Voluntary National Retail Food Regulatory Program Standards

DEFINITIONS

The following definitions apply in the interpretation and application of these Standards.

1) **Active Managerial Control** – The purposeful incorporation of specific actions or procedures by industry management into the operation of a business to attain control over foodborne illness risk factors.
2) **Auditor** – Any authorized city, county, district, state, federal, tribal, or other third-party person who has no responsibilities for the day-to-day operations of that jurisdiction and is charged with conducting a verification audit, which confirms the accuracy of the self-assessment.
3) **Baseline Survey** – See Risk Factor Study.
4) **Candidate** - A regulatory officer whose duties include the inspection of retail food establishments.
5) **Compliance and Enforcement** – Compliance includes all voluntary or involuntary conformity with provisions set forth by the regulatory authority to safeguard public health and ensure that food is safe. Enforcement includes any legal and/or administrative procedures taken by the regulatory authority to gain compliance.
6) **Confirmed Foodborne Disease Outbreak** – means a foodborne disease outbreak in which laboratory analysis of appropriate specimens identifies a causative agent and epidemiologic analysis implicates the food as the source of the illness or epidemiological analysis alone implicates the food as the source of the illness.
7) **Direct Regulatory Authority (DRA) –** The organizational level of government that is immediately responsible for the management of the retail program. This may be at the city, county, district, state, federal, territorial, or tribal level.
8) **Enforcement Actions –** Actions taken by the regulatory authority such as, but not limited to, warning letters, revocation or suspension of permit, court actions, monetary fines, hold orders, destruction of food, etc., to correct a violation found during an inspection.
9) **Follow-up Inspection –** An inspection conducted after the initial routine inspection to confirm the correction of a violation(s).
10) **Food Code Interventions** – the preventive measures to protect consumer health stated below:
    1. management's demonstration of knowledge;
    2. employee health controls;
    3. controlling hands as a vehicle of contamination;
    4. time / temperature parameters for controlling pathogens; and
    5. consumer advisory.
11) **Food-Related Injury** – Means an injury from ingesting food containing a physical hazard such as bone, glass, or wood.
12) **Foodborne Disease Outbreak** – The occurrence of two or more cases of a similar illness resulting from the ingestion of a common food.
13) **Good Retail Practices (GRP's)** – Preventive measures that include practices and procedures to effectively control the introduction of pathogens, chemicals, and physical objects into food, that are prerequisites to instituting a HACCP or Risk Control Plan and are not addressed by the *FDA Food Code* interventions or risk factors.
14) **Hazard** – A biological, chemical, or physical property that may cause food to be unsafe for human consumption.

15) **Intervention Strategy** – food protection activities, initiatives, or tools implemented to achieve immediate and/or long-term control of foodborne illness risk factors.
16) **National Registry of Retail Food Protection Programs (National Registry) –** A listing of retail food safety programs that have voluntarily enrolled as participants in the *Voluntary National Retail Food Regulatory Program Standards*.
17) **Person in charge (PIC)** – The individual present at a food establishment who is responsible for the operation at the time of inspection.
18) **Program Element –** One of the program areas for which a National Standard has been established such as regulations, training, inspection system, quality assurance, foodborne illness investigation, compliance and enforcement, industry and consumer relations, and program resources.
19) **Program Manager** – The individual responsible for the oversight and management of a retail food regulatory program.
20) **Quality Records –** Documentation of specific elements of program compliance with the National Standards as specified in each Standard.
21) **Risk Control Plan (RCP)** – a concisely written management plan developed by the retail or food service operator with input from the health inspector that describes a management system for controlling specific out-of-control risk factors.
22) **Risk Factors** – the improper employee behaviors or improper practices or procedures in retail food establishments stated below which are most frequently identified by epidemiological investigation as contributing to foodborne illness or injury:
    1. improper holding temperature;
    2. inadequate cooking;
    3. contaminated equipment;
    4. food from unsafe source; and
    5. poor personal hygiene.
23) **Risk-Based Inspection** – A retail food establishment inspection that prioritizes the identification and correction of risk factors that contribute to foodborne illness.
24) **Risk Factor Study** (formerly Baseline Survey) – A study on the occurrence of foodborne illness risk factors in restaurants, retail food stores, health care facilities, and K-12 schools under a jurisdiction's regulatory authority.
25) **Routine Inspection –** A full review and evaluation of a food establishment's operations and facilities to assess its compliance with the jurisdiction's laws, statutes, ordinances, and regulations, at a planned frequency determined by the regulatory authority. This does not include re-inspections and other follow-up or special investigations.
26) **Self-Assessment** – An internal review by program management to determine whether the existing retail food safety program meets the *Voluntary National Retail Food Regulatory Program Standards*.
27) **Self-Assessment Update** – Comparison of one or more program elements against the *Voluntary National Retail Food Regulatory Program Standards* between the required 60-month periodic self-assessment.

27) **Standardization Inspection** – An inspection used to demonstrate a candidate's knowledge, communication skills, and ability to identify violations of all regulatory requirements and to develop a risk control plan for identified, uncontrolled risk factors.
28) **Suspect Foodborne Outbreak** – Means an incident in which two or more persons experience a similar illness after ingestion of a common food or eating at a common food establishment/gathering.
29) **Trainer** – An individual who has successfully completed the following training elements as outlined in Steps 1 – 3, Standard 2, and is recognized by the program manager as having the field experience and communication skills necessary to train new employees.
    1. Satisfactory completion of the prerequisite curriculum;
    2. Completion of a field training process similar to that contained in Appendix B-2; and
    3. Completion of a minimum of 25 independent inspections and satisfactory completion of the remaining course curriculum.
30) **Training Standard** – An individual who has successfully completed the following training elements AND standardization elements in Standard 2 and is recognized by the program manager as having the field experience and communication skills necessary to train new employees. The training and standardization elements include:
    1. Satisfactory completion of the prerequisite curriculum;
    2. Completion of a field training process similar to that contained in Appendix B-2;
    3. Completion of a minimum of 25 independent inspections and satisfactory completion of the remaining course curriculum;
    4. Successful completion of a standardization process based on a minimum of eight inspections that includes development of HACCP flow charts, completion of a risk control plan, and verification of a HACCP plan, similar to the FDA standardization procedures;
    5. Completion of a minimum of 20 contact hours of continuing education in food safety every 36 months after the initial training is completed as outlined in Standard 2; and
    6. Standardization maintained every three (3) years as outlined in Standard 2.
31) **Verification Audit** – A systematic, independent examination by an external party to confirm the accuracy of the Self-Assessment.