NORTHERN NEVADA Public Health

Risk Factor Workshop Series

Workshop 1

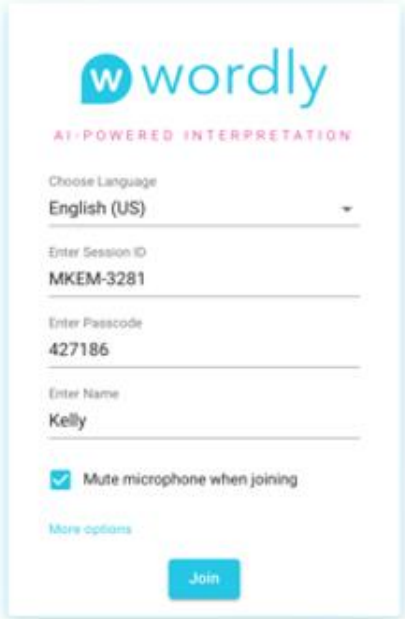
Poor Personal Hygiene & Prevention from Contamination

Northern Nevada Public Health

Wordly.ai

Translation and Interpretation

- URL: https://join.wordly.ai/join/MKEM-3281?key=427186
- Select your language, enter a name, and press Join.



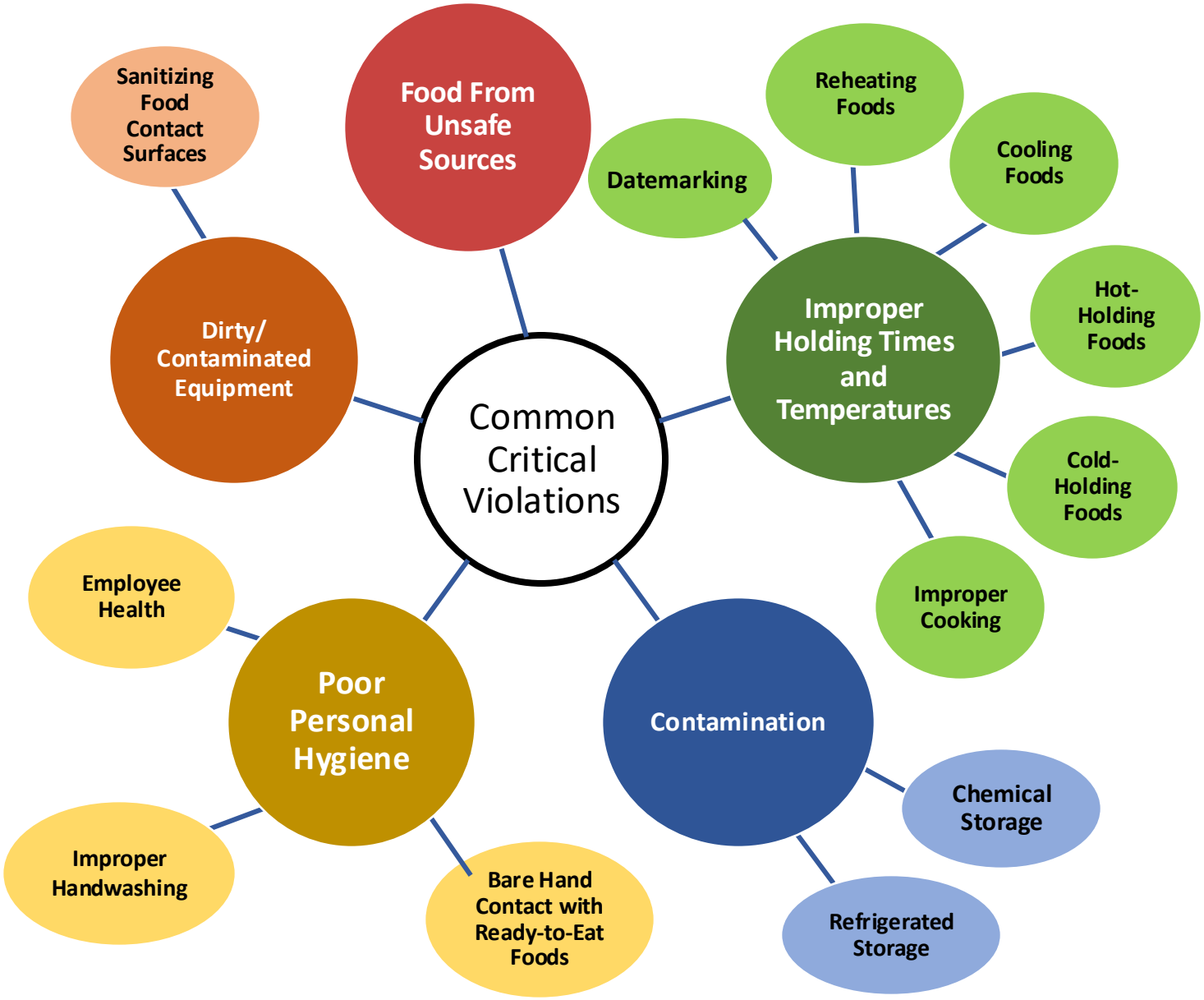
NORTHERN NEVADA Public Health

What is a Risk Factor?

- Behaviors and practices in food establishments that contribute to foodborne illness.

What is the Risk Factor Workshop Series?

- An opportunity to learn about common critical violations – and how to prevent them!



ROADMAP

Risk Factor Workshops at a Glance

Understand the risk, spot the violation, and know the corrective action.

NOW

Apr 28
Poor Personal Hygiene + Contamination

NEXT

Jul 28
Inadequate Cooking + Improper Time/Temperature

THEN

Nov 9
Unapproved Sources + Series Wrap-Up

Why attend the Risk Factor Workshop?

- ✓ Facilities that attend all three courses will receive a Certificate of Achievement and will be entered into a raffle to win a fully-stocked food safety supply bag!
  - Poor Personal Hygiene & Protection from Contamination – 04/28/2026
  - Improper Cooking & Improper Holding Times/Temperatures - 07/28/2026
  - Unapproved Sources & Series Wrap-Up – 11/09/2026

- ✓ Free food safety training: everyone is welcome – from new hires to seasoned cooks.

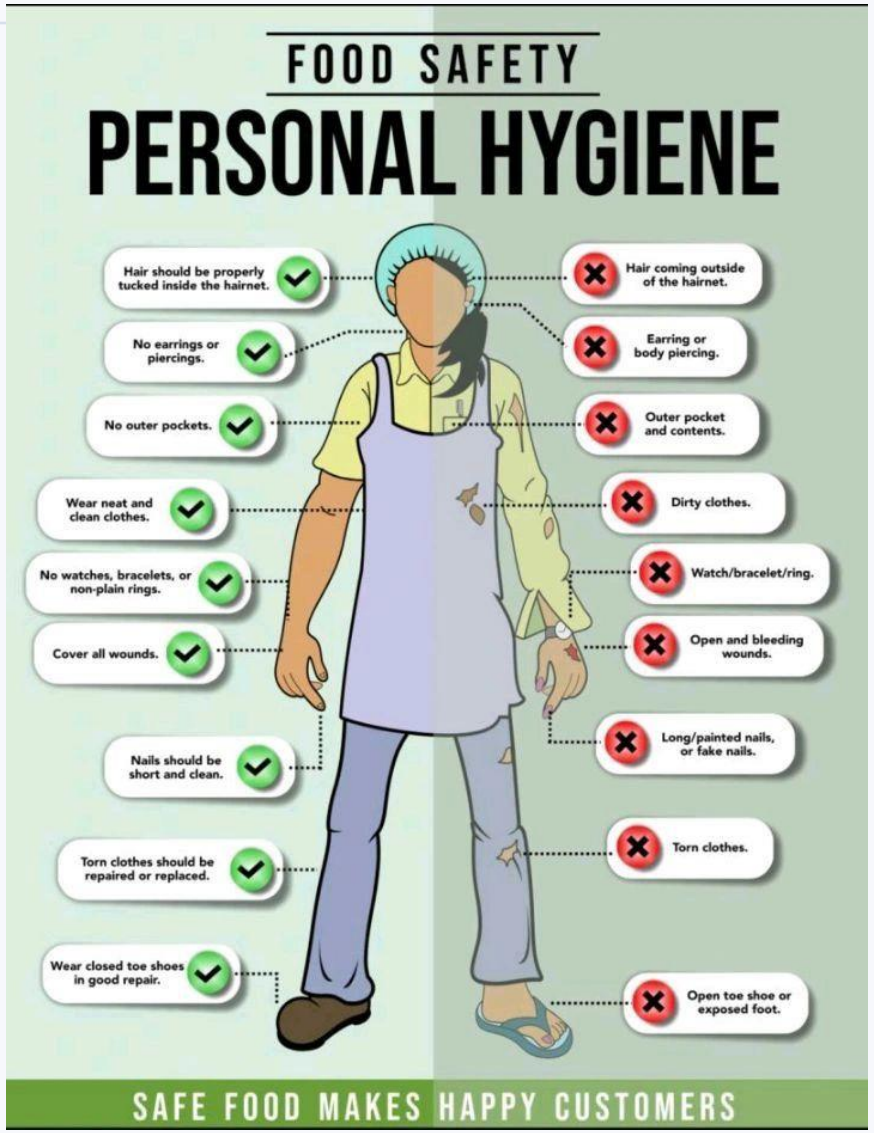
Foodborne Illness Risk Factor: Poor Personal Hygiene

ROADMAP

Risk Factor Workshop #1

Personal Hygiene: Today you will leave able to....

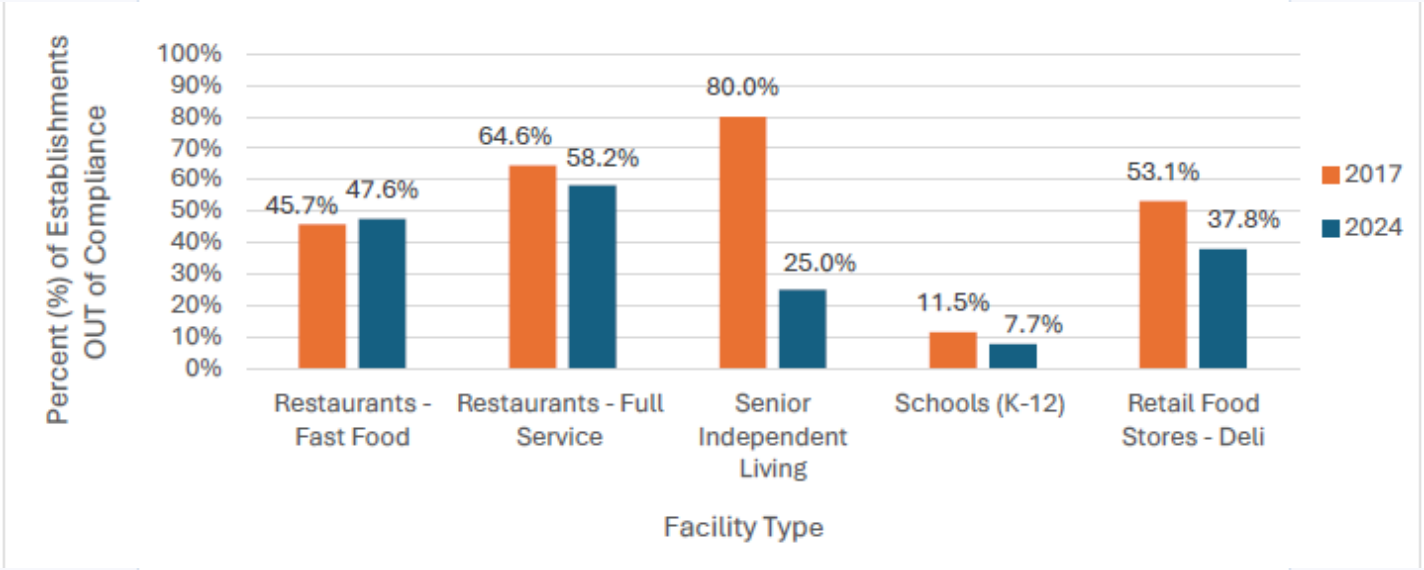
- Explain why personal hygiene failures quickly become foodborne illness risks.
- Recognize the most common employee health, handwashing, and hank sink violations.
- Choose immediate corrective actions that reduce risk in the moment.



TODAY'S DEEP DIVE: Why does Personal Hygiene Matter?

Food workers can transmit bacteria and transferrable diseases to food with their hands, clothing, and respiratory droplets—good hygiene breaks that chain and protects the public from foodborne illness.

Poor personal hygiene by facility type (2017- 2024)



What was observed in facilities to find this data?

Poor personal hygiene noncompliance decreased 6.2% from 2017 to 2024.

How do we address facilities that did not see improvements between 2017 and 2024?

THREE INSPECTION PILLARS

Where Personal Hygiene Starts

Use these three hygiene standards to engage in conversation with Person in Charge, identify hygiene habits, and immediate intervention to prevent contamination

#1 Employee health, knowledge, responsibility, & reporting

Confirm the PIC knows when to exclude or restrict ill workers, report diagnosed foodborne illness, and keep a vomiting/diarrhea clean-up plan accessible.

#2 Good hygiene practices

Look for behaviors that contaminate food: eating or drinking in prep areas, personal items stored with food, uncovered cuts, and respiratory discharge.

#3 Hands as vehicle of contamination & hand sinks

Verify proper handwashing, glove changes, accessible stocked hand sinks, and barriers between hands and ready-to-eat foods.

#1 Employee Illness, Knowledge, Responsibilities, and Reporting:

What are the expectations?

- The Person in Charge (PIC) knows all excludable illness symptoms, when employees must be excluded or restricted, and the return-to-work policy
- Diagnosed foodborne illnesses are well known by PIC. Foodborne illness is reported to the Health Authority when required. Exclusion procedure is immediately enabled.
- A written vomiting/diarrhea clean-up policy (PVI) is on site and accessible to staff.

#1 Employee Illness, Knowledge, Responsibilities, and Reporting:

What counts as a violation?

- PIC cannot describe reportable symptoms or return-to-work policy
- PIC is aware of employee with communicable disease and has not excluded employee from food service
- PIC does not have knowledge of foodborne illnesses, reporting responsibility, or exclusion procedure
- Employees have not been trained on exclusion, restriction, or symptom reporting.
- No PVI procedure is available on site.

Violations in Field Guide:

1. Demonstration of Knowledge/ Active Managerial Control

NNPH Regulations: 030.005, 030.010, 030.015, 040.005, 040.022, 040.020, 040.035

2. Communicable Diseases: Knowledge, Responsibilities, Reporting

NNPH Regulations: 030.020, 030.021, 030.022, 030.085

3. Communicable Diseases: Proper use of restriction/exclusion

NNPH Regulations: 030.020, 030.021, 030.022

Non-Critical Violations

Act immediately when employee experiences vomiting or diarrhea, fever with sore throat, jaundice, or diagnosed foodborne illness.

IMMEDIATE RESPONSE

Corrective Action: Exclude or restrict? Make the call fast.

Keep sick workers out of food handling, control contamination, and set a clear return-to-work expectation.

1. IDENTIFY

Symptoms or diagnosis are observed, suspected, or reported.

2. REMOVE RISK

Exclude or restrict the employee before food handling continues.

3. CONTROL CONTAMINATION

Cover cuts or rashes, discard contaminated food, and clean/sanitize exposed surfaces.

4. RETURN SAFELY

24 hours symptom-free and medication-free, or Health Authority clearance when required.

Common diagnoses that trigger reporting and exclusion concerns: Salmonella, Salmonella Typhi, Shigella, Norovirus, Shiga toxin-producing E. coli, and Hepatitis A.

#2 Good Hygiene Practices: Eating, Drinking, Tobacco Use

Not every violation starts with illness—small behaviors can contaminate serviceable food just as quickly.

Common behaviors to look for:

- Employee drinks need lids and straws and must stay out of prep areas.
- Personal food and belongings cannot be stored with food that will be served to the public.
- Cell phones cannot be stored on food contact surfaces or handled in prep areas.
- Tobacco use outside of designated areas away from food and food-contact surfaces.
- Anything directly contaminated that should be discarded immediately.

THINK LIKE AN INSPECTOR

What is considered a violation?

Move employee food and beverages out of prep areas, discard directly contaminated food, and establish designated storage and tobacco-use zones.

1. COMMINGLING

Personal food and items commingled with food that will be served to the public

→

2. RISK OF CONTAMINAITON

An employee drink without a lid or straw in the food prep area

↓

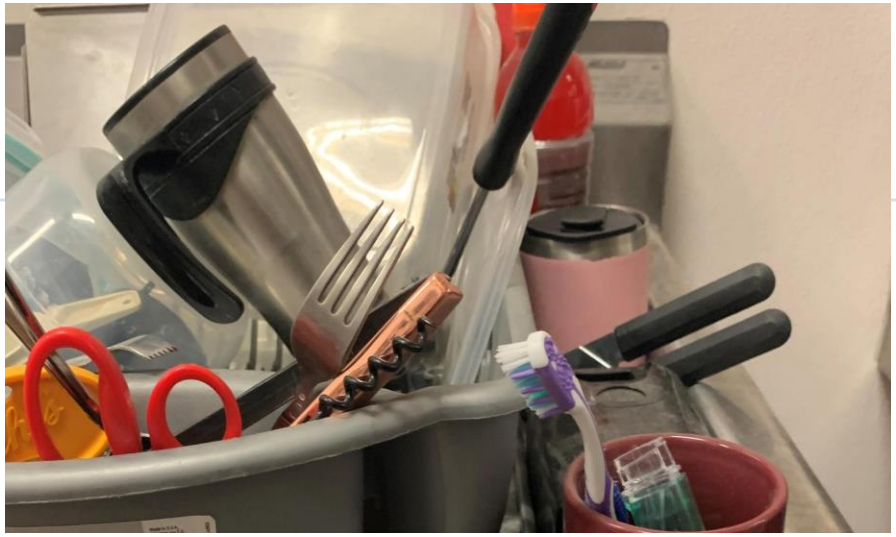
3. UNAPPROVED AREAS

Any eating, drinking, or smoking in an undesignated area where contamination can result

←

4. SMOKING INDOORS

Facility allows smoking indoors (in violation of Nevada Clean Indoor Air Act)



Violations in Field Guide:

4. Proper eating, tasting, drinking, or tobacco use

NNPH Regulations: 030.065, 050.120

5. No discharge from the eyes, nose or mouth

NNPH Regulations: 030.070

Non-Critical Violations

Critical Violations

Address violations with immediate corrective actions and writing policies to prevent cross contamination

IMMEDIATE RESPONSE

Corrective Action: Move employee items out fast.

Move employee food and beverages out of prep areas, discard directly contaminated food, and establish designated storage and tobacco-use zones.

1. IDENTIFY

Food, drinks, personal items, or tobacco use are in prep or service areas.

2. REMOVE FROM PREP AREA

Move employee food and beverages away from food service and food-preparation areas.

3. PROTECT FOOD

Discard food that has been directly contaminated.

4. DESIGNATE SAFE AREAS

Create a safe employee storage area and an outside tobacco-use area that prevents cross-contamination.

Employee food, beverages, personal items, and tobacco use belong only in designated areas away from food, prep areas, and food-contact surfaces.

Part #1

Hands as a Vehicle for Contamination

- Hand Washing
- Glove Use
- Handling Ready-to-Eat Foods

#3 Hands Are a High-Risk Vehicle of Contamination:

What are the expectations for hand washing?

- After restroom use, raw meat, dumpsters, floors, or mop sinks
- After handling money, phones, aprons, or personal clothing
- Leaving and re-entering the prep area
- Before changing gloves and handling ready-to-eat food

Hand washing how-to: warm water + soap + friction for 20 seconds, then dry with paper towels.

What is considered a violation?

Not using designated hand sink	Not knowing when to wash hands or change gloves	Improperly washing hands
Only using hand sanitizer	Improper glove use	Handling Ready-to-Eat (RTE) foods without a barrier

Violations in Field Guide:

6. Hands clean and properly washed

NNPH Regulations: 030.025 - 030.055

7. No bare hand contact with ready-to-eat (RTE) foods, pre-approved alternative procedure properly followed

NNPH Regulations: 050.115

Critical Violations

Corrective Action:

Early intervention, Employee Training, & Leading by Example

Intervene to have employee change gloves and wash hands for 20 seconds with warm water and soap

Discuss proper glove change and hand-washing policy.

Find a designated area to post hand washing resources, add Hand Washing sign above hand sink, add hand washing to staff training log for refresher training

All Ready-to-Eat (RTE) foods observed being contacted with bare hands must be discarded

Discuss no bare-hand contact with employee and the Person-in-Charge (PIC)

Part #2

Hands as a Vehicle for Contamination:

Hand Sinks

Hand Sinks Make Good Behavior Possible!

- Remain supplied
- Accessible at all times
- Used properly
- Clearly identifiable

What is considered a violation?

- Hand sinks are not conveniently accessible
- Hand sinks not located in all food preparation areas, food dispensing areas, and dish areas.
- Hand washing signs are not posted at each hand sink
- Hand sinks are blocked and sink accessibility is altered
- Hand sinks are not stocked with warm water, liquid pump soap, paper towels

Violations in the Field Guide

8a. Hand washing sinks accessible & conveniently located

NNPH Regulations: 070.030; 070.035; 070.047; 070.058

8b. Hand washing sinks supplied

NNPH Regulations: 080.096-080.0995

Non-Critical Violations

Critical Violations

Corrective Action:

Hand wash facilities must be available to make hand washing not only possible, but likely

Remove items blocking hand sink

Discontinue unapproved use of hand sink

Warm and cold water accessible

Hand washing signs posted above al hand sinks

Hand sinks are properly stocked at all times

If a hand sink needs to be installed, mark as non-critical and allow operator time to comply. Designate another hand sink for proper hand washing

Key Take-Aways and Recommendations:

Focus on employee health, hand hygiene, hand sink access, and immediate contamination response

Ill employees, uncovered cuts, and spread of respiratory droplets must be controlled immediately

Hand washing, glove changes, and no bare-hand contact with ready-to-eat foods are core daily controls

Separation of personal items and food to prevent contamination

Enforce illness reporting and keep vomit/diarrhea cleanup procedures available

Keep hand sinks accessible, labeled, and fully stocked at all times

Retrain staff regularly and prohibit eating, drinking, or tobacco use in prep areas

Tools for Success:
Check out the NNPH Resource Library

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Public Health

Foodborne Illness Exclusion and Restriction Guidelines

Employees Must Report to Person in Charge (PIC)

Employees are required to report any symptoms or diagnosed illnesses that are transmissible through food to the person-in-charge (PIC). Necessary information may be obtained regarding the date symptoms began and if the food employee has been diagnosed with a food related illness to reduce the risk of transmitting foodborne diseases.

Symptoms

Symptoms	Exclusion/Restriction	Lifting Exclusion/Restriction Status
Vomiting	Exclude	When the food employee has been symptom free for at least 24 hours without the aid of medication or provides written medical release/fitness for duty*.
Diarrhea	Exclude	When the food employee has been symptom free for at least 24 hours without the aid of medication or provides written medical release/fitness for duty*.
Jaundice	Exclude	When the food employee has been jaundiced for more than 7 calendar days or provides written medical release/fitness for duty*.
Sore throat with fever	Restrict	When the food employee has been fever free for 24 hours without the use of medication, or when the food employee provides written medical release/fitness for duty*.
Exposed infected wounds/boils	Restrict	When the infected wound or boil is properly covered.

Diagnosed Illness (symptomatic and asymptomatic)

If a food employee has a diagnosed illness (symptomatic or asymptomatic), the PIC must report to the local Heath Authority.

Diagnosis	Exclusion/Restriction	Lifting Exclusion/Restriction Status
Norovirus	Exclude	When the PIC obtains approval from the Health Authority and the food employee has been symptom free for more than 48 hours or provides written medical release/fitness for duty*.
E.coli	Exclude	When the PIC obtains approval from the Health Authority and the food employee has been symptom free for more than 7 calendar days or provides written medical release/fitness for duty*.
Shigella	Exclude	When the PIC obtains approval from the Health Authority and the food employee has been symptom free for more than 7 calendar days or provides written medical release/fitness for duty*.
Hepatitis A	Exclude	When the PIC obtains approval from the Health Authority and the food employee has been jaundiced for more than 7 calendar days or provides written medical release/fitness for duty*.
Salmonella (nontyphoidal)	Exclude	When the PIC obtains approval from the Health Authority and more than 30 days have passed since the food employee was diagnosed or a written medical release/fitness for duty* is provided.
Typhoid fever (caused by Salmonella Typhi)	Exclude	When PIC obtains approval from the Health Authority and the food employee provides written medical release/fitness for duty*.

*Medical release does not supersede exclusion timeframes, unless it specifically states that symptoms are the result of a non-communicable disease.
Exclusion – a food employee is not permitted to work in or enter a food establishment as a food employee. This requirement applies to areas where food is received, prepared, stored, packaged, served, vended, transported, or purchased.
Restriction – a food employee's activities are limited to prevent the risk of transmitting disease that is transmissible through food. A restricted employee cannot work with exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles.

1001 E. 9th Street, Reno, NV 89512
(775) 328-2434
For more information visit www.nnph.org

No Bare Hand Contact with Ready to Eat Foods
Frequently Asked Questions

Why can't we use bare-hand contact?

- The primary reason for not touching ready-to-eat foods with bare hands is to prevent viruses and bacteria which are present on your hands from contaminating the food. Improper food handling is one of the most common causes of foodborne illnesses. With proper knowledge, food employees can prevent the transfer of viruses and bacteria from hands to the customer's food.

What foods are considered Ready to Eat (RTE)?

- Any food item that will not be cooked prior to service (e.g. sandwich toppings, garnishes)
- Any food item that has already been cooked and is ready for service (e.g. toast, hamburger patty)
- Prepared fruits and vegetables, whether raw or cooked
- Plant food that does not require further washing and processing (i.e. salads & salad ingredients)
- Plant food from which rinds, husks, or peels have been removed
- Bakery items (breads, rolls, pastries) where further cooking is not required
- Ice and garnishes for mixed drinks
- Raw sushi fish and cooked sushi rice
- Garnishes such as lettuce, parsley, lemon wedges, potato chips or pickles
- Any food that will not be thoroughly cooked or reheated after it is prepared

Does this mean gloves are required at all times?

- No. Single-use gloves are one of several acceptable ways to comply with the requirements. Additional tools include tongs, serving spoons, spatulas, deli paper, toothpicks, etc. Gloves are only required when you have cuts, scrapes, burns or other open wounds on your hands.

I've heard you can actually cross contaminate more with gloves than without. How do I best implement a program?

- Glove use must be tailored to each facility. Cross contamination controls should already be part of every restaurants regular procedure. Gloves must be seen as an additional barrier and should be changed as necessary.

Clean-up Procedures for Vomit and Diarrhea

When someone vomits, germs such as norovirus can spread through the air and contaminate surfaces and food up to 25 feet away. Consumers and employees are at risk of contracting norovirus or other illnesses from direct exposure to vomit or from exposure to airborne norovirus from vomit.

Effective clean-up of vomit & diarrhea in a food establishment should be handled differently from routine cleaning procedures, and involves a more stringent cleaning & disinfecting process.

A clean-up and response plan is intended to address proper procedures to reduce exposures to norovirus or other contaminants. Timely effective clean-up is imperative.

First Steps

- Remove all individuals within a 25 foot radius and ask them to wash hands immediately.
- Block entry to contaminated area.
- Dispose all uncovered food, and single use containers and utensils within 25 foot radius.
- Wash and sanitize all utensils and equipment within 25 foot radius.
- Minimize the risk of disease transmission through the prompt removal of ill employees, customers and others from areas of food preparation, service, and storage.

Clean up

- Remove vomit or diarrhea right away!
  - Wear protective clothing, such as disposable gloves, shoe covers, apron and face mask. Change if they become contaminated.
  - Wipe up vomit or diarrhea with paper towels – place the paper towels over the waste then carefully remove the towels and its contents – do not vacuum the material!
  - Work from the clean areas towards the most contaminated areas to minimize the spread of infectious material.
  - Use kitty litter, baking soda, or other absorbent material on carpets and upholstery to absorb liquid.
  - Dispose of paper towels/cleaning clothes and waste in a plastic trash bag or biohazard bag.
  - Place contaminated table cloths, cloth napkins, and cloth towels into a separate plastic bag for transport to laundry or discard.
- Use soapy water to wash surfaces that contacted the vomit or diarrhea and all nearby surfaces, such as door knobs and toilet handles.
- Rinse thoroughly with plain water and wipe dry with paper towels.
- Clean and disinfect any non-disposable tools (mop heads) and equipment used to clean up vomit and fecal matter.

Questions?

Personal Hygiene Challenge:
“The Anonymous Complaint”

Scenario:

You are the **Food Safety Inspector** in a busy restaurant. An **anonymous complaint** is submitted through your company’s reporting system stating:

“**Employees are not washing their hands after handling money and staff were handling my food without gloves.**”

You must respond quickly to protect customers and maintain compliance with health regulations.

Each team must answer one of the following parts…….

Challenge Part 1 – Identify the Risks

Answer:

What risks are identified from this complaint?

List the **three biggest food safety risks**
from this complaint.

Challenge Part 2 – Root Cause Investigation

Answer:

Why might this be happening in your facility?

Propose **three root causes**

This part emphasizes **food safety culture**, not just rules.

Challenge Part 3 – Immediate Actions

Answer:
Decide **what you would do in the next 30 minutes** as the food safety inspector?

Propose **three immediate actions**

Challenge Part 4 – Long-Term Prevention

Answer:
What are the **long-term solutions** to prevent the problem from happening again?

Propose **two long-term solutions**

Personal Hygiene Final Challenge

- **Part 1:** Identify the Risks
    - Contamination from unwashed hands
    - Handling ready-to-eat foods without a barrier
    - Employees spreading illness to food
    - Poor hand wash hygiene culture in the kitchen
    - Lack of monitoring or enforcement
- **Part 2:** Root Cause Investigation
    - Poor training
    - Lack of handwashing sinks or supplies
    - Time pressure during busy service
    - Managers not enforcing policies
    - Employees afraid to report lack of hand washing or using barriers

Personal Hygiene Final Challenge

- **Part 3:** Immediate Actions
    - Conduct immediate handwashing reminder and demonstration
    - Throw away all ready-to-eat foods that were handled without a barrier
    - Stop ready-to-eat food handling until hygiene is corrected
    - Sanitize workstations
    - Ensure soap, towels, and sanitizer are stocked
- **Part 4:** Long-Term Prevention
    - Daily hygiene checks by supervisors
    - Visible handwashing signage
    - Anonymous reporting system reinforcement
    - Refresher training
    - Illness reporting policy education

Final Challenge – Leadership Statement

Share statement to staff
explaining the importance of hygiene.

Example of a strong response:

“Personal hygiene is our first line of defense against foodborne illness. Every customer trusts us to prepare their food safely. Washing hands, covering sneezes, and staying home when sick are not just policies—they protect our guests, our coworkers, and our reputation. If we fail at hygiene, we fail at food safety.”

Debrief (Facilitator Wrap-Up)

Key message:

Poor personal hygiene directly contributes to foodborne illness outbreaks.

Your role as a team is to **protect the public and minimize risk factors.**

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Risk Factor Workshop:

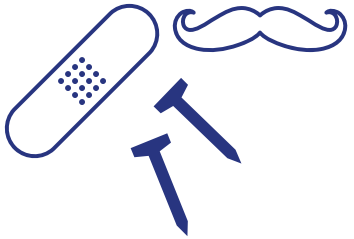
Prevention of Contamination

Contaminated Equipment & Protection from Contamination

- **Contamination:** Rendering a food unsafe to eat due to the presence of potentially harmful agents

Biological

Chemical



Physical

Allergen

- **Cross-Contamination:** The transfer of harmful bacteria to a food from other foods, cutting boards, utensils, or any other food contact surface. Contamination risk increases when handling raw meat, poultry, eggs, and seafood.

Contamination Prevention in Washoe County

- Routine inspections are conducted to identify critical food safety risk factor violations, including assessing “compliance for protection from cross contamination and clean/sanitized food contact surfaces”
- Contamination risk factors are assessed through two primary categories:
  - *Food is protected from cross-contamination during storage, preparation, and display*
  - *Food contact surfaces are properly cleaned and sanitized*

Contamination Prevention in Washoe County

13a. Separating Raw Animal Foods from Raw or Cooked Ready-To-Eat (RTE) Foods

Expectations

- Raw animal foods are stored separately from ready-to-eat foods.
- Ready-to-eat foods are stored above and/or away from raw animal foods.

Critical Violation Examples

- Raw animal foods are stored above raw vegetables/fruits, salad greens, sauces/dressings (considered ready-to-eat even if they are going to be cooked).
- Raw animal foods are stored over cooked and cooled items (considered ready-to-eat even if they are going to be reheated).
- Raw shell eggs are stored above ready-to-eat foods or beverage containers.

Contamination Prevention in Washoe County

13b. Separating Raw Animal Foods From Each Other During Storage, Preparation, Holding, and Display

Expectations

- Raw animal foods are stored in order of minimum final cook temperature from top to bottom shelf:

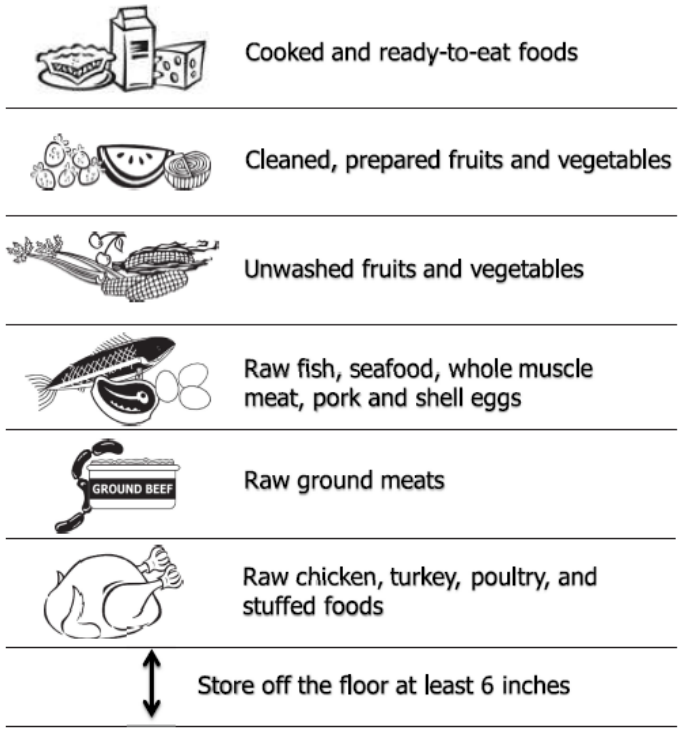
145°F • Fish, seafood, whole muscle meat, shell eggs, and pork

155°F • Ground and comminuted meats

165°F • Poultry and stuffed foods

Critical Violation Examples

- Raw poultry is stored above raw beef or fish.
- Raw ground beef is stored above raw fish.



NORTHERN NEVADA Public Health

Contamination Prevention in Washoe County

13c. Food Protected From Environmental Contamination

Expectations

- Food and beverage items are stored and handled in ways that maintain protection from physical, chemical, and biological contamination.

Non-Critical Violations

- Beverage stored in consumable ice.
- Food not covered in walk-in (not in the process of cooling), but no direct contamination observed.
- Employees are observed working with a bandage on hand or wrist which is not covered with a single-use glove.

Critical Violations

- Foreign object found in food (ex. Glass, bandage, plastic)
- Chemical contamination of food is observed
- Same utensil/glove used for raw animal products and ready-to-eat food items.
- Washing produce, thawing food, washing wiping cloths in a ware-washing compartment without first cleaning and sanitizing the compartment.

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Contamination Prevention in Washoe County

14. Food Contact Surfaces: Frequency of Cleaning and Sanitizing; Protected From Environmental Contamination

Expectations

- Food contact surfaces are properly washed/ rinsed/ sanitized or swapped for clean replacements at least once every four hours when held at room temperature.
- Food contact surfaces are properly washed/ rinsed/ sanitized or swapped for clean replacements in between tasks.

Non-Critical Violations

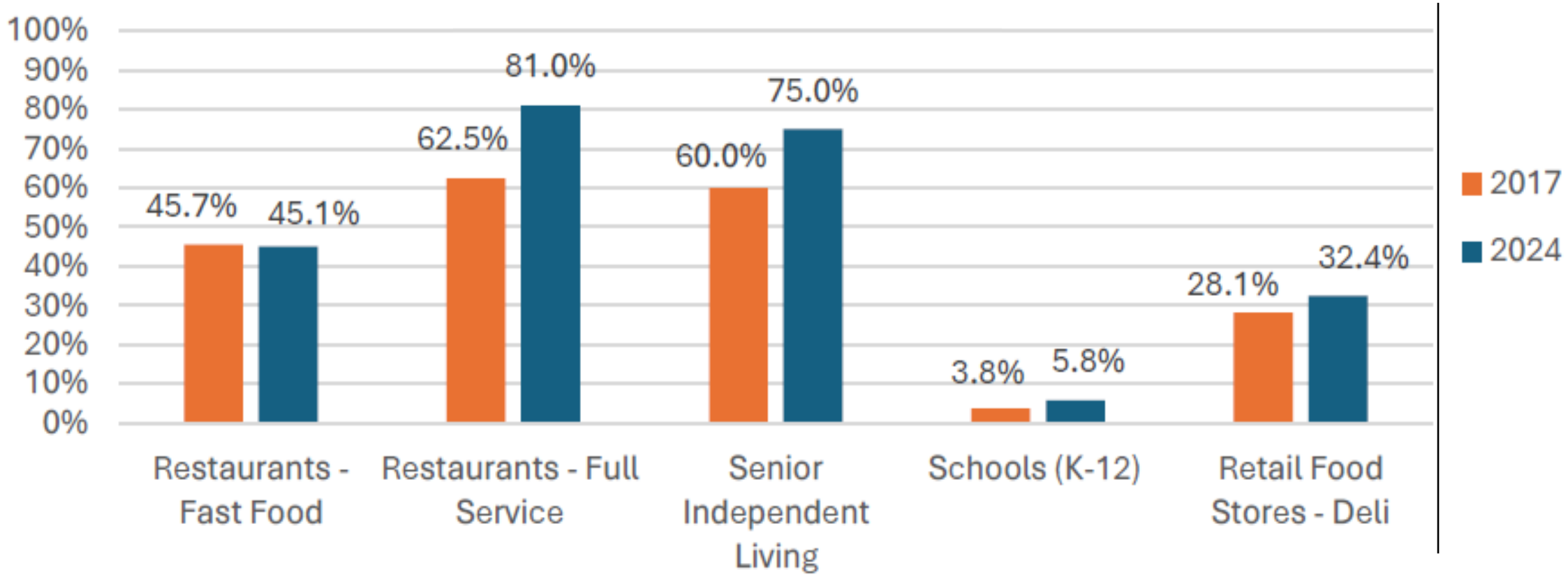
- Equipment and utensils that are not currently in-use are not clean to sight and touch.
- Speed guns are observed dirty.
- Ice machines are observed dirty.

Critical Violations

- Meat slicer not washed at required frequency
- In-use preparation surfaces (including knives, basting brushes, etc.) are not cleaned and sanitized at least once every four hours.
- In-use preparation surfaces (prep tables, cutting boards, etc.) are not cleaned and sanitized between tasks (i.e. after cutting raw chicken)

Contamination Prevention in Washoe County

Percentage of Establishments with an Observed Contamination Risk Factor Violation



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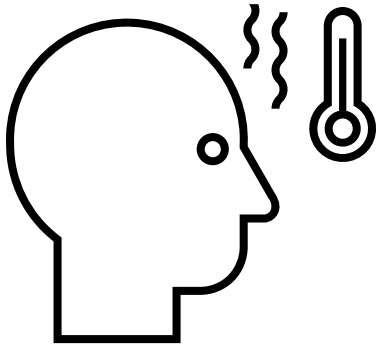
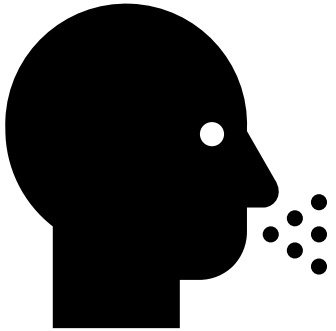
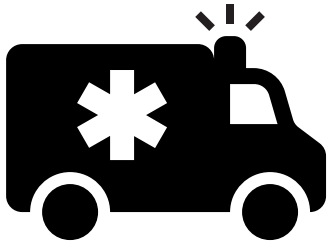
Food Safety Impact and Hazards

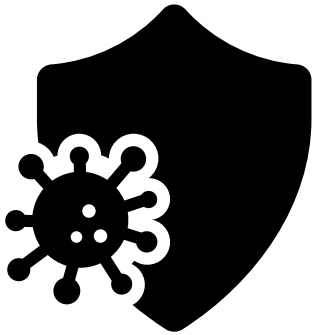
- **Contamination can occur at any stage of food handling:**
  - Processing, receiving, storage, preparation, cooking, service

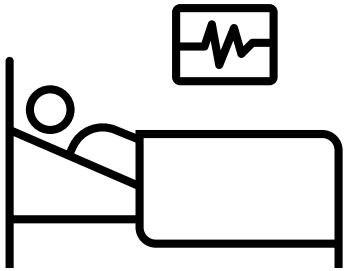
- **All 4 types of contamination can have adverse outcomes for the consumer:**
  - Contraction of foodborne illness
  - Foodborne injury
  - Allergic reaction
  - Chemical poisoning











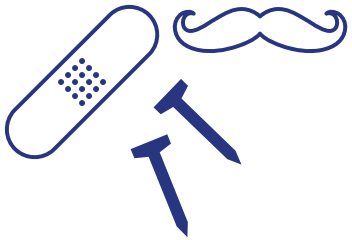
Contamination Case Study:

What would you do?

- **What type of contamination is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

Biological

Chemical



Physical

Allergen

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Contamination Case Study:

What would you do?

Case Study 1:

- **What type of contamination is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Case Study:

What would you do?

Case Study 2:

- **What type of contamination risk is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Case Study:

What would you do?

Case Study 3:

- **What type of contamination risk is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Case Study:

What would you do?

Case Study 4:

- **What type of contamination risk is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Prevention in Washoe County

Maintaining control over common violations

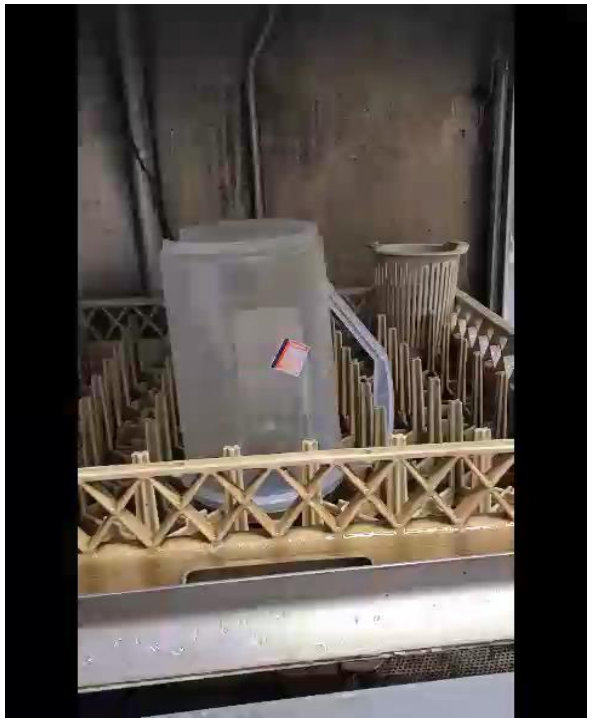
- **Contamination can be prevented at every stage:**
  - Inspecting food upon receipt
  - Separating foods according to final cook temperature
  - Covering food containers and storing at least 6” off the ground
  - Separating chemicals from foods and food contact surfaces
  - Frequent handwashing and glove changes
  - Using only clean and food-safe equipment and materials in the kitchen
  - Cleaning and sanitizing food contact surfaces properly often

Contamination Prevention in Washoe County

Warewashing and Sanitization of Food Contact Surfaces

Wash | Rinse | Sanitize | Airdry

- All food contact surfaces must undergo this process
  - between working with contaminants
  - and at least every 4 hours



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Contamination Case Study:

What would you do?

Case Study 5:

- **What type of contamination risk is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Case Study:

What would you do?

Case Study 6:

- **What type of contamination risk is this?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Contamination Case Study:

What would you do?

Case Study 7:

- **What type of contamination risk could this be?**
- **What is the hazard?**
- **What would a corrective action be?**
- **What should be done differently?**

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Take-Aways and Recommendations

Food Safety Culture

- Active Managerial Control
  - Consistent training
  - Clear expectations
  - Monitoring and verification
- Lead By Example
- Create Supportive Environment
  - Understanding the public health rationale
  - Maintain necessary materials

Physical Space

- Watch the flow of food through your facility
  - Are there any high-risk points?
  - Can your space be organized better?
- Use Visual Cues
  - Color-coding equipment
  - Signage and posters
  - Clear labeling

Education

- Food Safety Focus
  - Risk prevention vs. Step-by-step
- Utilize our Resources
  - Food Safey Resource Library
- Ask your Inspector!

Tools for Success

Refrigerated Storage

Cover, label and date all prepared foods.

Cooked and ready-to-eat foods

Cleaned, prepared fruits and vegetables

Unwashed fruits and vegetables

Raw fish, seafood, whole muscle meat, pork and shell eggs

Raw ground meats

Raw chicken, turkey, poultry, and stuffed foods

Store off the floor at least 6 inches

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FOOD SAFETY CHECKLIST

The Food Safety Checklist should be used by the person in charge (PIC) to determine compliance with food safety practices that prevent foodborne illness in their facility. This checklist:

- is not comprehensive. Your facility will be evaluated on other items of compliance during an inspection.
- only includes items that, if found out of compliance, *must* be immediately corrected on site during an inspection and directly impacts the facility's inspection score.
- may be used with the NNPH Food Establishment Field Inspection Guide to determine how items would be marked and corrected during a routine inspection.

	In	Out	#	Description
Supervision; Employee Health & Hygiene	☐	☐	1.	PIC is present; PIC is a Certified Food Protection Manager (Risk Category 2s & 3s); PIC demonstrates active managerial control over employees and food safety risks at facility.
	☐	☐	2.	Facility has written procedures for the cleanup of vomit/diarrhea; employees are aware of exclusion policy.
	☐	☐	3.	Food handlers cover sores/cuts on hands with bandage and gloves; PIC restricts or excludes sick employees.
	☐	☐	4.	Employee drinks have fitted lid and straw; employees eat, taste, and drink in a way that avoids cross contamination.
	☐	☐	5.	Employees with runny nose, sneezing, coughing, and watery eyes are restricted from food/equipment.
Preventing Contamination by Hands	☐	☐	6.	Employees wash hands for at least 20 seconds as often as needed.
	☐	☐	7.	Employees use utensils or gloved hands to prevent bare hand contact with ready to eat (RTE) food.
	☐	☐	8a.	Handwashing sinks are clear and accessible; sinks are used for handwashing only.
	☐	☐	8b.	All handwashing sinks are stocked with soap and paper towels; handwashing signs are posted at each sink.
Approved Sources	☐	☐	9a.	All food comes from an approved source.
	☐	☐	9b.	All molluscan shellfish come from sources listed on the Interstate Certified Shellfish Shippers List (ICSSL).
	☐	☐	9c.	All game animals and wild mushrooms come from an approved source.
	☐	☐	10.	All time/temperature control for safety (TCS) food is received at ≤ 41˚F; eggs and milk are received at ≤ 45˚F.
	☐	☐	11.	Food is honestly presented and free from mold; packages and cans of food are in good condition.
	☐	☐	12a.	Facility maintains annual parasite destruction letters for fish served raw or undercooked.
	☐	☐	12b.	Shellstock tags are stored with the shellstock until last shellfish is sold; tags are marked with the last date of sale; tags for past 90 days are stored chronologically on site.
Food Protected from Contamination	☐	☐	13a.	All raw animal foods are stored away from or underneath RTE foods in all equipment.
	☐	☐	13b.	All raw animal foods are stored away from each other, or in order of minimum cook temperature from top to bottom: fish/seafood/whole muscle meat/raw shell eggs/pork, then ground meats, then poultry and stuffed foods.
	☐	☐	13c.	All food is stored or handled in a way that protects it from environmental contamination.
	☐	☐	14.	All in-use food prep surfaces such as cutting boards and utensils that contact TCS food are washed, rinsed, and sanitized every 4 hours minimum; equipment/utensils not in use are clean to sight and touch.
	☐	☐	15a.	Food is not re-served after being sold or served to a consumer.
	☐	☐	15b.	Food that has been contaminated or obtained from an unapproved source is discarded.

ENVIRONMENTAL HEALTH SERVICES
1001 East Ninth Street, Building B, Reno, Nevada 89512
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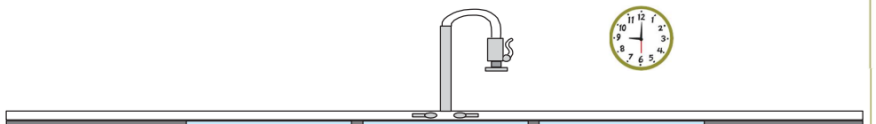
NN PH

Manual Warewashing



Dirty Drainboard				Clean Drainboard
Pre-clean: Rinse, scrape or soak.	Soapy water, minimum of 110°F (unless detergent label directions give other temperature). Change when suds are gone, when water is dirty or greasy, or when water is no longer the correct temperature.	Dip in clean water, rinse under running water from faucet, or spray with clean water.	Submerge in approved chemical sanitizer per label directions for water temperature, chemical concentration and soaking time (household bleach 50-100 ppm for 30 seconds) or in hot water at least 171°F.	Air dry. Do not dry with towel or stack when wet.
	1st Compartment WASH	2nd Compartment RINSE	3rd Compartment SANITIZE	

REMINDERS:

- Three compartment sink does not have to be set up when not actively warewashing.
- Clean and sanitize sink before each use.
- Sponges are allowed for use in the first compartment ONLY.
- Thermometer must be available and used to monitor wash and sanitizing water temperatures
- Test strips must be available and used to monitor chemical sanitizer concentration
- To use hot water for sanitization, the 3rd compartment of a 3-compartment sink must have a built-in heater to keep water at or above 171°F
- Do not store chemicals above three compartment sink.

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Chemical Sanitizing/Dish Machine Log

Chemical Concentrations*: Chlorine = 50-100 ppm Quaternary ammonia (Quat) = 200-400 ppm

Corrective action must be taken if the chemical concentration requirement is not met.

Date	Time	Initials	Sanitizer Concentration (ppm)	Corrective Action Taken (if needed)

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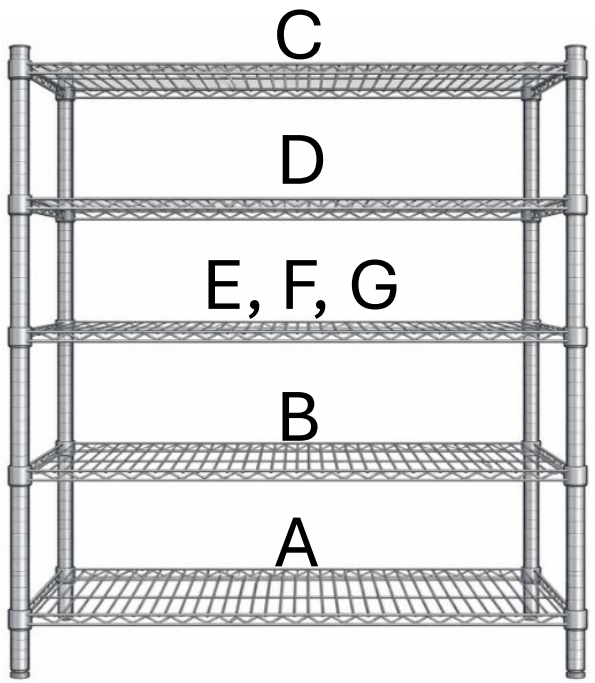
Questions?

Pre-Workshop Quiz Answers:

1. A
2. A, B, D, E
3. B
4. 

5. D

TURN IN YOUR QUIZ TO GET ATTENDANCE FOR THIS WORKSHOP!

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