

Plan/Procedure for Bare Hand Contact As specified in 2013 Food Code 3-301.11(E)

Completion and submission of this form to the local regulatory authority will serve as an application for approval of bare hand contact with ready-to-eat foods in a retail food setting. The plans and procedures outlined must be approved by the local regulatory authority in order to allow bare hand contact with ready-to-eat food. A copy of the approved application must be kept on the premises of the establishment and be made available to the regulatory authority on request. Local regulatory authorities will work closely with establishments as the state transitions to rules adopting sections of the FDA Food Code.

All citations below reference the 2013 FDA Food Code available at:

<http://www.fda.gov/downloads/Food/GuidanceRegulation/RetailFoodProtection/FoodCode/UCM374510.pdf>

1. Establishment Name: _____

2. Establishment Address: _____

3. Responsible Person: _____ Phone: _____
(Legal Representative Business)

4. List specific Ready-to-Eat Foods and the preparation process where they will be handled with bare hands. Use additional sheets of paper if the space provided is not adequate.

<u>Ready to Eat Food</u>	<u>Process</u>
E.g. tortilla shells	Rolling burrito

5. Handwashing Facilities:

- a. At least one hand washing sink is located near the area where the above bare hand contact procedures will be conducted. (§5-203.11; 5-204.11) Yes No
- b. The hand washing sink will be accessible at all times for employee use and will not be used for any purpose other than handwashing. (§5-205.11) Yes No
- c. The hand washing sink has soap and disposable paper towels or other acceptable drying method. (§6-301.11; §6-301.12) Yes No
- d. The hand washing sink has a clearly visible sign or poster notifying employees that hand washing is required. (§6-301.14) Yes No
- e. All toilet rooms must have one or more handwashing sinks in or immediately adjacent to them. These sinks must be equipped and maintained in accordance with provisions of the Code. (§ 5-205.11, § 6-301.11, § 6-301.12, and § 6-301.14) Yes No

Attach a diagram, photo, or other information showing the location of hand sinks and include information on the distance (feet) to areas where bare hand contact is being proposed.

6. The following control measures will be used (at least two) by employees contacting ready-to-eat foods with bare hands:

- Double handwashing;
- Use of nail brushes;
- Use of hand antiseptic after handwashing;
- Incentive programs such as paid leave encouraging food employees not to work when they are ill; or
- Other control measures approved by the regulatory authority (list)

7. Provide examples of corrective actions that will be taken if any of the above procedures are not followed, and include how corrective actions will be documented.

8. Employee Health Policy:

You must have a written employee health policy and maintain documentation that food employees have read it, and understood their responsibilities and the requirement to report illness. (§ 2-201.11, § 2-201.12, and § 2-201.13).

Attach your policy as well as information on how you will document that employees have read it and understand their responsibilities.

9. Food employees must receive training in:

- The risks of contacting the specific ready-to-eat foods with bare hands;
- Personal health and activities as they relate to diseases that are transmissible through food;
- Proper handwashing procedures to include how, when, where to wash, and fingernail maintenance (§ 2-301.12, § 2-301.14, § 2-301.15, and § 2-302.11);
- Prohibition of jewelry (§ 2-303.11); and
- Good hygienic practices (§ 2-401.11 and § 2-401.12)

Explain how you will document that food employees acknowledge they have received this training.

Statement of Compliance: I certify all of the following: I understand that bare hand contact with ready-to-eat food is prohibited except for those items listed in section four (4) above. All handwashing sinks are maintained with hot water, soap, and drying devices. I understand that documentation is required to be maintained as part of the approved application and must be kept current and site. I understand that it is my responsibility to ensure that employees are following all of the requirements of the approved application.

SIGNATURE: _____ DATE: _____
(Signature of legal representative of the facility listed above)

Regulatory Authority (RA) Use Only:

License (Permit) Number: _____

File Review Conducted on History of Handwashing Compliance: Yes No

Site Visit Conducted: Yes No

Comments: _____

Approved Effective Date: _____

Not Approved Reason for Denial:

RA Name: _____