

Town of Buckland
Board of Health
17 State Street-Buckland
Shelburne Falls, MA 01370

Buckland Formal Policy
for a Uniform Food Inspection Program
(adopted by the Board of Health on 3/14/2012)

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.

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;
 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 following self-assessment procedure and the appropriate Table in Appendix D.

NOTE: *For the purposes of this Policy, the attached Standard 4 Self-Assessment Worksheet will be used.*

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.

III. Fees:

1. The Board of Health may assess reasonable fees for permits, licenses, inspections, and oversight services issued or performed by the Board or its representatives in the execution of its responsibilities, pursuant to M.G.L. c. 40 § 22F.
2. A written schedule of fees shall be maintained by the Board of Health and may be amended from time to time, as needed, by simple vote of the Board of Health at any properly convened public meeting.

IV. Effective Date:

This policy was adopted by vote of the Board of Health of the Town of Buckland at a public meeting held on March 14, 2012.

A public hearing on this policy was held on March 14, 2012. Publication of the notice of public hearing was made on February 27, 2012 and March 5, 2012, in the Greenfield Recorder.

Signed and Certified under the pains and penalties of perjury,

Richard S. Warner

Richard S. Warner BOH Chairperson

JAMES J. BAUERLEIN

James J. Bauerlein Board Member

Terry A. Estes

Terry A. Estes, Board Member

