



# RISK CONTROL PLAN

## CROSS CONTAMINATION CONTROL

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 REQUIREMENTS [310:257-5-23]

Food shall be protected from cross contamination by separating raw animal foods during storage, preparation, holding, and display from both raw and cooked ready-to-eat foods.

### PART II: DAILY CONTROL ACTIONS (if applicable)

- Manager, or designated employee, shall ensure all staff have been educated at least once, more if needed, on cross-contamination issues:
  - Proper storage of raw animal foods.
  - Proper hand-washing and glove use.
  - Proper use and sanitization of equipment and utensils.
- Manager, or designated employee, shall inspect all refrigerated storage twice a day to ensure raw animal foods are properly stored to avoid possible cross contamination and ensure proper glove use, hand washing, cleaning, and cleaning/sanitization of equipment and utensils when preparing raw animal foods.
- A re-inspection for compliance will be conducted in approximately two weeks. This monitoring plan and all logs tracking these actions shall be available for review by the Health Department.

### PART III: CORRECTIVE ACTIONS IF CROSS-CONTAMINATION OBSERVED

- Discard any possibly contaminated food due to improper storage, improper equipment/utensil usage, and/or improper hand washing and glove use.
- Clean and sanitize contaminated equipment and/or utensils.
- Move the contaminating, raw animal food to the proper location if stored improperly.
- Re-educate employees as needed.
- All corrective actions shall be recorded on the log.

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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 \_\_\_\_\_