



# Franklin Regional Council of Governments

Franklin County Cooperative Public Health Service

## **CPHS Formal Policy for a Uniform Food Inspection Program**

**Adopted by the Boards of Health in Buckland, Charlemont, Gill, Hawley, Heath, and Leyden**

### **I. PURPOSE**

(1) This policy is adopted pursuant to the general authority of the Board of Health to enforce the State and Federal Food Codes as provided by 105 CMR 590.000

(2) The purpose of this policy is to provide for the protection of public health by establishing a formal management program that includes a quality assurance program to ensure uniformity among regulatory staff in the interpretation and application of laws, regulations, policies, and procedures.

(3) Underlying this policy framework is acceptance and adherence to the Food Protection Regulations promulgated by the MA Department of Public Health Food Protection Program, including any guidance associated with such regulations. Also included and adopted are the related Department of Environmental Protection regulations governing Public Water Supplies (310 CMR 22.00), the Title 5 sewage treatment regulations (310 CMR 15.000), and any associated guidance.

### **II. POLICY:**

The following policy is based on the Voluntary National Retail Food Regulatory Program Standards - January 2011 - Standard 4, Uniform Inspection Program

This standard applies to the jurisdiction's internal policies and procedures established to ensure uniformity among regulatory staff in the interpretation of regulatory requirements, program policies and compliance / enforcement procedures.

1. Program Management implements an on-going quality assurance program that evaluates inspection uniformity to ensure inspection quality, inspection frequency and uniformity among the regulatory staff. The quality assurance program shall:
  - A. Be an on-going program.
  - B. Assure that each inspector:
    1. Determines and documents the compliance status of each risk factor and intervention (i.e., IN compliance, OUT of compliance, Not Observed, or Not Applicable is noted on the inspection form) through observation and investigation;
    2. Completes an inspection report that is clear, legible, concise, and accurately records findings, observations and discussions with establishment management;
    3. Interprets and applies laws, regulations, policies and procedures correctly;

12 Olive Street, Suite 2, Greenfield, MA 01301-3318 • 413-774-3167 • [www.frcog.org](http://www.frcog.org)

4. Cites the proper local code provisions for CDC-identified risk factors and Food Code interventions;
5. Reviews past inspection findings and acts on repeated or unresolved violations;
6. Follows through with compliance and enforcement;
7. Obtains and documents on-site corrective action for out-of-control risk factors at the time of inspection as appropriate to the type of violation;
8. Documents that options for the long-term control of risk factors were discussed with establishment managers when the same out-of control risk factor occurred on consecutive inspections. Options may include but are not limited to risk control plans, standard operating procedures, equipment and/or facility modification, menu modification, buyer specifications, remedial training, or HACCP plans;
9. Verifies that the establishment is in the proper risk category and that the required inspection frequency is being met; and
10. Files reports and other documentation in a timely manner.

C. Describe the actions that will be implemented when the program analysis identifies deficiencies in quality or consistency in any program aspect listed in 1) B.

2. The quality assurance program must achieve an overall inspection program performance rating for each of the ten measured aspects [Items 1-10] of at least 75% using the appropriate FDA self-assessment procedure.

An assessment review of each\* inspector's work shall be made during at least two joint on-site inspections, with a corresponding file review of at least the three most recent inspection reports of the same inspected establishments, during every self-assessment period.

Should you have any questions, please feel free to call or email.

Glen Ayers, R.S., C.H.O., Regional Health Agent  
Franklin County Cooperative Public Health Service  
413-774-3167 x106 (office); 413-834-5729 (cell)  
email: [glenayers@frcog.org](mailto:glenayers@frcog.org)