



BOH Guide: #42 FDA Retail Standard 2 Policies

Board of Health and Local Health Department Standard Operating Procedures (SOP)

This **Checklist** highlights many of the steps needed currently to organize a Massachusetts Board of Health. The checklist is designed to be used in tandem with the **Alliance Food Safety Plan**. BOXES CAN BE CHECKED WITH the CURSOR.

<input type="checkbox"/> Alliance Governing Board approved FDA Voluntary Retail Program Standard Policies
<input type="checkbox"/> Alliance Boards of Health are encouraged to: <ul style="list-style-type: none"><input type="checkbox"/> Become Registered with the FDA Retail Food Program Standards.<input type="checkbox"/> Participate in FDA Standards Assessments every 5 years.<input type="checkbox"/> Adopt Alliance policies that conform to FDA Retail Program Standards as available.<input type="checkbox"/> Promote Alliance education opportunities and trainings to food establishments and the public.<input type="checkbox"/> Actively work towards improving food safety in the county by participating in online permitting and inspector trainings. and inviting the Food Safety Team to present at Board of Health Meetings.<input type="checkbox"/> Follow the Massachusetts Food Code or adopt a more restrictive local regulation.<input type="checkbox"/> Alliance Food Inspectors meet FDA Retail Standard 2 or are in the process of being trained to Standard 2 within 24 mo.<input type="checkbox"/> Support the Alliance Food Safety Program.
<input type="checkbox"/> FDA Voluntary Retail Program Standard 2 Policies
<input type="checkbox"/> 1. Employee Training Records (Use BOH Job Aid #36 to track training or a similar training log) <ul style="list-style-type: none"><input type="checkbox"/> a. The jurisdiction maintains a written training record for each employee that includes the date of hire or assignment to the agency's retail food protection program.<input type="checkbox"/> b. The jurisdiction written training record provides documentation that each employee has completed the Standard #2 pre-requisite ("Pre") training curriculum PRIOR to conducting independent retail food or foodservice inspections.
<input type="checkbox"/> 2. Initial Field Training <ul style="list-style-type: none"><input type="checkbox"/> a. The jurisdiction maintains a written training record that provides confirmation that each employee completed a minimum of 25 joint field training inspections of retail food and/or foodservice establishments (if less than 25 joint field training inspections are performed, written documentation on file that FSIO has successfully demonstrated all required inspection competencies) PRIOR to conducting independent retail food or foodservice inspections.<input type="checkbox"/> b. The jurisdiction maintains a written training record that provides confirmation that each employee successfully completed a field training process similar to that contained in the CFP Field Training Manual provided in Appendix B-2, Standard 2, PRIOR to conducting independent inspections of retail food and/or foodservice establishments.
<input type="checkbox"/> 3. Independent Inspections/Completion of all Curriculum Requirements <ul style="list-style-type: none"><input type="checkbox"/> a. The jurisdiction maintains a written training record that provides confirmation that each employee completed a minimum of 25 independent retail food and/or foodservice inspections PRIOR to field standardization.<input type="checkbox"/> b. The jurisdiction written training record provides documentation that each employee has completed ALL aspects of the Standard #2 training curriculum ("Pre") and ("Post") courses PRIOR to field standardization.
<input type="checkbox"/> 4. Field Standardization <ul style="list-style-type: none"><input type="checkbox"/> a. The jurisdiction maintains a written training record that provides documentation that each employee successfully completed a Standardization process similar to the FDA Procedures for Standardization within 24 months of hire or assignment to the retail food protection program.<input type="checkbox"/> b. The jurisdiction maintains a written training record that provides documentation that each standardized employee has maintained their standardization by performing a minimum of 4 joint inspections with a "training standard" every 3 years.
<input type="checkbox"/> 5. Continuing Education <ul style="list-style-type: none"><input type="checkbox"/> a. The jurisdiction maintains a written training record that provides documentation that each employee conducting retail food and/or foodservice inspections has accumulated 20 hours of continuing education every 36 months after the initial training (24) months is completed.



BOH Forms: #34 Training Log for _____

Board of Health and Local Health Department Standard Operating Procedures (SOP)

This **Log** can be used to track all BOH related trainings. Complete Daily. May be used to track Mileage and Hours as well. The Log is designed to be used in tandem with the **BOH SOP and Appendices**. BOXES CAN BE CHECKED WITH THE CURSOR.

Date	Training/Certification	Provider/Hours	Location	Miles	Notes/ <input type="checkbox"/> Follow Up
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

BOH Inspector/Agent _____ Date Submitted _____

Supervisor/Trainer as appropriate: _____ Date Approved _____

--