

**MDARD Standardization Exercise
Field Workbook**
To be used with Option A or Option B

Candidate: _____

Agency Name: _____

Address: _____

City/State/Zip code: _____



Michigan Department of Agriculture and Rural Development
Food and Dairy Division
Food Service Program
Revised March 2013

Procedures for Field Standardization of Trainers Workbook

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STANDARDIZATION EXERCISE SUMMARY AND CHECK SHEET

Option A: The initial standardization process requires 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.

During at least one of the joint inspections, the Candidate will develop a Risk Control Plan with the person in charge for a critical control point that is out of compliance. (Annex 3, Section 1).

Exercise	Date	Facility	Standard
Risk Control Plan			

Option B: The initial 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 as available. (Complete Annex 2, Section 1 for each)

During at least one of the joint inspections, the Candidate will develop a 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.

- Process 1: Food prepared with no cook step - a ready-to-eat food that is stored, prepared and served such as green salad, tuna salad, coleslaw or Caesar salad dressing.
- Process 2: Food prepared for same day service – food that is stored, prepared, cooked, and served such as hamburgers, hot vegetables, cooked eggs, and entrees for “special of the day”.
- Process 3: Complex food preparation – food that is stored, prepared, cooked, cooled, reheated, hot held and served such as soups, sauces, large roasts, chili, taco filling and egg rolls.

Exercise	Date	Facility	Standard
HACCP Verification			
Risk Control Plan			
Flow Chart 1			
Flow Chart 2			
Flow Chart 3			
Highly Susceptible Population Facility			

STANDARDIZATION EXERCISE LOG

Candidate: _____

Inspections for Standardization:

Facility	City	Date	Standardizing Officer
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

ADD Chart to track

Temperature Recording Tables

Cooling			
Item	Time	Temp.	Location

Cold Holding			
Item	Time	Temp.	Location

Hot Holding			
Item	Time	Temp.	Location

Cooking			
Item	Time	Temp.	Location

MDARD/FDA Standardization Inspection Report Form 2009 Food code

Establishment Name:		Type of Facility:	
		Person in Charge:	
Physical Address:	State:	Zip:	County:
	Inspection Time Out:	Date:	Candidate's Name:
City:	STANDARD's Name:		Indicate Person Filling Out Form: (circle one) Candidate's Form / STANDARD's Form

*For each item, indicate one of the following for OBSERVATIONAL STATUS:

IN – Item found in compliance

N.O. – Not observed

OUT – Item found out of compliance

N.A. – Not applicable

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

FOODBORNE ILLNESS RISK FACTORS AND *FOOD CODE* INTERVENTIONS Supervision

STATUS

1. Person in charge present, demonstrates knowledge, and performs duties

IN OUT A. Assignment – PIC is present

IN OUT B. Demonstration – Code compliance, certified via testing with accredited program, or responses to safety questions regarding operation

IN OUT C. Duties of PIC

Employee Health

IN OUT 2. Management, food employee and conditional employee; Knowledge, responsibilities and reporting

IN OUT 3. Proper use of restriction and exclusion

Good Hygienic Practices

IN OUT 4. Proper eating, tasting, drinking, or tobacco use
NO

IN OUT 5. No discharge from eyes, nose, and mouth
NO

Control of Hands as a Vehicle of Contamination

- IN OUT 6. Hands clean & properly washed
NO

- IN OUT 7. No bare hand contact with RTE foods or a pre-approved
NA NO alternative procedure properly followed

- IN OUT 8. Handwashing sinks properly supplied and accessible
A. Handwashing sinks conveniently located and accessible for employees

- IN OUT B. Handwashing sinks supplied with hand cleanser/sanitary towels/hand drying
devices/ signage

Approved Source

- IN OUT 9. Food obtained from approved source
A. All food from regulated food processing plants/no home prepared or canned
NO foods/ standards for eggs, milk, juice

- IN OUT B. All Molluscan shellfish for ICSSL listed sources/no recreationally caught
NO shellfish received or sold/all fish commercially caught/raised

- IN OUT C. Game animals and wild mushrooms approved by regulatory authority
NA NO

- IN OUT 10. Food received at proper temperature
NA NO

- IN OUT 11. Food in good condition, safe, and unadulterated

- IN OUT 12. Required records available: shellstock tags, parasite destruction
A. Written documentation of parasite destruction maintained for 90 days for fish
NA NO products that are intended for raw or undercooked consumption

- IN OUT B. Shellstock tags maintained for 90 days in chronological order
NA NO

Protection from Contaminat

- IN OUT 13. Food separated and protected
A. Separating raw animal foods from raw RTE food and separating raw animal
NA NO food from cooked RTE food

- IN OUT B. Raw animal foods separated from each other during storage,preparation,
NA NO holding, and display

- IN OUT C. Food protected from environmental contamination

- IN OUT 14. Food-contact surfaces: cleaned and sanitized
NA

15. Proper disposition of returned, previously served, reconditioned, and unsafe food
- IN OUT A. After being served or sold to a consumer, food is not reserved
- IN OUT B. Discarding or reconditioning unsafe, adulterated, or contaminated food

Potentially Hazardous Food(PHF) Time/Temperature Control for Safety(TCS)

16. Proper cooking time & temperatures
- IN OUT A. Raw eggs broken on request and prepared for immediate service cooked to
NA NO 63°C (145°F) for 15 seconds
- IN OUT B. Comminuted fish, meat, game animals commercially raised for food, and raw
NA NO eggs not prepared for immediate service and comminuted meat on a child's menu cooked to 68°C (155°F) for 15 seconds or the time/temperature relationship in the chart in the Food Code
- IN OUT C. Whole meat roast, including beef, corned beef, lamb, pork, cured pork roasts
NA NO and formed roasts, cooked to 54°C (130°F) for 112 minutes or as chart specifies and according to oven parameters per chart
- IN OUT D. Ratites and injected meats or mechanically tenderized meats cooked to 68°C
NA NO (155°) for 15 seconds or the time/temperature relationship specified in the corresponding chart in the Food Code.
- IN OUT E. Poultry; baluts; stuffed fish/meat/pasta/poultry/ratites; stuffing
NA NO containing fish, meat, poultry, or ratites; or raw animal foods with a non-continuous cooking process cooked to 74°C (165°F) for 15 seconds
- IN OUT F. Wild game animals cooked to 74°C (165°F) for 15 seconds
NA NO
- IN OUT G. Whole-muscle, intact beef steaks cooked to surface temperature of 63°C
NA NO (145°F) on top and bottom. Meat surface has a cooked color.
- IN OUT H. Raw animal foods rotated, stirred, covered, and heated to 74°C (165°F) in
NA NO microwave. Food stands for 2 minutes after cooking.
- IN OUT I. All other raw animal foods cooked to 63°C (145°F) for 15 seconds
NA NO
17. Proper reheating procedures for hot holding
- IN OUT A. PHF/TCS Food that is cooked and cooled on premises is rapidly reheated
NA NO within 2 hours to 74°C (165°F) or above for 15 seconds for hot holding
- IN OUT B. Food reheated to 74°C (165°F) or above in microwave for hot holding
NA NO
- IN OUT C. Commercially processed, RTE food reheated to 57°C (135°F) or above for hot
NA NO holding

- IN OUT
NA NO D. Remaining unsliced portions of roasts reheated for hot holding using minimum over parameters
18. Proper cooling time & temperatures
- IN OUT
NA NO A. Cooked PHF/TCS Food cooled from 57°C (135°F) to 21°C (70°F) within 2 hours and from 57°C (135°F) to 5°C (41°F) or below in 6 hours
- IN OUT
NA NO B. PHF/TCS Food prepared from ambient temperature and/or pre-chilled ingredients cooled to 5°C (41°F) or below in 4 hours
- IN OUT
NA NO C. Foods (milk/shellfish) received at a temperature according to law cooled to 5°C (41°F) or below in 4 hours
- IN OUT
NA NO D. Immediately upon receiving, eggs placed under refrigeration that maintains ambient air temperature of 7°C (45°F)
19. Proper hot holding temperatures
- IN OUT
NA NO A. PHF/TCS Food maintained at 57°C (135°F) or above, except during preparation, cooking, or cooling, or when time is used as a public health control
- IN OUT
NA NO B. Roasts held at a temperature of 54°C (130°F) or above
20. Proper cold holding temperatures
- IN OUT
NA A. PHF/TCS Food maintained at 5°C (41°F) or below, except during preparation, cooking, cooling, or when time is used as a public health control
- IN OUT
NA NO B. Untreated eggs stored in 7°C (45°F) ambient air temperature
21. Proper date marking & disposition
- IN OUT
NA NO A. Date marking for RTE, PHF/TCS Food prepared on-site or opened commercial container held for more than 24 hours
- IN OUT
NA NO B. Discarding RTE, PHF/TCS Food prepared on-site or opened commercial container held at ≤5°C (41°F) for ≤ 7 days
- IN OUT
NA NO 22. Time as a public health control: procedures & records

Consumer Advisory

- IN OUT
NA 23. Consumer advisory provided for raw or undercooked foods

Highly Susceptible Populations

- IN OUT
NA 24. Pasteurized foods used; prohibited foods not offered
- IN OUT
NA A. Prepackaged juice/beverage containing juice with a warning label [21 CFR, Section 101.17(g)] not served

IN OUT
NA B. Using pasteurized eggs in recipes if eggs are to be undercooked; or are combined unless: cooked to order & immediately served; used immediately before baking and thoroughly cooked; or prepared under a HACCP plan controlling *Salmonella* Enteritidis

IN OUT
NA C. Raw or partially cooked animal food and raw seed sprouts not served

IN OUT
NA D. Foods not re-served under certain conditions

Food/Color Additives and Toxic Substances

IN OUT
NA 25. Food additives: approved and properly used

IN OUT
NA 26. Toxic substances properly identified, stored, and used
A. Poisonous or toxic materials, chemicals, lubricants, pesticides, medicines, first aid supplies, and other personal care items properly identified, stored, and used

IN OUT
NA B. Poisonous or toxic materials held for retail sale properly stored

Conformance with Approved Procedures

IN OUT
NA 27. Compliance with variance, specialized process, ROP Criteria & HACCP plan
A. Reduced Oxygen Packaging (ROP) as specified in 3-502.12 permitted without variance under certain specified conditions in accordance with a required HACCP plan.

IN OUT
NA B. Operating in accordance with approved variance and/or HACCP plan when required

IN OUT
NA C. When packaged in a food establishment, juice is treated under a HACCP plan to reduce pathogens or labeled as specified in the Food Code

Score: Number of disagreements for Interventions/Risk Factors _____

GOOD RETAIL PRACTICES (GRPs)

Safe Food and Water

- IN OUT 28. Pasteurized eggs used where required
- IN OUT 29. Water and ice from approved source
- IN OUT 30. Variance obtained for specialized processing methods
NA

Food Temperature Control

- IN OUT 31. Proper cooling methods used; adequate equipment for temperature control
- IN OUT 32. Plant food properly cooked for hot holding
NA NO
- IN OUT 33. Approved thawing methods used
NA NO
- IN OUT 34. Thermometers provided & accurate

Food Identification

- IN OUT 35. Food properly labeled; original container

Prevention of Food Contamination

- IN OUT 36. Insects, rodents, & animals not present/outer openings protected
- IN OUT 37. Contamination prevented during food preparation, storage & display
- IN OUT 38. Personal cleanliness
- IN OUT 39. Wiping cloths: properly used & stored
- IN OUT 40. Washing fruits & vegetables

Proper Use of Utensils

- IN OUT 41. In-use utensils: properly stored
- IN OUT 42. Utensils, equipment & linens: properly stored, dried, & handled
- IN OUT 43. Single-use/single-service articles: properly stored & used
- IN OUT 44. Gloves used properly

Utensils, Equipment and Vending

IN OUT 45. Food & non-food contact surfaces cleanable, properly designed, constructed, & used

IN OUT 46. Warewashing facilities: installed, maintained, & used; test strips

IN OUT 47. Non-food contact surfaces clean

Physical Facilities

IN OUT 48. Hot & cold water available; adequate pressure

IN OUT 49. Plumbing installed; proper backflow devices

IN OUT 50. Sewage & waste water properly disposed

IN OUT 51. Toilet facilities: properly constructed, supplied, & cleaned

IN OUT 52. Garbage & refuse properly disposed; facilities maintained

IN OUT 53. Physical facilities installed, maintained, & clean

IN OUT 54. Adequate ventilation & lighting; designated areas used

Score: Number of disagreements for Good Retail Practices_____

**STANDARDIZATION
FIELD EVALUATION WORKSHEET
(Performance Elements and Competencies)**

Establishment Name:	Establishment Address:	
Food Safety Inspection Officer's Name:	Food Safety Inspection Officer's Agency	
Trainer's Name:	Trainer's Agency:	
Date of Inspection Led by Trainee:	Time IN:	Time OUT:

I. Pre-Inspection

	A) Equipment and forms	Opportunity to Demonstrate Competency	Competency Demonstrated	
		NO	YES	NO
1	Necessary inspection forms and administrative materials.			
2	Calibrated thermocouple temperature measuring device.			
3	Maximum registering thermometer or temperature sensitive tapes for verifying hot water warewashing final rinse temperature.			
4	Chemical test kits for chlorine, iodophor, and quaternary ammonia sanitizers; flashlight; alcohol swabs.			
Comments:				
	B) File Review			
1	Reviewed previous inspection report noting documented out of compliance observations, enforcement, variances, or HACCP			
2	Reviewed establishment file for complaint reports.			
Comments:				

II. Inspections Observations and Performance

	A) Evaluation Introduction			
1	Verbally provided name and agency to person in charge. Presented regulatory identification or business card.			
2	Stated the purpose of the visit. Requests and confirms permission to conduct inspection from the person in charge prior to initiating the inspection.			
Comments:				

II. Inspections Observations and Performance

	B) Laws and Regulations	Opportunity to Demonstrate Competency	Competency Demonstrated	
		NO	YES	NO
1	Verified the correct critical limit and or standard specified in the jurisdiction's rules/regulations to the observation made.			
2	Correctly cited the rule/regulation for each out of compliance observation.			
Comments:				
	C) Risk Based Inspection / Active Managerial Control			
1	Verified demonstration of knowledge of the person in charge.			
2	Verified the restriction or exclusion of ill employees.			
3	Verified the availability of a consumer advisory for foods of animal origin served raw or undercooked.			
4	Verified approved food sources (e.g., food from regulated food processing plants; shellfish documentation; wild game & mushrooms, game animal processing; parasite destruction for certain species of fish intended for raw consumption; receiving temperatures).			
5	Verified cooking temperatures to destroy bacteria and parasites.			
6	Verified reheating temperatures of TCS food for hot holding.			
7	Verified cooling temperatures of TCS food to prevent the outgrowth of spore-forming or toxin-forming bacteria.			
8	Verified cold holding temperatures of foods requiring time/temperature control for safety (TCS food), or when necessary, verified that procedures are in place to use time alone to control bacterial growth and toxin production.			
9	Verified hot holding temperatures of TCS food or when necessary, that procedures were in place to use time alone to prevent the outgrowth of spore-forming bacteria.			
10	Verified date marking of ready-to-eat foods TCS food held for more than 24 hours.			
11	Verified food safety practices for preventing cross-contamination of ready-to-eat food.			
12	Verified food contact surfaces are clean and sanitized, protected from contamination from soiled cutting boards, utensils, aprons, etc., or raw animal foods.			
13	Verified employee hand washing (including facility availability)			
14	Verified good hygienic practices (eat, drinking, tasting, and sneezing, coughing or runny nose no work with food/utensils)			
15	Verified no bare hand contact with ready-to-eat foods (or use of a pre-approved, alternative procedure).			

16	Verified proper use, storage and labeling of chemicals; sulfites			
17	Identified food processes and/or procedures that require an HACCP Plan per the jurisdiction's regulations.			
Comments:				

II. Inspections Observations and Performance

	D) Immediate corrective action	Opportunity to Demonstrate Competency		Competency Demonstrated	
		NO	YES	YES	NO
1	Notified the person in charge/employee(s) of the out of compliance observations.				
2	Reviewed corrective actions with the person in charge/employee(s).				
3	Observed the person in charge/employee(s) immediately take corrective action for out of compliance observations (e.g., movement of food to ensure product temperature or prevent contamination; reconditioning food; restriction/exclusion of ill employees; discarding of food product) in accordance with local jurisdiction's procedures.				
Comments:					
	E) Good Retail Practices				
1	Correctly assesses compliance status of other regulations (not included in Item 3 – Good Retail Practices) that are included in jurisdiction's prevailing statutes, regulations and/or ordinances.				
Comments:					
	F) Previous Inspection Correct				
1	Verifies correction of out of compliance observations identified during previous inspection.				
Comments:					
	G) Use of Equipment				
1	Used temperature measuring devices/probes in accordance with manufacturer's instructions.				

2	Cleaned and sanitized (alcohol swabs) temperature measurement probes to prevent food contamination.			
3	Used maximum registering thermometer or heat sensitive tapes in accordance with manufacturer's instructions to verify final rinse dishwasher temperature.			
4	Used chemical test strips in accordance with manufacturer's instructions to measure sanitizer concentrations in manual and mechanical dishwashing operations; wiping cloth solutions; and spray bottle applicators.			
5	Used flashlight to assess observations in areas with no or low light.			
Comments:				

III. Oral Communication

	A) Communication with Person In Charge and Employees	Opportunity to Demonstrate Competency	Competency Demonstrated	
		NO	YES	NO
1	Asked open ended questions (questions that can not be answered with "yes" or "no").			
2	Did not interrupt when the person in charge/employee was speaking.			
3	Paraphrased/summarized statements from the person in charge to confirm understanding.			
Comments:				
B) Questions and Answers				
1	Answered inspection-related questions accurately.			
2	Admitted not knowing the answer to a question and arranges to contact the establishment with the answer.			
3	Avoided using jargon and acronyms, without explanation.			
4	Used interpreter, drawings, demonstrations, or diagrams to overcome language or communication barriers.			
5	Checked the person in charge's understanding of information/instructions by asking the operator to paraphrase or demonstrate the information/instructions.			
6	Identified challenges faced by the person in charge and offered possible solution(s).			
7	Did not become argumentative (e.g., remained calm and focused).			
Comments:				

C) Exit Interview				
1	Explained the public health significance of the inspection observations. Reviewed all findings with the person in charge with emphasis on contributing factors to foodborne illness and Food Code Interventions (listed in Section II, Item 3). Used foodborne illness data to highlight contributing factors.			
2	Answered all questions or concerns pertaining to items on the inspection report.			
3	Provided contact information to the person in charge for follow up questions or additional guidance.			
Comments:				

IV. Professionalism

A) Professional Appearance					
1	Maintained a professional appearance consistent with jurisdiction's policy (e.g., clean outer clothing, hair restraint).				
Comments:					
B) Proper Sanitary Practices					
1	Washed hands as needed (e.g., prior to conducting inspection, after using restroom, after touching dirty surfaces, after touching face/body, after sneezing/coughing).				
2	Protected bandages on hands, when necessary, to prevent contamination of food or food contact surfaces.				
3	Did NOT contact ready-to-eat foods with bare hands.				
4	Did NOT show any obvious signs of illness in accordance with jurisdiction's employee health policy and/or current food code.				
Comments:					
Categories:		Total number of opportunities	Number of Opportunities to Demonstrate	Number of Competencies Demonstrated	Final percentage
I. Pre-Inspection		6			
II. Inspection Observations and Performance		31			
III. Oral Communication		13			
IV. Professionalism		5			

Risk Control Plan form for FDA Standardization 2009 Food Code Field Workbook -

Risk Control Plan			
Establishment Name:		Type of Facility:	
Physical Address:		Person in Charge:	
City:	State:	Zip:	County:
Inspection Time In:	Inspection Time Out:	Date:	Inspector's Name:
Agency:			

Specific observation noted during inspection:

Applicable code violation(s) - (Optional)

Risk factor to be controlled:

Hazard (most common, significant):

What must be achieved to gain compliance in the future:

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)

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

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)

HACCP PLAN VERIFICATION WORKSHEET

(Note: This document is for optional use only, and is not a requirement for the Standardization Procedure)

Establishment Name:			Type of Facility:		
Physical Address:			Person in Charge:		
City:		State:	Zip:		County:
Inspection Time In:	Inspection Time Out:	Date:	Candidate's Name:		
Agency:		Standard's Name:		Indicate Person Filling Out Form: (<i>circle one</i>) Candidate's Form / Standard's Form	
Cold Holding Requirement For Jurisdiction: [5 °C (41 °F) _____] or [7 °C (45 °F) _____] or [5 °C (41 °F) and 7 °C (45 °F) combination: _____]					

- Have there been any changes to the food establishment menu?
Yes _____ No _____

DESCRIBE: _____

- Was there a need to change the food establishment HACCP plan because of these menu changes?
Yes _____ No _____

- List Critical Control Points (CCPs) and Critical Limits (CLs) identified by the establishment HACCP plan?

CCPs	CLs

4. What monitoring records for CCPs are required by the plan?

Type of Record	Monitoring Frequency	Record Location

5. Record compliance under 27B of the *FDA Standardization Inspection Report* (ANNEX 2 Section 1).

Are monitoring actions performed according to the plan?

Yes_____ No_____ Describe under 27G of the *FDA Standardization Inspection Report*

.

6. Is immediate corrective action taken and recorded when CLs established by the plan are not met?

Yes_____ No_____

DESCRIBE: _____

7. Are the corrective actions the same as described in the plan?

Yes_____ No_____

DESCRIBE: _____

8. Who is responsible for verification that the required records are being properly maintained?

9. Did employees and managers demonstrate knowledge of the HACCP plan?

Yes_____ No_____

DESCRIBE: _____

10. What training has been provided to support the HACCP plan?

11. Describe examples of any documentation that the above training was accomplished?

12. Are calibrations of equipment/thermometers performed as required by the plan?
 Yes ____ No ____

DESCRIBE: _____

Additional Comments:

Person Interviewed: _____

Chart 2: HACCP Plan Verification Summary			
HACCP Plan Verification Summary (circle YES or NO)			
	Record #1	Record #2	Record #3
	Current Date if Possible	2nd Selected Date:	3rd Selected Date:
Required Monitoring Recorded ¹	YES/ NO	YES / NO	YES / NO
Accurate and Consistent ²	YES / NO	YES / NO	YES /NO
Corrective Action Documented ³	YES / NO	YES / NO	YES/ NO
Total # of record answers that are in Disagreement with the Standard = _____			
(This box for Completion by Standard only)			

Product/Food: _____
Description:

Ingredients:

Preparation Steps:

Notes:

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 "*Interventions/Risk Factors*" 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.

Chart 2: Performance Criteria Tally of Disagreements in Each Establishment									
Candidate's Name:					Standard's Name:				
Candidate's Address:		Agency:		City:			State:	Zip:	County:
Standard's Address:		Agency:		City:			State:	Zip:	County:
Total Inspection Time :		Date:		Location of Standardization:					
ESTABLISHMENTS									
Performance Area	1	2	3	4	5	6	7	8	TOTAL (1-8) or TOTAL (1-6)
Risk Factors and Public Health Interventions									
Good Retail Practices									

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 46 disagreements for all 8 establishments) with no more than 11 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 12, proceed to step 2.
- If the disagreements/establishment is equal to or greater than 12, 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 46 for 8 establishments, the Candidate passes.
- If the disagreements are greater than 46 for 8 establishments, the Candidate fails.
- If the disagreements are equal to or less than 35 for 6 establishments, the Candidate passes.
- If the disagreements are greater than 35 for 6 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.

Application of HACCP Principles: A "satisfactory" score is required to pass.

- Refer to Chapter 3, Table 2

SCORING FORM (EXAMPLE #1)

Chart 3a: Sample Performance Criteria Tally of Disagreements in Each Establishment					
PERFORMANCE CRITERIA TALLY OF DISAGREEMENTS IN EACH ESTABLISHMENT (SAMPLE)					
Candidate's Name: Jane Smith			Standard's Name: George Harris		
Candidate's Address: 1234 Anywhere Street	Agency: State	City: Nice	State: HI	Zip: 12345	County: Franklin
Standard's Address: 4321 Somewhere Street	Agency: FDA	City: Washington DC	State:	Zip: 20204	County:
Total Inspection Time: 72 hrs	Date: 7/25/06	Location of Standardization: Washington D.C.			
ESTABLISHMENTS					

Performance Area	1	2	3	4	5	6	7	8	TOTAL (1-8) Total (1-6)
Risk-Based Inspection	9	11	11	5	2	2	3	1	44
Good Retail Practices	3	2	2	5	3	3	2	2	22

In this example, the Candidate passes both the foodborne illness risk factors and Food Code interventions and the Good Retail Practices portions. The number of disagreements for any one establishment did not exceed the maximum and the total number of disagreements for all the establishments also did not exceed the maximum number.

SCORING FORM (EXAMPLE #2)

Chart 3b: Sample Performance Criteria Tally of Disagreements in Each Establishment									
PERFORMANCE CRITERIA TALLY OF DISAGREEMENTS IN EACH ESTABLISHMENT (SAMPLE)									
Candidate's Name: Jane Smith					Standard's Name: George Harris				
Candidate's Address: 1234 Anywhere Street		Agency: State		City: Nice			State: HI	Zip: 12345	County: Franklin
Standard's Address: 4321 Somewhere Street		Agency: FDA		City: Washington D.C.			State:	Zip: 20204	County:
Total Inspection Time : 72 hrs		Date: 7/25/09		Location of Standardization: Washington D.C.					
ESTABLISHMENTS									
Performance Area	1	2	3	4	5	6	7	8	TOTAL (1-8) Total (1-6)
Risk-Based Inspection	11	11	12						
Good Retail Practices	5	5	4						

Here the Candidate fails the foodborne illness risk factors and Food Code interventions portion of this exercise. The Candidate was close to the maximum number of disagreements for any

one establishment in the first two facilities and exceeded this maximum number of disagreements in the third establishment.

FINAL SCORING REPORT

Chart #4: Candidate's Composite Performance Score			
CANDIDATE'S FINAL PERFORMANCE SCORE			
Candidate's Name:		Title:	
Agency:		Office Telephone Number:	
Office Address:		City:	State: Zip:
Standard's Name:		Standard's Title:	
Agency:	Office Telephone Number:	Location of Standardization:	
Office Address:	City:	State:	Zip:
<i>Instructions: For the following Performance Areas circle the Level of Agreement.</i>			
PERFORMANCE AREA	LEVEL OF AGREEMENT		
1. Foodborne Illness Risk Factors and Food Code Interventions	PASSES	FAILS	
2. Good Retail Practices	Passes	Fails	
3. Application of HACCP Principles	Satisfactory	Unsatisfactory	
a. Process flow Charts	Satisfactory	Unsatisfactory	
b. Risk Control Plan	Satisfactory	Unsatisfactory	
c. Verification of HACCP Plans	Satisfactory	Unsatisfactory	
d. Statement of HACCP Principles (Initial Certification only)	Satisfactory	Unsatisfactory	
4. Inspection Equipment	Satisfactory	Needs Improvement	
5. Communication	Satisfactory	Needs Improvement	

Comments:

STANDARD'S SIGNATURE:

NAME (Print): _____

NAME (Signature): _____ **Date:** _____

MDARD Standardized Field Trainer Exercise Summary

New Standardization: _____ Re-Standardization: _____ Date of Exercise _____

Name of Candidate or LHD Standard _____

MDARD/FDA Standardization Evaluation Report									
Performance Area	Score from Facility								Total Score
	1	2	3	4	5	6	7	8	
R.F./Interventions [need 90%(53/59)]									
Good Retail Practices [need 85%(23/27)]									
Field Evaluation Worksheet (FEW) [need 90% in each of 4 categories]									
I. Pre-Inspection									
II. Inspection Observation/Performance									
III. Oral communication									
IV. Professionalism									

The FEW is used to identify a Candidate's or LHD Standard's areas of improvement. More than one FEW may be used throughout the training exercise, but ONLY the last FEW will be graded.

Evaluation Report Forms Criteria Reviewed: The MDARD Standard will be evaluating this report form for the following:	Facility Report in Compliance For each criteria- Yes/No			
	1	2	3	4
Use of a MDA Approved Evaluation report Form,				
Administrative Information Complete at top of report form,				
Violations correctly identified,				
Citation clearly written including observation, law summary, & method of correction				
Comments:				

Continuing Education CEU's: 20 hours every 36 months:

Hours achieved

Session attended

Year one		
Year two		
Year three		

Submitted RCP approved: _____

Successfully completed HACCP plan verification form _____

3 HACCP Flow Diagrams submitted and approved _____