion
Please provide a	additional information on	any other activities that would
<u>demonstrate a ro</u>	outine engagement in reta	il food protection program work.
Information migh	nt include activities such	h as consultative, technical
		ided to consumers, private industry or
	llatory authorities.	<u> </u>
	_	
Type of Activity	Consumer/Industry/Agency	Date / Location
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Date submitte	d• / /	
Dare Bunmitch	· / /	

TRANSMITTAL NO: PAGE 2

FDA Standardized Officer