Rules and Regulations Food Service – DPH Chapter 511-6-1 Food Service Establishment Manual for Design, Installation and Construction

## Appendix-D<sup>1</sup>:

# Checklist to Validate Contents of a HACCP Plan and Operating Procedures of Live Holding Tanks for Molluscan Shellfish

\*\*A Recommend Guidance Document

For the Planner and Reviewer\*\*



The following document contains a check list to be used during the planning phase of the development of HACCP Plans and operational plans for Molluscan Shellfish Life Support Tank Systems for submittal to the local Health Authority for review and approval. Similarly, the Reviewer will used this document to verify whether or not such plans and specifications comply with DPH Chapter 511-6-1 and its interpretative manuals.

<sup>&</sup>lt;sup>1</sup> Source: 2008 Draft Guidelines to Review and Verify HACCP Plans for Live Holding Tanks to Store Molluscan Shellfish used for Human Consumption.



| Prerequisites Programs/Standard Operating Procedures |
|--|
|--|

| \<br>_ | Vendor Certification Programs and Buyer Specifications.  |
|--------|--|
| Ē      | Equipment Specifications/Manufacturers Instructions and Operational Manual.  |
|        | Employee Health Policy (training and reporting requirements, exclusion and restriction equirements for ill food employees).                  |
| F      | Handwashing and Bare hand Contact Policies.  |
|        | Employee Hygiene Policy (clean clothing, hair restraints, prohibition of eating, moking, and drinking in work areas and of wearing jewelry). |
| 0      | Commingling Protocol (CRITICAL).   |
| (      | Culling Procedures (dead and cracked shellfish discarded).   |
| ]      | Cemperature Control Requirements.  |
| ]      | Thermometer Calibration Procedures and schedule.   |
|        | Record System for Retention of Shellfish Tags (system to maintain the tags in chronological order for 90 days after the container is empty). |
| F      | First In and First Out Requirement and Procedures.   |
|        | Program to Protect Product from ContaminationBiological, Chemical and Physical.  |
| Ē      | Equipment/System Maintenance Program (Tank and UV Disinfection System).  |



#### Prerequisites Programs/Standard Operating Procedures (Continued)

- Cleaning and Sanitizing Procedures.
  - Toxic Chemical and Cleaners Handling and Storage Requirements.

#### Hazard Analysis Included:

#### Control Points

- Receiving (Approved Source)
- Receiving (Temperature)
- Cooler Storage.
  - Tank Storage (Water Temperature).
  - Tank Storage (Water Quality/Total Coliform Testing).

#### Critical Limit Identified

- Receiving Approved Source.
- Receiving Temperature, 50°F, (10.0°C).
- Cooler Storage Temperature, 41°F, (5°C).
- Tank Storage Water Temperature 41°F (5°C), Total Coliform Testing, (Maximum = 0 MPN).

#### Monitoring Procedures

- Receiving- Receiving temperature of every container should be checked and visually checked for shellfish certification tag to verify dealer on ICSSL by the designated employee for each shipment.
- Cooler Storage Temperature check of cooler with thermometer two times (2X) a day by designated employee.
- Tank Storage Temperature check of water with thermometer two times (2X) a day by designated employee.
  - Tank Storage Water sample taken once a week and sent to laboratory for testing by designated employee.

#### **Corrective Actions When the Critical Limits are not Met**

- These are examples of corrective actions.
- Receiving Approved Source- The shipment would be rejected and corrective actions documented on records.

 $\square$ 



#### **Corrective Actions When the Critical Limits are not Met (Continued)**

- Cooler Storage Add ice to product, move to another functioning cooler and make adjustments to the malfunctioning cooler, AND either destroy or hold the product until the time/temperature abuse can be evaluated. Corrective actions documented on records.
   Tank Storage (Water Temperature) Add ice to water, move the product to a
  - Tank Storage (Water Temperature) Add ice to water, move the product to a functioning cooler, AND hold the product until the time/temperature abuse can be evaluated or destroy the product. Corrective actions documented on records.

Tank Storage (Total Coliform Testing) – A positive TC requires immediate re-sampling and a second positive TC requires the tank to be cleaned and sanitized and the product in the tank destroyed. Corrective actions documented on records.

#### **Record Identified**

|        | Receiving – Temperature and source records.<br>Cooler Storage – Cooler temperature log and thermometer calibration log. |
|--------|---|
|        | Tank Storage – Water temperature log and thermometer calibration log.   |
|        | Tank Storage – Water sample, laboratory result logs and corrective actions  |
|        | documentation on records.   |
|        |   |
|        |   |
|        |   |
| Verifi | cation Process Identified   |
|        | Receiving – Daily monitoring, weekly verification of temperature/source logs.   |
|        | Cooler Storage – Daily monitoring, weekly verification of records of cooler logs and                                    |
|        | monthly calibration of thermometers with quarterly record verification.   |
|        | Tank Storage (Water Temperature) – Daily monitoring, weekly verification of records.                                    |
|        | Monthly thermometer calibration with quarterly record verification.   |
|        | Tank Storage (Water Sample) – Weekly monitoring of lab results with any   |
|        | corrective actions documented. Weekly verification of records.  |
|        |   |
|        |   |
|        |   |
| Empl   | oyee Training Plan  |
|        | Employee Health.  |
|        | Employee Hygiene.   |
|        | Contamination Prevention Procedures.  |
|        | Equipment Use and Maintenance.  |

Monitoring Procedures. Corrective Action Procedures. Recordkeeping Procedures.



## **Comments:**

| APPROVAL: DATE:  | Reviewer Signature Date Reviewer Title ROVAL: DATE:                            |                       |         |      |
|--|--|-----------------------|---------|------|
| Reviewer Signature Date   Reviewer Title DATE:   ROVAL: DATE:   PPROVAL: DATE: | Reviewer Signature Date   Reviewer Title DATE:   ROVAL: DATE:   PPROVAL: DATE: |                       |         |      |
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