

Determining Status of Compliance for: _____

Dates: _____

Cost Analysis

Item No. 1

Provision: Meets the requirements of 3717.071 of the Revised Code (ORC)/Ohio Administrative Code (OAC) 901:3-4-04 and 3701-21-02.2.

Method of Determination:

Document any costs that do not pertain directly to the food safety program and the local health department (LHD) rationale for including them. Cost analyses will be reviewed by state agencies. See Cost Analysis Review Form Worksheet for findings. Investigate findings and document the district's rationale for data entered on cost analysis forms. (This will include all cost analyses since the last survey.)

Status:

Action Plan Required?

Comments:

Fee Setting

Item No. 2

Provision: Licensing fees do not exceed the maximum calculated fee. Licensing categories are as required by rule. Any fees that have been disapproved are not being charged [ORC 3717.25(A), OAC 901:3-4-03, OAC 901:3-4-04, ORC 3717.45(A), OAC 3701-21-02.1, OAC 3701-21-02.2].

For vending FSO, the fee may not be increased by a percentage of increase over the previous year's fee that exceeds the percentage of increase in the consumer price index for the immediately preceding calendar year [ORC 3717.07(B)(7)].

***Note: Verify the LHD is not overcharging for their low risk mobile fee.**

Method of Determination:

Year:

A. Does the LHD use any licensing categories other than those provided in code? (OAC 901:3-4-03, 3701-21-02.1)

☐ YES

☐ NO

1. If the answer to (A) is YES, what are the categories?

B. Compare the fees charged (state portion excluded) to the maximum allowed fees indicated in their cost analysis. Are the fees charged _____ the fees calculated on the cost analysis? (OAC 901:3-4-04, 3701-21-02.2)

- ☐ HIGHER THAN
☐ LOWER THAN
☐ EQUAL TO

* Request the LHD's fee schedule, compare the fees to the maximum allowable fees in the cost analysis, and answer questions above in B.

C. Does the LHD charge any licensing fees that have been disapproved by the district advisory council or city council?
[3717.25(A), 3717.45(A)]

- ☐ YES
☐ NO

1. If the answer to (C) was YES, what are the fees?

D. Did the LHD increase their vending FSO fee for the licensing year being reviewed?

- ☐ YES
☐ NO

1. If YES, did the increase exceed the percentage of increase in the consumer price index for the immediately preceding calendar year?

Item No. 2 Continued...

Year:

A. Does the LHD use any licensing categories other than those provided in code? (OAC 901:3-4-03, 3701-21-02.1)

- ☐ YES
☐ NO

1. If the answer to (A) is YES, what are the categories?

B. Compare the fees charged (state portion excluded) to the maximum allowed fees indicated in their cost analysis. Are the fees charged _____ the fees calculated on the cost analysis? (OAC 901:3-4-04, 3701-21-02.2)

- ☐ HIGHER THAN
☐ LOWER THAN
☐ EQUAL TO

* Request the LHD's fee schedule, compare the fees to the maximum allowable fees in the cost analysis, and answer questions above in B.

C. Does the LHD charge any licensing fees that have been disapproved by the district advisory council or city council?
[3717.25(A), 3717.45(A)]

- ☐ YES
☐ NO

1. If the answer to (C) was YES, what are the fees?

D. Did the LHD increase their vending FSO fee for the licensing year being reviewed?

- ☐ YES
☐ NO

1. If YES, did the increase exceed the percentage of increase in the consumer price index for the immediately preceding calendar year?

Item No. 2 Continued...

Year:

A. Does the LHD use any licensing categories other than those provided in code? (OAC 901:3-4-03, 3701-21-02.1)

- ☐ YES
☐ NO

1. If the answer to (A) is YES, what are the categories?

B. Compare the fees charged (state portion excluded) to the maximum allowed fees indicated in their cost analysis. Are the fees charged _____ the fees calculated on the cost analysis? (OAC 901:3-4-04, 3701-21-02.2)

- ☐ HIGHER THAN
☐ LOWER THAN
☐ EQUAL TO

* Request the LHD's fee schedule, compare the fees to the maximum allowable fees in the cost analysis, and answer questions above in B.

C. Does the LHD charge any licensing fees that have been disapproved by the district advisory council or city council?
3717.25(A), 3717.45(A)

- ☐ YES
☐ NO

1. If the answer to (C) was YES, what are the fees?

D. Did the LHD increase their vending FSO fee for the licensing year being reviewed?

- ☐ YES
☐ NO

1. If YES, did the increase exceed the percentage of increase in the consumer price index for the immediately preceding calendar year?

Status:

Action Plan Required?

Comments:

Item No. 3

Provision: A 20-day notice of hearing was mailed to affected entities. The notice contained the place, date, time, and amount of proposed fees. The public hearing was held for established fees [ORC 3717.25(A), ORC 3717.45(A)].

Method of Determination:

Year:

A. Was a public hearing held before the license fee was established? [3717.25(A), 3717.45(A)]

- ☐ YES Date of mailing: Date of hearing: Date fees established:
☐ NO
☐ N/A

*Note: Please provide a copy of the minutes or sign-in sheet from the hearing.

1. If the answer to (A) was NO, explain:

B. Were the license holders informed of the hearing by mail at least 20 days prior to the hearing? [3717.25(A), 3717.45(A)]

- ☐ YES
☐ NO
☐ N/A (No licenses were issued for the license classification fee being changed, so no license holders were affected).

*Note: Please provide a copy of the Notice of Hearing.

COMMENTS:

1. If the answer to (B) is NO, explain:

COMMENTS:

2. Did the notification contain the location, date, time, and amount of proposed fees?

- ☐ YES
☐ NO

COMMENTS:

C. Were the fees established by emergency measure?

- ☐ YES
☐ NO

COMMENTS:

Item No. 3 Continued...

Year:

A. Was a public hearing held before the license fee was established? [3717.25(A), 3717.45(A)]

☐ YES Date of mailing: Date of hearing: Date fees established:
☐ NO
☐ N/A

*Note: Please provide a copy of the minutes or sign-in sheet from the hearing.

1. If the answer to (A) was NO, explain:

B. Were the license holders informed of the hearing by mail at least 20 days prior to the hearing? [3717.25(A), 3717.45(A)]

☐ YES
☐ NO
☐ N/A (No licenses were issued for the license classification fee being changed, so no license holders were affected).

*Note: Please provide a copy of the Notice of Hearing.

COMMENTS:

1. If the answer to (B) is NO, explain:

COMMENTS:

2. Did the notification contain the location, date, time, and amount of proposed fees?

☐ YES
☐ NO

COMMENTS:

C. Were the fees established by emergency measure?

☐ YES
☐ NO

COMMENTS:

Item No. 3 Continued...

Year:

A. Was a public hearing held before the license fee was established? [3717.25(A), 3717.45(A)]

☐ YES Date of mailing: Date of hearing: Date fees established:
☐ NO
☐ N/A

*Note: Please provide a copy of the minutes or sign-in sheet from the hearing.

1. If the answer to (A) was NO, explain:

B. Were the license holders informed of the hearing by mail at least 20 days prior to the hearing? [3717.25(A), 3717.45(A)]

☐ YES

☐ NO

☐ N/A (No licenses were issued for the license classification fee being changed, so no license holders were affected).

*Note: Please provide a copy of the Notice of Hearing.

COMMENTS:

1. If the answer to (B) is NO, explain:

COMMENTS:

2. Did the notification contain the location, date, time, and amount of proposed fees?

☐ YES

☐ NO

COMMENTS:

C. Were the fees established by emergency measure?

☐ YES

☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Licensing

Item No. 4

Provision: Use of application form prescribed/approved by director of agriculture/director of health (OAC 901:3-4-02, OAC 3701-21-02). License is not issued until a complete application is submitted [ORC 3717.23(B), ORC 3717.43(B)].

Method of Determination:

Using Tables A and B: Based upon the number of licenses issued, determine the number of applications to be sampled. Select the samples using a random sampling method for the last complete licensing year. If the applications are placed within the individual files, only review the applications that are included in the facility files for the locations listed within the Facility Worksheet. For temporaries and mobiles, only review the applications related to the temporary or mobile licenses listed within the Facility Worksheet.

A. Application form used is [OAC 901:3-4-02(C), 3701-21-02(D)]:

- ☐ STATE FORM (Includes ODH's EHDSI or ODH licensing program)
☐ LHD FORM APPROVED BY THE STATE (Verify state approval of forms)
☐ OTHER

1. If other, document findings.

COMMENTS:

B. Are the application forms properly completed?

- ☐ YES
☐ NO
☐ SOMETIMES

Use Table A and B to determine marking of item as "Needs Improvement" if there is consistent error of the application forms not being completed properly.

COMMENTS:

C. Did the licensor issue any licenses before receipt of a completed application?

- ☐ YES
☐ NO
☐ N/A (Applications submitted through EHDSI E-Pay system)

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 5

Provision: Licenses are not renewed prior to Feb. 1 [ORC 3717.23(D), OAC 901:3-4-02(A), ORC 3717.43(D), OAC 3701-21-02(A)].

Method of Determination:

*Review January transmittals for all risk level facilities.

A. Are renewal licenses issued prior to Feb. 1?

- ☐ YES
☐ NO

1. If (A) was marked YES, specify information that led you to this conclusion:

Status:

Action Plan Required?

Comments:

Item No. 6

Provision: The license holder has been charged the correct penalty fee for late application [ORC 3717.23(D), OAC 901:3-4-02(D)(2), ORC 3717.43, OAC 3701-21-02(E)(2)].

Method of Determination:

Using the same sample as in item number four above:

A. Penalty fees are charged for late applications:

- ☐ YES
☐ NO

1. If (A) was marked NO, document 1) license numbers 2) audit numbers 3) facility name 4) date of late application for any noncompliance.

B. Amount of penalty fee charged is correct for late application (25% of the *local* licensing fee).

- ☐ YES
☐ NO

1. If (B) was marked NO, what is the amount being charged?

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 7

Provision (Temporary licenses only): No more than 10 licenses are issued per person; only one license is issued to a person/government entity per event; not issued for more than five consecutive days unless in accordance with law [ORC 3717.23(E), ORC 3717.43(E)].

Temporary licenses are not renewed [ORC 3717.23(D), ORC 3717.43(D)].

Temporary licenses may not be transferred [ORC 3717.26(B), ORC 3717.46(B)].

Method of Determination:

Only review the applications related to the temporary licenses listed within the Facility Worksheet.

A. Is LHD issuing no more than 10 licenses per person/government entity?

- ☐ YES
☐ NO

B. Is LHD issuing licenses for more than five consecutive days (unless in accordance with law)?

- ☐ YES
☐ NO

1. If (B) was marked YES, document findings (include license and audit numbers). Indicate if the noncompliance was associated with a particular event.

Are temporary licenses renewed?

- ☐ YES
☐ NO

1. If (C) was marked YES, document findings (include license and audit numbers). Indicate if the noncompliance was associated with a particular event.

C. Are temporary licenses transferred?

- ☐ YES
☐ NO

1. If (D) was marked YES, document findings (include license and audit numbers). Indicate if the noncompliance was associated with a particular event.

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 8

Provision: Limitations are placed on licenses in accordance with law [ORC 3717.23(F), OAC 3717-1-09(C) and (D), ORC 3717.43(F)].

Mobile licenses have equipment, equipment layout, and items to be sold on the back of license [ORC 3717.23(B), ORC 3717.43(B), 3717-1-09(D)].

Method of Determination:

Check application sample used in item four. Other information obtained during questioning or noted during your review of the LHD license reports may be included in your findings as well. If the local health department allows limitations on licenses, view an example to ensure they are placed on the back of licenses. Check mobile applications for information on the back of the license for the mobile facilities that are listed within the Facility Worksheet.

A. Are formal limitations placed on licenses when needed?

- ☐ YES
☐ NO

1. If (A) is marked NO, documented why. Include name of facility, address, and detail findings here:

B. Do mobile licenses have equipment, equipment layout, and items to be sold or menu on the back of license?

- ☐ YES
☐ NO

1. If NO, document licenses that do not comply.

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 9

Provision: Determination of "Primary Business" is made according to code [ORC 3717.24(B), OAC 3717-1-02, ORC 3717.44(B)].

Method of Determination:

Use the application sample in item four.

A. Determination of "Primary Business" appears to be in accordance with rules.

- ☐ YES
☐ NO

1. If (A) was marked NO, document findings. Include the facility's name, license number, current classification as well as what it should be classified as:

Status:

Action Plan Required?

Comments:

Item No. 10

Provision: Fees are used only for administration and enforcement of RFEs/FSOs [ORC 3717.25(A), OAC 901:3-4-02(D), ORC 3717.45(A), OAC 3701-21-02(E)].

Method of Determination:

A. Can the LHD demonstrate that license fees are only used for the food safety program?

- ☐ YES
☐ NO

Document findings (Examples- separate accounts or line item designation):

Status:

Action Plan Required?

Comments:

Item No. 11

Provision: Licensor charges no additional fees to RFEs/FSOs except for facility review and equipment specifications, collection and bacteriological sampling, and education courses [ORC 3717.25(B), OAC 901:3-4-03(C), ORC 3717.45(B), OAC 3701-21-02.1(C)].

Method of Determination:

Review the fee schedules since last survey.

A. The licensor charges RFEs/FSOs fees for:

- ☐ FACILITY REVIEW AND EQUIPMENT SPECIFICATIONS (Including an expedited plan review fee)
☐ BACTERIOLOGICAL SAMPLING
☐ EDUCATION COURSES
☐ OTHER:

1. If education courses are charged for, have the courses been approved by ODH as provided in ORC 3717.09 and OAC 3701-21-25(A)?

- ☐ YES
☐ NO

a. If (1) is marked NO, explain:

B. Document fees for items not permitted or questionable. Include a copy of fee schedules.

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 12

Provision: Licensor collects correct state amount and certifies the amount to the director of agriculture/director of health within the stated timeframe [ORC 3717.25(C)(2), OAC 901:3-4-02(E), ORC 3717.45(C)(2), OAC 3701-21-02(F)].

Period	Deadline
January 1st - March 31st	May 15th
April 1 st - June 30th	August 15th
July 1 st - September 30th	November 15th
October 1 st - December 31st	February 15th

Method of Determination:

Examine all certifications and transmittals since the last survey.

A. Was the correct amount for each type of license sent to ODA/ODH?

- ☐ YES
☐ NO

1. If (A) was marked NO, document findings:

B. Were the state amounts certified to ODA/ODH on time?

- ☐ YES
☐ NO

1. If (B) was marked NO, document findings:

COMMENTS:

C. Is the LHD using the most current versions of the transmittal report, license report, and temporary report approved by the Directors? (This applies to LHDs not using EHDSI. Review the approval date on the bottom of the forms. Look for the following form approval dates: HEA 5306: 12/01; HEA 5307: 06/13; AGR 1274: 2/24; AGR

1275: 10/14. For LHDs using its own IT system or a system such as HDIS, to generate transmittals, check with central office staff to obtain the form's approval dates and compare that date to the date on the LHDs forms).

- ☐ YES
☐ NO

1. If (B) was marked NO, document findings:

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 13

Provision: If licenses are transferred (conditions of transfers): sale/disposition of RFE/FSO or relocation of the RFE/FSO and determination that the license holder is in compliance with ORC and OAC (by recent inspection). A license may be transferred only once within the licensing period and transferred with the license holder's permission (ORC 3717.26, ORC 3717.46).

Method of Determination:

A. Has the LHD transferred licenses? (Look at licensing reports for the last full licensing year. If you see none, ask.)

- ☐ YES
☐ NO

1. If YES, identify circumstances below (check all that apply):

- ☐ SALE/DISPOSITION OF FACILITY
☐ RELOCATION OF FACILITY
☐ AFTER A DETERMINATION THAT THE CURRENT LICENSE HOLDER IS IN COMPLIANCE WITH THE LAW AND RULES (AS EVIDENCED BY A "RECENT" INSPECTION)

COMMENTS:

2. For licenses transferred, has permission by the current license holder been documented in writing?

- ☐ YES
☐ NO

a. Document consent.

3. Is there any evidence that the LHD transfers a license more than once?

- ☐ YES

- ☐ NO
☐ NOT APPLICABLE (if LHD does not transfer licenses)

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 14

Provisions: Facilities' risk levels are determined according to rule (OAC 901:3-4-05, OAC 3701-21-02.3).

Method of Determination:

Use the application sample in item four.

Use information obtained during questioning of the LHD and/or operator and file review. Check the Facility Worksheet.

A. Are the reviewed RFEs/FSOs properly classified?

- ☐ YES
☐ NO

1. If NO, document findings:

Status:

Action Plan Required?

Comments:

Inspections

Item No. 15

Provision: Conducted at the frequency required [ORC 3717.27(A), OAC 901:3-4-06, ORC 3717.47(A), OAC 3701-21-02.4].

Method of Determination:

Risk, mobile, vending, and temporaries

Using Table A and B, and the total number of licenses issued, determine the sample size for the district. Randomly select the required facilities using one of the acceptable selection processes. Document the name and location for all facilities selected. Document the dates of the required inspections. Do not include re-inspections, follow-ups, etc. This section will be marked as "Needs Improvement" if the number of errors (facilities not inspected correctly) exceeds the number permitted in Table A and B (5% error rate). Use the "Facility Worksheet" (attachment) to do this. Also document the number of minutes that each inspection required. This information should be on the inspection reports. If the LHD environmental health specialist (EHS) is not indicating this on their inspection reports, enter zero on the worksheet. Provide any additional information regarding this below, such as the names of the EHSs that are routinely failing to document inspection times on their inspection reports.

A. Is Inspection frequency acceptable?

- ☐ YES
☐ NO

B. Have more than 15 months lapsed between standard inspections?

- ☐ YES
☐ NO

*The month the inspection was conducted is month zero. Month one is the following month, and the next inspection must be completed before the end of month 15.

1. If (A) was marked NO or (B) was marked YES, mark provision as "Needs Improvement":

C. Were new RFE/FSOs inspected within 30 days of licensing?

- ☐ YES
☐ NO

1. If NO, document findings:

D. Does the department send copies of mobile inspections to the licensing department?

- ☐ YES (This includes notifications sent by EHDSI from another health department using EHDSI.)
☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 16

Provision: Inspections conducted by a registered environmental health specialist (REHS) or environmental health specialist in training (EHSIT) [ORC 3717.27(A), ORC 3717.47(A)].

Method of Determination:

Verify that the health department information sheet includes information about the registration status of their inspecting staff.

A. Are all RFE/FSO inspection staff registered as a REHS or EHSIT?

- ☐ YES
☐ NO

*LHD must demonstrate that staffs' registration is current. (This can be copies of registration card or LHD review of registered EHS within the eLicense portal.)

1. If NO, document findings.

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 17

Provision: Inspections recorded on the proper form [ORC 3717.27(A), ORC 3717.47(A)].

Method of Determination:

A. Inspection forms used are:

- ☐ State forms (Including ODH's EHDSI)
☐ LHD forms approved by the state (Verify state approval of forms.)
☐ Other

1. If other, document findings:

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 18

Provisions: EHS's ability to apply the food code [ORC 3717.11(A), ORC 3717.33 (H), ORC 3717.52(B), OAC 901:3-4-17(B), 3701-21-24(B)].

Method of Determination:

Any EHS that has conducted food inspections within the last licensing year will complete a written assessment.

If an EHS was previously evaluated by ODA/ODH in the current calendar year while working at the same LHD and passed their assessment, they are not obligated to be assessed again. Any EHS that was previously evaluated during the current calendar year while working at a different LHD is still required to be assessed during the current survey. If a department is placed on provisional status due to items 18, 31, and 33 being marked as needs improvement, item 18 does not require re-evaluation at the time of re-survey.

The EHS's will have a maximum of 120 minutes to complete the assessment and will only be allowed to reference a copy of the food code (hard-copy or electronic). No smart watches, cellular phones, or food code "cheat sheets" will be permitted.

The ODA/ODH surveyor will complete an answer key for each EHS that completes the assessment. This will facilitate comparison of findings.

When completing the status of compliance, the surveyor is to comment only about the results of the assessment as a whole (not individual examinees and their individual scores).

Refer to Appendix A of the method of determination for instructions on determining the number of different versions of the assessment to be created, assessment proctoring, and assessment grading.

COMMENTS:

A. Did 50% of the EHS's pass the written assessment with at least an 80%?

☐ YES
☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Procedure/Method**Item No. 19**

Provision: LHD procedure regarding complaints of RFEs/FSOs, includes (a) complaint form, (b) the name and address of the RFE/FSO and a statement of facts about the complaint, including date and time, (c) time frame for investigation based on risk to the public's health, and (d) criteria for declining to investigate [OAC 901:3-4-09(A), OAC 3701-21-02.5].

Method of Determination:

A. Does the LHD have the following regarding complaints? (A check indicates that they have the information.):

- ☐ COMPLAINT FORM OR ELECTRONIC DATABASE FOR COMPLAINTS.
- ☐ GATHERS THE NAME AND ADDRESS OF THE FACILITY/A STATEMENT OF FACTS ABOUT THE COMPLAINT.
- ☐ PROCEDURE FOR ADDRESSING COMPLAINTS.
- ☐ TIME FRAME FOR INVESTIGATION ACCORDING TO THE POTENTIAL RISK TO THE PUBLIC HEALTH RISK (IN PROCEDURE).
- ☐ CRITERIA FOR DECLINING TO INVESTIGATE A COMPLAINT (IN PROCEDURE).

COMMENTS:

*Attach a copy of the LHD's policy and complaint form.

Status:

Action Plan Required?

Comments:

Item No. 20

Provision: Results of complaint investigations are properly documented on a standard inspection form. The complaint form, laboratory results, and inspection form are filed in the facility's file or electronic database (OAC 901:3-4-09, OAC 3701-21-02.5).

Method of Determination:

A. Does the LHD properly document the result of complaint investigations on an RFE/FSO inspection form?

- ☐ YES
- ☐ NO

B. Is the complaint form, laboratory results, and inspection form maintained in the facility's file or electronic database?

- ☐ YES
- ☐ NO

C. For complaints received, did the LHD investigate complaints according to the timeline(s) provided in their procedure?

- ☐ YES
☐ NO

D. Was the complainant notified of results, if requested.?

- ☐ YES
☐ NO
☐ N/A (Complaint was anonymous.)

COMMENTS:

Status:

Action Plan Required?

Comments:

Facility Layout/Equipment Approval

Item No. 21

Provision: Requires person in charge (PIC) and manager certification [OAC 901:3-4-16, OAC 3701-21-25; OAC 3717-1-02.4(A)(2)].

Method of Determination:

*Determine by questioning the LHD staff.

PIC Certification:

A. Were there any new RFEs/FSOs (Risk) licensed for the last full licensing period or high risk mobiles licensed after Sept. 1, 2024?

- ☐ YES
☐ NO

COMMENT:

B. During the period being reviewed, did the LHD require PIC certification for each person in charge, per-shift, in facilities licensed after March 1, 2010, or require one certified PIC per license holder at each event for high risk mobiles licensed after Sept. 1, 2024?

- ☐ YES
☐ NO

COMMENT:

- C. During the period being reviewed, did the LHD require PIC certification for *all* persons in charge of an RFE/FSO in those facilities licensed prior to March 1, 2010, or high risk mobile RFE/FSO licensed prior to Sept. 1, 2024. that was implicated in a foodborne disease outbreak?

☐ YES
☐ NO

COMMENT:

- D. During the period being reviewed, did the LHD require PIC certification for *all* persons in charge of an RFE/FSO licensed prior to March 1, 2010, or high risk mobile RFE/FSO licensed prior to Sept. 1, 2024, when the licensor had documented a failure to maintain sanitary conditions?

☐ YES
☐ NO

COMMENT:

- E. Does the LHD keep track of which facilities require PIC certification?

☐ YES
☐ NO

1. If YES, how do they keep track?

*Determine by questioning LHD staff.

Manager Certification:

- A. Did the LHD require manager certification for one manager in all risk level III and IV FSOs/RFEs? (Note: Each risk level III and IV FSO/RFE must have one manager with an ODH-issued Ohio manager certification.)

☐ YES
☐ NO

COMMENT:

- B. Did the LHD ask to see the manager certification issued by ODH? (Determine by asking the LHD and reviewing inspection reports.)

☐ YES
☐ NO

COMMENT:

Status:

Action Plan Required?

Comments:

Item No. 22

Provision: Required submitted materials are acted upon within 30 days of receipt (OAC 901:3-4-07, OAC 3701-21-03).

Method of Determination:

A. Does the LHD date stamp submitted plans?

☐ YES

☐ NO

1. If NO is marked, how does LHD determine date of receipt?

B. Are the submitted materials acted upon within the 30-day period?

☐ YES

☐ NO

☐ CANNOT DETERMINE

1. If "CANNOT DETERMINE" is marked, indicate why.

Status:

Action Plan Required?

Comments:

Item No. 23

Provision: Requires appropriate materials submission [OAC 3717-1-09(A)(B)(C)].

Method of Determination:

Examine three sets of plans (not to exceed three) that were submitted to the department since their last survey.

A. Number of plans examined:

B. General plan requirements:

Facility and Address:		
	Requirement	Meets (YES, NO, or N/A) Comments

1.	Drawn reasonably to scale	
2.	Type of facility proposed	
3.	Total square footage or micro market linear feet	
4.	Includes all portions of the premises	
5.	Entrances and exits	
6.	Location, number and types of plumbing fixtures, all water supply facilities	
7.	Plan of lighting	
8.	Floor plan showing equipment layout	
9.	Building materials and surface finishes	
10.	Equipment list with manufacturers and model numbers	
11.	Equipment approval as per Code	
12.	Limitations placed on a facility during plan review are also documented on the license	
13.	Date plans received	
14.	Date plan acted upon	
15.	Date of Pre-license inspection	
16.	Date of 30-Day inspection*	

*No more than 30 days after application and license fee have been processed. Document findings under item 15.

COMMENTS:

Facility and Address:		
	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawn reasonably to scale	
2.	Type of facility proposed	
3.	Total square footage or micro market linear feet	
4.	Includes all portions of the premises	
5.	Entrances and exits	
6.	Location, number and types of plumbing fixtures, all water supply facilities	
7.	Plan of lighting	
8.	Floor plan showing equipment layout	
9.	Building materials and surface finishes	
10.	Equipment list with manufacturers and model numbers	
11.	Equipment approval as per Code	
12.	Limitations placed on a facility during plan review are also documented on the license	
13.	Date plans received	
14.	Date plan acted upon	
15.	Date of Pre-license inspection	
16.	Date of 30-Day inspection*	

*No more than 30 days after application and license fee have been processed: document findings under item 15.

COMMENTS:

Facility and Address:

	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawn reasonably to scale	
2.	Type of facility proposed	
3.	Total square footage or micro market linear feet	
4.	Includes all portions of the premises	
5.	Entrances and exits	
6.	Location, number and types of plumbing fixtures, all water supply facilities	
7.	Plan of lighting	
8.	Floor plan showing equipment layout	
9.	Building materials and surface finishes	
10.	Equipment list with manufacturers and model numbers	
11.	Equipment approval as per Code	
12.	Limitations placed on a facility during plan review are also documented on the license	
13.	Date plans received	
14.	Date plan acted upon	
15.	Date of Pre-licensing inspection	
16.	Date of 30-Day inspection*	

*No more than thirty days after application and license fee have been processed: document findings under item 15.

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 24

Provision: Food equipment approvals made in conformance with rules [OAC 3717-1-09(B), 3717-1-04.1(LL)].

Method of Determination:

Determine using plans that were approved during the period being reviewed. In addition, if non-commercial equipment is found in a facility, then check the file/plans to determine prior approval.

A. Does the LHD approve non-commercial equipment?

- ☐ YES
☐ NO

1. If (A) was marked YES, what is the LHD's procedure for approving non-commercial equipment?

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 25

Provision: Temporary facility layout and equipment specifications reviewed [OAC 3717-1-09(E)].

Method of Determination:

Examine plans (not to exceed five) for temporary RFE/FSO operations. Check applications sampled in item four.

- A. Number of plans examined:
- B. Plans for temporary RFEs/FSOs routinely include the items listed in the tables below.

Temporary RFE/FSO and Event:		
	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawing showing the facility layout	
2.	Foods to be prepared and served	
3.	Source of food	
4.	Hot holding facilities	
5.	Cold holding facilities	
6.	Handwashing facilities	
7.	Equipment and utensils	
8.	Support facilities	

COMMENTS:

Temporary RFE/FSO and Event:		
	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawing showing the facility layout	
2.	Foods to be prepared and served	
3.	Source of food	
4.	Hot holding facilities	
5.	Cold holding facilities	
6.	Handwashing facilities	
7.	Equipment and utensils	
8.	Support facilities	

COMMENTS:

Temporary RFE/FSO and Event:		
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	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawing showing the facility layout	
2.	Foods to be prepared and served	
3.	Source of food	
4.	Hot holding facilities	
5.	Cold holding facilities	
6.	Handwashing facilities	
7.	Equipment and utensils	
8.	Support facilities	

COMMENTS:

Temporary RFE/FSO and Event:		
	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawing showing the facility layout	
2.	Foods to be prepared and served	
3.	Source of food	
4.	Hot holding facilities	
5.	Cold holding facilities	
6.	Handwashing facilities	
7.	Equipment and utensils	
8.	Support facilities	

COMMENTS:

Temporary RFE/FSO and Event:		
	Requirement	Meets (YES, NO, or N/A) Comments
1.	Drawing showing the facility layout	
2.	Foods to be prepared and served	
3.	Source of food	
4.	Hot holding facilities	
5.	Cold holding facilities	
6.	Handwashing facilities	
7.	Equipment and utensils	
8.	Support facilities	

COMMENTS:

Status:

Action Plan Required?

Comments:

Enforcement

Item No. 26

Provision: Procedure followed for nonemergency enforcement (including proper designation of persons to act on behalf of the board of health for certain allowed actions). [ORC 3717.29, OAC 901:3-4-08(B), ORC 3717.49, 3701-21-26(B)].

Method of Determination:

- A. The health commissioner or other person employed by the board of health has been authorized to take initial procedural actions to begin action to suspend or revoke a license. (Examine board of health minutes for authorization.)

☐ LHD HAS AN AUTHORIZATION
NAME OF PERSON(S) AUTHORIZED AND/OR POSITION:

☐ LHD HAS NO AUTHORIZATION

COMMENTS:

- B. Was there a proposed suspension or revocation of a license since the last survey?

☐ YES
☐ NO

COMMENTS:

1. If (B) was marked YES, was the proper procedure followed?

☐ YES
☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 27

Provision: Procedure followed for “clear and present danger”/ “immediate danger to the public health” enforcement (including proper designation by the board of health for the health commissioner to act in their behalf). [ORC 3717.29(D)(1), ORC 3717.49(C)(1)]

Method of Determination:

Note: The Health Commissioner is the only LHD staff that may suspend a license or be authorized to suspend.

A. Does the health commissioner (or another person) suspend licenses for an “immediate danger” / “clear and present danger” to the public health?

- ☐ YES
☐ NO

COMMENTS:

B. Has the health commissioner been authorized by the board of health?

- ☐ YES
☐ NO

COMMENTS:

C. Has anyone other than the health commissioner been authorized?

- ☐ YES

If YES, who:

- ☐ NO

COMMENTS:

D. Does any authorization only limit the actions to “suspension”? Note: The health commissioner may not be authorized to revoke a license; only the board of health may revoke a license.

- ☐ YES
☐ NO

COMMENTS:

E. If the LHD has utilized “immediate danger” / “clear and present danger”, were the proper procedures followed?

- ☐ YES
☐ NO
☐ DON'T KNOW
☐ HAVE NOT UTILIZED

COMMENTS AND SUMMARY OF EVENT(S):

Status:

Action Plan Required?

Comments:

Item No. 28

Provision: Prosecutor, at request of the board of health, commences in common pleas court an action requesting relief regarding the act of noncompliance [ORC 3717.31(C), ORC 3717.50(C)].

Method of Determination:

- A. Discuss with the health commissioner and/or environmental health director. Discuss their experience with this item.
Has their prosecutor refused to go forward with actions requested by their board of health?

- ☐ YES
☐ NO

1. If YES, document findings:

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 29

Provision: Fines collected are deposited in the appropriate fund for administration and enforcement of law and rules [ORC 3717.31(D), ORC 3717.50].

Method of Determination:

- A. Discuss with the health commissioner, environmental health director, or financial staff . When fines are collected, are they deposited in the appropriate funds?

- ☐ YES
☐ NO
☐ N/A (Because there have been no fines collected)

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 30

Provision: If the health commissioner or other staff person “embargoes” foods in RFEs/FSOs, have they been properly authorized by the board of health to do so? [OAC 901:3-4-15(F), OAC 3701-21-27]

If the health commissioner or other staff person “tags” articles in RFEs/FSOs, have they been properly authorized by the board of health to do so? [OAC 901:3-4-12(D), OAC 3701-21-28]

Method of Determination:

A. Does the health commissioner or other staff persons “embargo” foods?

- ☐ YES
☐ NO

1. If the answer to (A) is YES, who does this? (Name and position):
2. Have the persons named in (A) been properly authorized by the board of health?

- ☐ YES
☐ NO

COMMENTS:

B. Does the board of health’s embargo resolution include reference to FSOs and OAC 3701-21-27? (FSOs only)

- ☐ YES
☐ NO

COMMENTS:

C. Does the health commissioner or other staff persons “tag” articles per OAC 901:3-4-12?

- ☐ YES
☐ NO

1. If the answer to (A) is YES, who does this (name and position):
2. Have the persons named in (A) been properly authorized by the board of health?

- ☐ YES
☐ NO

COMMENTS:

D. Does the BOH resolution for tagging equipment include reference to FSOs and OAC 3701-21-27? (FSOs only)

- ☐ YES
☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 31

Provision: Does the board of health administer/enforce the food safety code? [ORC 3717.11(A), ORC 3717.29, ORC 3717.49]

Method of Determination:

A. Does LHD have written enforcement procedures?

☐ YES

☐ NO

COMMENTS:

1. If the answer to (A) was marked YES, attach policy.

B. Does the LHD follow their written enforcement procedures for recalcitrant FSO/RFE locations (such as identifying when a follow up inspection is required, timely follow up inspections, marking repeat violations, EHD meetings, etc.)? (Review notes to file, inspection reports, discuss with EHD.)

☐ YES

☐ NO

COMMENTS:

C. Has the board of health sought any enforcement action since the last survey?

☐ YES

☐ NO

1. If the answer to (B) was NO, did records indicate that action should have been presented to the licensor?

2. If the answer to (B) was YES, did the licensor take any action? (Examine historical inspection reports to determine if out of compliance or if critical violations were documented but no follow up action indicated.)

3. For YES or NO, describe the circumstances:

COMMENTS:

Attach a copy of the policy, if applicable.

Status:

Action Plan Required?

Comments:

OTHER

Item No. 32

Provision: The licensor had materials available for the surveyor at the time of the survey (Health Department Information Form).

Method of Determination:

A. Were materials available at the start of the survey or otherwise provided in a timely manner?

- ☐ YES
☐ NO

COMMENTS:

Status:

Action Plan Required?

Comments:

Item No. 33

Provision: Does the health department train and evaluate its' food program EHS(s)? [ORC 3717.11 (A)]

Note: A department's food inspection staff needs to have the knowledge, skills, and ability to effectively perform their role in preventing foodborne illness. Training should include a combination of classroom training and in-field training. The LHD should have an internal verification process to ensure that EHSs are correctly identifying violations within a facility. Finally, ongoing continuing education relating to food safety should be required of a department's food inspection staff to keep them informed of current food safety issues and technologies [OAC 901:3-4-17, OAC 3701-21-24].

Method of Determination:

A. Does the LHD have a written training program that includes the following: new hire training, ongoing training, field training, and evaluation?

- ☐ YES
☐ NO

COMMENTS:

1. If the answer to (A) is YES, attach program.

B. Does the LHD train their food program staff?

☐ YES
☐ NO

1. If the answer to (B) is YES, describe the training (classroom and field work).

COMMENTS:

C. Does the LHD require food program staff to attend ongoing continuing education relating to food safety? (Include trainings from ODA/ODH.)

*Note: This section is for informational purposes only and is not to be counted for compliance in this provision.

☐ YES
☐ NO

1. If the answer to (C) is YES, how many credit hours are required?

COMMENTS:

D. Does the LHD assure that EHSs are correctly identifying violations in facilities?

☐ YES
☐ NO

Parameters: Does the supervisor review inspection reports conducted by EHSs? Does the supervisor compare his/her findings with the EHSs' findings of the same facility? Is there documentation of (D)? How often are staff evaluated?

***Request supervision documentation such as supervisor's inspection reports, EHS performance evaluations, etc. If the answer to (D) is No, mark as "Needs Improvement".**

COMMENTS:

Status:

Action Plan Required?

Comments:

PERFORMANCE STANDARDS

Item No. 34

Provision: The health department trains and encourages computer skills and the use of technology by its staff.

Determination:

A. Does each EHS have a computer at the LHD?

☐ YES

☐ NO

B. Do the EHSs have email addresses at the LHD?

☐ YES

☐ NO

C. Does the LHD utilize a database to conduct inspections and licensing?

☐ YES

☐ NO

1. If YES, identify system:

D. Does the LHD have a web page?"

☐ YES

☐ NO

Web address:

E. Do the EHS's utilize a laptop/tablet to conduct inspections?

☐ YES

☐ NO

COMMENTS:

Item No. 35

Provision: Information (letters of opinion, fact sheets, newsletters, recalls, etc.) from the department of agriculture and health are disseminated in a timely manner to the inspection staff.

Determination:

A. Ask how information is passed through to the EHSs. Through discussions with EHSs, does it appear that information is passed along in a timely manner?

☐ YES

☐ NO

COMMENTS:

Item No. 36

Provision: The health department routinely takes advantage of food training offered by the department of agriculture/health.

Determination:

A. Ask EHSs and supervisors about training opportunities.

COMMENTS:

Item No. 37

Provision The health department offers training opportunities to the regulated industry.

Note: Please elaborate if it appears that the LHD is focusing strongly in these areas.

Determination:

A. Has the LHD offered any training opportunities to their facilities?

- ☐ YES
☐ NO

1. If (A) was answered YES, what was the training (name of training & date).

2. If (A) was answered YES, was the turn out generally:

- ☐ GREAT
☐ OKAY
☐ DISAPPOINTING

3. If (A) was answered NO, does the LHD have any plans for providing their facilities with training?

- ☐ YES
☐ NO

COMMENTS:

B. Does the LHD provide resource materials to their facilities (such as posters, information sheets, newsletters, etc.)?

- ☐ YES
☐ NO

COMMENTS:

Item No. 38

Provision: The health department routinely provides the public with food safety information.

Determination:

A. The LHD provides the public with food safety information.

- ☐ YES
☐ NO

COMMENTS:

Item No. 39

Provision: Staff is trained and knowledgeable about the procedures to investigate and report possible foodborne illnesses. The LHD has written procedures to responding and investigating foodborne illness.

Determination:

A. Does the LDH have a written procedure?

- ☐ YES
☐ NO

1. Are channels of communication identified in the procedures?

COMMENTS:

B. Which LHD staff is involved in FBI investigations? Epidemiologist?

C. Does the LHD have an individual trained on FBI investigations?

- ☐ YES
☐ NO

1. If (C) was marked YES, identify the individual:

D. Does the LHD log all complaints of foodborne illness, even if it does not meet the definition of a foodborne outbreak?

- ☐ YES
☐ NO

COMMENTS:

Item No. 40

Provision: An emergency plan to deal with natural disasters, bioterrorism and other emergencies that involve food safety has been developed and staff has been trained regarding the plan. The LHD encourages facilities to develop a food defense plan.

Determination:

A. Does the LHD have an emergency plan (for natural disasters, bioterrorism, etc.) that includes procedures for dealing with foods that are affected by the emergency?

- ☐ YES
☐ NO
☐ DON'T KNOW

1. If the answer to (A) is "YES", has the staff been trained regarding the plan?

- ☐ YES
☐ NO

COMMENTS:

B. Do EHSs discuss food defense with RFE/FSO operators?

☐ YES

☐ NO

COMMENTS:

Item No. 41

Provision: LHD has a procedure to help attain compliance.

Determination:

A. What methods does the LHD use to facilitate correction of violative conditions?

☐ PRIORITIZATION OF VIOLATIONS

☐ RISK CONTROL PLANS

☐ SCHEDULED PLAN OF CORRECTION

☐ INCREASED INSPECTION FREQUENCY

☐ FOLLOW-UP INSPECTIONS

☐ MAKES EDUCATIONAL MATERIALS AVAILABLE

☐ PROVIDES AN EDUCATIONAL OPPORTUNITY

COMMENTS: