

**CERRO GORDO COUNTY DEPARTMENT OF PUBLIC
HEALTH FOOD SAFETY ASSESSMENT MEETING
QUESTIONNAIRE**

Based on 8-201.12(E) of the 2013 Food Code an applicant for a new food license must ensure that standard procedures are developed or are being developed to demonstrate compliance with the Food Code. An interview must be scheduled by the applicant with the Cerro Gordo County Department of Public Health before a license can be issued, call (641) 421-9300. The interview is to help the Department determine if the applicant is in compliance with 8-201.12(E) and if food safety risk factors will be controlled. If the applicant does not meet the intent of 8-201.12(E) further information or additional interviews may be needed.

Additionally the Person-in-Charge must **ensure** food safety practices are in place. The duties are covered in 2-103.11 of the 2013 Food Code. Some of those duties will be discussed in this interview.

MATERIALS CHECKLIST TO BRING TO THE FOOD SAFETY ASSESSMENT MEETING:

- The **food license application and ALL associated documentation required in the application** (If you have already submitted it to this office, you do not need to bring another copy):
- Any documentation (policies, procedures, training manual, etc.) that helps to demonstrate awareness, knowledge, or practices related to food safety.
- This completed questionnaire.

New Facility_____ **Change of Ownership**_____ **Other (Explain)**_____

CONTACT INFORMATION:

Business Name_____

Operating Address_____

Type of Establishment_____

Name of Owner_____

Person(s) in Charge_____

Certified Food Protection Manager: YES ___ NO ___

NAME _____ EXPIRATION DATE _____

FACILITY REPRESENTATIVES ATTENDING THE ASSESSMENT (NAME AND TITLE):

Translator (if needed the applicant must provide):

DO YOU KNOW ABOUT THE IOWA RULES GOVERNING FOOD SAFETY IN FOOD ESTABLISHMENTS?

YES ___ NO ___

EXPLAIN _____

COLD HOLD:

Will food be held cold? Yes ___ No ___ If no, skip to HOT HOLD

Refrigeration and Freezers adequate (enough capacity) for cold storage needs: YES ___ NO ___

What is the maximum temperature for holding cold food? _____

THE PERSON-IN-CHARGE MUST ENSURE COLD FOOD IS COLD

What procedures/monitoring will be in place to ensure cold food is maintained cold?

EXPLAIN _____

What training will be in place to ensure cold food is maintained cold?

EXPLAIN _____

What oversight will be in place to ensure cold food is maintained cold?

EXPLAIN _____

HOT HOLD:

Will food be held hot? Yes___ No___ If no, skip to COOLING

LIST FOODS TO BE HELD HOT:

EQUIPMENT ADEQUATE FOR HOT HOLDING: YES___ NO___

What is the minimum temperature for holding hot food? _____

THE PERSON-IN-CHARGE MUST ENSURE HOT FOOD IS HOT

What procedures/monitoring will be in place to ensure hot food is maintained hot?

EXPLAIN _____

What training will be in place to ensure hot food is maintained hot?

EXPLAIN _____

What oversight will be in place to ensure hot food is maintained hot?

EXPLAIN _____

COOLING:

Will food be cooled? Yes___ No___ If no, skip to COOKING

From ambient to cold: Yes___ No___ From hot to cold: Yes___ No___

LIST FOODS TO BE COOLED:

Cooling methods to be used: Shallow/uncovered pans ___ Rapid chill equipment ___ Reduced volumes ___ Ice Baths ___ Metal Containers ___ Cooling Paddles ___ Ice as ingredient ___ Pre-chilling ingredients ___ Pre-chilling pans ___

EQUIPMENT ADEQUATE FOR COOLING: YES ___ NO ___

What are the time/temperature parameters for cooling? _____

THE PERSON-IN-CHARGE MUST ENSURE FOOD IS COOLED PROPERLY

What procedures/monitoring will be in place to ensure food is cooled properly?

EXPLAIN _____

What training will be in place to ensure food is cooled properly?

EXPAIN _____

What oversight will be in place to ensure food is cooled properly?

EXPLAIN _____

COOKING:

Will raw animal foods be cooked? Yes ___ No ___ If no, skip to REHEATING

EQUIPMENT ADEQUATE FOR COOKING: YES ___ NO ___

What are the minimum temperatures for cooking (list all that apply to your operation)?

_____ F

_____ F

_____ F

_____ F

_____ F

_____ F

THE PERSON-IN-CHARGE MUST ENSURE FOOD IS COOKED PROPERLY

What procedures/monitoring will be in place to ensure food is cooked adequately?

EXPAIN _____

What training will be in place to ensure food is cooked adequately?

EXPLAIN _____

What oversight will be in place to ensure food is cooked adequately?

EXPLAIN _____

REHEATING:

Will food be reheated for hot holding? Yes___ No___ If no skip to

WAREWASHING/CLEANING/SANITIZING

LIST FOODS TO BE REHEATED:

EQUIPMENT ADEQUATE FOR REHEATING: YES___ NO___

What is the minimum temperature for reheating food prepared on-site? _____

What is the minimum temperature for reheating food opened from commercial packaging? _____

THE PERSON-IN-CHARGE MUST ENSURE FOOD IS REHEATED PROPERLY

What procedures/monitoring will be in place to ensure food is reheated adequately?

EXPLAIN _____

What training will be in place to ensure food is reheated adequately?

EXPLAIN _____

What oversight will be in place to ensure food is reheated adequately?

EXPLAIN _____

WAREWASHING/CLEANING/SANITIZING:

Type of equipment used for ware-washing? 3-compartment sink___

Commercial Dishwasher (High Temp___ Low Temp___)

EQUIPMENT ADEQUATE FOR WAREWASHING: YES___ NO___

What type(s) of sanitizer will be used in the facility? _____

Are test papers available to test all sanitizers that will be used? Yes___ No___

If a high temperature dish-washer is used, do you have an irreversible heat indicator? Yes ___ No ___

What are the minimum temperature and/or sanitizer concentrations for equipment and products you are using? _____

Sanitizing buckets in use? Yes ___ No ___

THE PERSON-IN-CHARGE MUST ENSURE WARES ARE ADEQUATELY CLEANED AND SANITIZED

What procedures/monitoring will be in place to ensure wares are adequately cleaned and sanitized?
EXPLAIN _____

What training will be in place to ensure wares are adequately cleaned and sanitized?
EXPLAIN _____

What oversight will be in place to ensure wares are adequately cleaned and sanitized?
EXPLAIN _____

CROSS CONTAMINATION PREVENTION:

Are there raw animal foods at the facility? Yes ___ No ___ If no, skip to EMPLOYEE HEALTH

How will foods be stored to prevent cross contamination? _____

Explain cross contamination prevention measures in place during preparation (hands, surfaces, equipment)?

HOW WILL THE PERSON-IN-CHARGE ENSURE CROSS CONTAMINATION DOES NOT OCCUR?

EXPLAIN _____

EMPLOYEE HEALTH:

Will employees handle unpackaged food, wares, or single service items? Yes ___ No ___ If no, skip to HANDWASHING

What symptoms are required to be reported to the person-in-charge?

What diagnosed illnesses are required to be reported to the Health Department by the PIC?

Are employees informed in a *verifiable manner* about their responsibility to report symptoms, illnesses and exposures? YES___ NO___ How?

Do you have a written policy related to employee illness? Yes___ No___

How will you manage FOOD EMPLOYEES experiencing persistent sneezing, coughing, or a runny nose (2-401.12)? _____

HOW WILL THE PERSON-IN-CHARGE ENSURE FOOD WORKERS DON'T WORK WITH RELEVANT SYMPTOMS OR ILLNESSES?

EXPLAIN _____

HANDWASHING:

Will employees handle unpackaged food, wares, or single service items? Yes___ No___ If no, skip to AVOIDING BAREHAND CONTACT WITH READY-TO-EAT FOOD

EQUIPMENT ADEQUATE FOR HAND WASHING (To allow convenient use by employees in food preparation, food dispensing, ware-washing areas and in or immediately adjacent to toilet rooms).

YES___ NO___

Hot and cold water: Yes___ No___ Hand Drying: Yes___ No___ Soap: Yes___ No___

Signage: Yes___ No___ Waste receptacle: Yes___ No___

THE PERSON-IN-CHARGE MUST ENSURE FOOD WORKERS ARE PROPERLY WASHING THEIR HANDS

Where will employees wash their hands? _____

How will employees wash their hands? _____

When will employees wash their hands?

What training will be in place to ensure employees wash their hands?

EXPLAIN _____

What oversight will be in place to ensure employees wash their hands?

EXPLAIN _____

AVOIDING BAREHAND CONTACT WITH READY-TO-EAT FOOD:

Will employees handle unpackaged food? Yes___ No___ If no, skip to SOURCE

What types of barriers are available for employees to avoid bare hand contact with ready-to-eat food (single-use gloves, deli tissues, utensils, etc.)? _____

THE PERSON-IN-CHARGE MUST ENSURE FOOD WORKERS ARE NOT TOUCHING READY-TO-EAT FOOD WITH THEIR BARE HANDS

What procedures will be in place to ensure employees avoid bare hand contact?

EXPLAIN _____

What training will be in place to ensure employees avoid bare hand contact?

EXPLAIN _____

What oversight will be in place to ensure employees avoid bare hand contact?

EXPLAIN _____

SOURCE:

What are all the sources of food? _____

Will incoming food be checked for: Temperature: Yes___ No___ Condition: Yes___ No___

OTHER INFORMATION

SMALL DIAMETER PROBE THERMOMETER: Yes___ No___ NA___

PROCESSES: Will you be doing any of the following (CHECK ALL THAT APPLY): Smoking ___ ROP ___ curing ___ pH/a_w adjustment to make food shelf stable ___ sprouting seeds ___ unpasteurized juicing ___ molluscan shellfish tank ___ non-continuous cooking (par-cooking) ___ using time as control ___

DO YOU NEED A CONSUMER ADVISORY? YES___ NO___

WHAT ARE THE MAJOR FOOD ALLERGENS?

Thawing methods to be used: _____

Explain date marking procedures (what food, how long before discarded, etc.)

I hereby certify that the information provided is accurate and truthful.

Signature(s): _____

Permit Holder or Person In Charge _____

Date: _____

INSTRUCTIONS TO OPERATOR:

Note: This questionnaire is not all encompassing of all aspects of the Food Code. Approval of this assessment by the Department does not indicate compliance with any other code, law or regulation that may be required by federal, state, or local agencies. It further does not constitute endorsement or acceptance of the completed establishment (structure, equipment, or operational plans).

A pre-opening inspection of the establishment with equipment installed and operational is required prior to commencing operations.

Steps to receive a food license:

1. *Submit a food license application, all associated documentation, and license fee*
2. *Attend the Food Safety Assessment Meeting*
3. *Pre-opening inspection of the facility*

For Department of Public Health Staff Use Only

____ PASS: Based on the food safety information and plans provided today, the facility has demonstrated sufficient knowledge to receive a food permit. The PIC(s) agree to apply the above food safety practices and control the five (5) foodborne illness risk factors in the facility at all times. Failure to do so may result in enforcement action(s).

____ FAILED: Based on the food safety information and plans provided today, the facility has not demonstrated sufficient knowledge to receive a food permit. The facility may reschedule an additional Food Safety Assessment meeting when sufficient knowledge has been obtained. Outlined below are uncontrolled risks for foodborne illness.

Uncontrolled risks:

- Poor personal hygiene ____
- Improper cooking/reheating ____
- Contamination/Cleaning and Sanitizing ____
- Foods from unsafe source ____
- Improper holding/time and temperatures ____
- Cooling ____

PASS: Schedule pre-opening inspection with Cerro Gordo County Department of Public Health; for appointment call (641) 421-9300 _____

OR

FAIL: Review food safety practices and necessary information, then reschedule Food Safety Assessment Meeting. Call (641) 421-9300 to schedule. _____

Reviewer: _____

Signature: _____

TIME IN: _____

TIME OUT: _____

RESULT: PASS ____ Fail ____