



RISK CONTROL PLAN CHEMICAL SANITIZING

This "Risk Control Plan" is a pledge by the manager of the food establishment to implement and maintain the actions described below in an effort to gain control over a specific hazard identified at the time of inspection. The plan should remain in effect for at least 14 days as outlined in the time period below. Failure on the part of management to implement and maintain this plan during the specified timeframe may result in enforcement.

PART I: CODE REQUIREMENT [310:257-7-66, 75, 79, 93, 95(3)]

Equipment food-contact surfaces and utensils shall be sanitized. A sanitizing solution shall be used in accordance with the product's EPA registered label use instructions. Mechanical dish machines shall be operated in accordance with the machine's data plate and other manufacturer's instructions.

PART II: DAILY CONTROL ACTIONS

- Manager, or designee, shall test temperature and concentration of sanitizing solution in a 3-compartment sink or mechanical dish machine at intervals of time that allow for proper maintenance of correct concentration and temperature. Record test results in a log.
- A re-inspection for compliance will be conducted in approximately two weeks. This monitoring plan and all logs shall be available for review by the Health Department.

PART III: CORRECTIVE ACTION WHEN SANITIZING SOLUTIONS ARE INCORRECT

- 3-compartment sink: If manager, or designee, finds the concentration of the sanitizing solution to be incorrect, the concentration shall be adjusted according to the manufacturer's EPA registered label. Have sanitizer dispensers serviced if needed.
- Mechanical dish machine: If the sanitizer concentration is not according to the data plate of the machine, check to see if the sanitizer is empty and replace if needed. If the dish machine is not sanitizing properly, have the machine serviced or repaired.
- Any repair receipts shall be available for review by the Health Department.
- Utilize an alternate method to sanitize (i.e. in the 3-compartment sink) until equipment is operating correctly. If unable to sanitize, only single-use items may be used to prepare and serve food.
- All corrective actions shall be recorded on a log.

As manager of _____

located at _____

I pledge to implement the provisions of this Risk Control Plan for the period of time from:

_____ to _____

I decline to implement a Risk Control Plan designed to prevent the re-occurrence of specific hazards.

Owner/Manager Signature Date _____

Regulatory Representative (witness) County _____ Date _____