



Farmers Market Food Establishment Plan Review Worksheet and Standard Operation Procedures (SOP) for Cooking Demonstrations

Farmers Market Name:	
Market Manager:	
Address (Location of Market):	City:
State/Zip:	Phone:
Dates/Times of Operation:	Email:

Please note, persons operating under this license must refer to this SOP as the approved draft to ensure compliance with Person-in-Charge as described in the Food Code 2-103.11.

No specialized foods requiring a variance may be served. Examples of these foods are fermented foods, foods smoked for preservation, cured foods, and reduced-oxygen vacuum packaged foods. See Food Code section 3-502.11.

Instructions: Answer all questions. Use additional pages if needed. If a question does not apply, mark the section as “N/A”.

1. Food *(Note: Any major changes to the menu must be submitted to the regulatory authority (MDARD) prior to their service.*

A. Menu: List all foods that will be served (attach an additional sheet or menu if necessary)

B. Food Source: All foods must be purchased from sources that comply with the law. List where you purchase all your food (e.g., farmers market vendor, GFS, etc.):

_____ **The use of home-prepared foods, including those produced under the Cottage Food Law, is prohibited for cooking demonstrations. Indicate by initialing the line provided that these foods will not be served.**

C. Storage: Indicate where you will store all food and food-related items at the market (e.g., refrigerator, freezer, cooler with ice, chafing dishes, steam table, cambro, dry goods shelf, etc.).

Raw meats:	Cold cooked or ready to eat food:
Hot cooked or ready to eat food:	Unopened canned products:
Ice:	Perishable beverages:
Condiments:	Dry goods:
Vegetables/Fruits	Non-perishable beverages:
Refrigerated foods under 41°	Solid Frozen Foods

D. Food Transportation: List all methods of transporting food to the farmers market.

Food To Be Transported	Transportation Method (e.g., refrigerated truck, stock truck, cambro, etc.)
Hot Foods (list):	
Cold Foods (list):	

E. Thawing: List foods that will be thawed by one of the following approved methods.

Method	Food
Under Refrigeration (41°F or below):	
Under Cold Running Water:	
In a Microwave Oven followed by Cooking:	
During Cooking:	

F. Preparation: The handling of ready-to-eat foods with bare hands is prohibited. Indicate what ready-to-eat foods will be served and how bare hand contact will be avoided (gloves, utensils, deli papers).

Food items (e.g., hotdog bun, lemons)	Barrier Used (e.g., gloves, utensil)

G. Produce Preparation: Raw produce must be washed before preparation. Please detail where and how produce is washed.

Produce types (e.g., melons, greens)	Location and method for washing

H. Cross Contamination Prevention: Raw animal products and unwashed fruits and vegetables must be handled and stored in a manner that prevents cross-contamination of cooked and ready-to-eat foods. Indicate where you will store these items.

Unwashed fruits and vegetables:	Raw Shell Eggs:
Raw whole meat cuts:	Raw Fish/Seafood:
Raw ground meat products:	Cooked and ready-to-eat food
Raw Poultry/stuffing/stuffing containing meats, etc.:	Other:

I. Cooking: Indicate how all raw potentially hazardous foods will be cooked. (*NOTE: Please mark foods that are cooked to order with an * and include a copy of the Consumer Advisory.*)

Food	Cooking Method	Final Cooking Temperature
<i>(example) Burgers</i>	<i>Charbroiler</i>	<i>155°F</i>

J. Reheating: Indicate all foods that will be reheated for hot holding and the type of reheating proposed. Foods must be reheated to 165°F for 15 seconds within 2 hrs.

Food	Equipment Used (e.g., microwave)

K. Hot Holding: Indicate the equipment that will be used. Foods must be maintained at 135°F or above during hot holding.

Equipment Used

L. Cold Holding: Indicate the equipment used. Foods must be maintained with an internal temperature of 41°F or below during cold holding.

Equipment Used
<i>True refrigerator</i>

M. Date Marking: Ready-to-eat potentially hazardous foods must be date marked with a method that indicates when they need to be discarded. Indicate the date marking method to be used, include the maximum number of days between prep/opening and discarding. Maximum number of days cannot exceed 7 days.

2. Employee Health and Hygiene:

A. Complete the following and Initial to verify agreement to comply:

Responsibility	Initial
Employees will report to work clean and in clean clothes:	
Employees will use proper hair restraints (describe restraint used.)	
Employees will not use tobacco in the food areas.	
Employees will not eat in the food areas.	
Employees will only drink from a closed beverage container or equivalent, in the food area.	
Employees will cover all cuts with waterproof bandages.	
Employees will cover cuts on hands with a bandage and a proper glove.	
Employees will not wear nail polish or will cover the nails with gloves. Nails will be kept trimmed and clean.	
Employees will not wear hand/wrist jewelry, with the exception of a plain wedding band.	
Soap, paper towels, waste receptacle and a handwashing notice will be provided at each hand washing location.	

B. Complete the following and Initial to verify agreement to comply:

Responsibility	Initial
Employees will wash hands after touching bare human body parts other than clean hands and clean, exposed portions of arms.	
Employees will wash hands after using the toilet room.	
Employees will wash hands after caring for or handling service animals or aquatic animals.	
Employees will wash hands after coughing, sneezing, using a handkerchief or disposable tissue, using tobacco, eating, or drinking.	
Employees will wash hands after handling soiled equipment or utensils.	
Employees will wash hands during food preparation, as often as necessary to remove soil and contamination when changing tasks.	
Employees will wash hands when switching between working with raw food and working with ready-to-eat food.	
Employees will wash hands before donning gloves for working with food.	
Employees will wash hands after engaging in other activities that contaminate the hands.	

C. Hand Washing: Please detail a description of handwashing facilities, including a drawing of the hand washing station. Hand washing stations must be easily accessible at all times and used for no other purpose other than hand washing:

D. Employee Health: Farmers Market cooking demonstration participants must be made aware of their duty to report the following symptoms and illness and take appropriate action. Review the following and initial to verify agreement to comply:

Reportable Symptoms	Action	Return to Work Criteria	Initial
Vomiting	Exclude from cooking demonstration	Symptom free for at least 24 hrs or provide medical documentation that states the symptom is from a noninfectious condition	
Diarrhea	Exclude from cooking demonstration	Symptom free for at least 24 hrs or provide medical documentation that states the symptom is from a noninfectious condition	
Jaundice	Exclude from cooking demonstration, call manager, Notify Health Department	Medical documentation that food employee is free of hepatitis A virus or other fecal-orally transmitted infection	
Sore Throat w/Fever	Restrict from food area of cooking demonstration	Medical documentation stating received antibiotic therapy for >24 hrs, one negative throat culture, or is free from infection from Streptococcus pyogenes	
Infected Wound or Pustular Boil	Restrict from food area of cooking demonstration	After the skin, infected wound, cut, or pustule boil is properly covered.	
Reportable Illnesses		Action and Return to Work Criteria	Initial
<ul style="list-style-type: none"> • Salmonella typhi • Shigella • Shiga toxin-producing Escherichia coli • Hepatitis A • Norovirus 		If diagnosed with or exposed to these illnesses, you must be excluded from the cooking demonstration and you cannot return to work at the cooking demonstration until approval has been received from the Local Health Department	

3. Food Contact Surfaces:

A. Ware washing: Describe how all utensils and equipment (include all clean-in-place equipment) will be washed. Include the frequency of washing, the facilities used, the procedures used and the chemicals used. *(NOTE: In-use utensils for potentially hazardous foods must be washed, rinsed and sanitized at least every four hours.)*

Equipment	Frequency	Location		Procedure	Sanitizer & Concentration
		On-site	Off-site		

___ Test strips must be provided to monitor concentrations of each type of sanitizer used on site. Indicate by initialing the line provided that test strips will be provided and used.

B. Prep and Cooking Surfaces: Describe how food contact preparation surfaces and cooking surfaces will be cleaned and sanitized.

Surface	Frequency	Procedure	Sanitizer/Concentration
<i>Stainless Counter</i>	<i>Every 4 hours</i>	<i>Wash/rinse/sanitize</i>	<i>Chlorine 100 ppm</i>

C. Chemical Storage: Insure toxic chemicals are adequately stored to prevent contamination of food and food related items.

4. Water Supply:

(Note: Water must be obtained from an approved source that has completed state or local sampling requirements, contact the Local Health Department for additional information on non-municipal sources.)

A. Water Source/Storage: Indicate how potable water will be supplied to the Farmers Market. Describe in detail any support equipment that will be used to obtain water (e.g., food grade hoses). List the size of holding tanks or water containers. Sufficient hot water must be provided.

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B. Cleaning and Sanitizing of Water Supply Equipment: List method and frequency that water equipment, including holding tanks and food grade hoses, will be cleaned and sanitized.

Equipment	Cleaning/Sanitizing Method	Frequency
<i>(example) Holding tanks</i>	<i>Rinsed out with chlorinated water</i>	<i>After each event</i>

C. Backflow Prevention: List equipment that will require backflow prevention and what method of backflow prevention will be provided.

Equipment	Backflow Prevention Method
<i>(example) Carbonator</i>	<i>ASSE 1022 device</i>

5. Sewage Disposal:

(Note: Sewage must be disposed of at an approved sewage disposal site.)

A. Describe how liquid waste generated at the Farmers Market from handwashing sink, utensil washing sink, etc., will be disposed of:

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B. Backflow Prevention: Culinary sinks, ice bins, ice machines and food equipment must be protected so that sewage cannot “back up” into them. Describe how you will protect your food and equipment from sewage:

Equipment	Backflow Prevention Method
<i>(Example) Ice Bin</i>	<i>Air gap between ice bin and blue boy</i>

C. Toilet Facilities: Describe anticipated toilet facilities and how hand washing after bathroom use will be handled.

6. Environmental Hazards:

A. Pest Control: Describe the methods you will use to keep flying and crawling pests out of the food preparation and serving area (*e.g., air curtains, screening, etc.*).

Area of Concern	Method of Pest Control
Service area:	
Cooking/grilling/smoking locations:	
Other equipment exposed to open air:	
Other areas of concern:	

7. Floors/Walls/Ceiling:

A. Floors - Describe the flooring of the Farmers Market location:

B. Walls: Describe the walls for the Farmers Market location.

C. Ceiling: Food must be protected at all times. Describe the ceiling or overhead protection for open/exposed food at the Farmers Market.

8. Equipment Specifications:

A. Food Equipment: List Make and Model of all food equipment. Include fixed and countertop (including cooking, cold storage, hot holding and food preparation).

Make	Model

B. Dish sinks: Indicate the size of the compartments of the sinks, or the size of the tubs that will be used for dish washing.

9. Electricity: Is electricity required for the operation? YES____ NO____

If yes, what is the source of the electricity? If you are reliant upon electricity provided by others, please indicate how you will insure electricity is left running overnight, if applicable.

10. This space is reserved to address circumstances that are specific to this Farmers Market and that are not accounted for anywhere else in this plan review:

11. Diagram the Farmers Market layout or attach photos or schematics:

Please sketch the proposed set-up of the Farmers Market. Include all inside and outside equipment set-up. This sketch needs to be scaled (indicate scale) or have dimensions on it. If possible, photos that show all parts of the set-up can be used instead of, or to accompany, a sketched diagram, depending on complexity.

It is my intention as the Owner/Operator of this Farmers Market to have the information listed above serve as the Standard Operating Procedures (SOPs) for this operation. I understand that:

- I must operate consistent with the SOPs and menu.

_____ Market Manager

_____ Date

_____ The SOPs have been reviewed and determined to be complete and technically accurate. The SOPs are approved.

_____ The SOPs have been reviewed and have been approved, subject to the following stipulation(s):

_____ Inspector

_____ Agency

_____ Date

Comments: